

UNIVERSITY OF MINNESOTA
MEDICAL SCHOOL

DEPARTMENT OF ANESTHESIOLOGY

7.12 STATEMENT

Statements Required By Section 7.12 of the Board of Regents Policy: *Faculty Tenure*

PART 1. MEDICAL SCHOOL PREAMBLE

I. INTRODUCTORY STATEMENT

This document describes the specific criteria and standards which will be used to evaluate whether candidates from the Medical School meet the general criteria for tenure in Section 7.11 and for promotion to professor in Section 9.2 of the Board of Regents Policy: *Faculty Tenure*. All candidates for promotion and/or tenure in the Medical School are evaluated with the criteria and standards in this preamble. In addition, each department in the Medical School has its own 7.12 Statement (Part II of this document) that further delineates the criteria for promotion and/or tenure within that individual unit. For a complete perspective, the reader is advised to review Sections 7 and 9 in their entirety. Section 7.11 is printed in IV: Criteria for Tenure (see below); Section 9.2 is printed in V.C Promotion to Professor. This preamble contains Criteria and Standards pertaining to:

- A. Appointment
- B. Awarding of indefinite tenure
- C. Promotion from Assistant Professor to Associate Professor and from Associate Professor to Professor
- D. The process for the annual appraisal of probationary and tenured faculty

The criteria, standards, and procedures are applied without regard to race, religion, color, sex, national origin, handicap, age, veteran status or sexual orientation.

The Medical School issues annually to each department, for distribution and information to faculty members, a set of instructions, memoranda, and other documents, giving detailed information on the procedures to be followed in the preparation and consideration of each proposal for tenure and/or promotion in rank. The pertinent documents are identified as exhibits enclosed with a cover memorandum from the Dean.

The Medical School 7.12 and Departmental 7.12 Statements are reviewed and approved by the dean of the Medical School and the senior vice president for academic affairs and provost.

The relevant University documents regarding criteria for tenure and/or promotion and the procedures for implementing these criteria are:

- University of Minnesota Board of Regents Policy: *Faculty Tenure*
- *Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure Track and Tenured Faculty*

II. MISSION STATEMENT

Committed to innovation and diversity, the Medical School educates physicians, scientists, and health professionals; generates knowledge and treatments; and cares for patients and communities with compassion and respect.

The Medical School strongly encourages and values interdisciplinary work, including scholarship, public engagement, and teaching, as well as interprofessional collaboration in clinical sciences. Concordant with the position of the National Institutes of Health, the Medical School values Co-Principal Investigators and interdisciplinary collaboration on major funding proposals as well.

III. APPOINTMENT AND ANNUAL APPRAISALS OF PROBATIONARY FACULTY

A. APPOINTMENT

1. Assistant Professor

In the Medical School the entry level rank for faculty is at the Assistant Professor level. The minimal, general criteria for initial appointment at this rank include:

- a. Possession of a terminal degree (MD or equivalent, or Ph.D.)
- b. Board eligibility or certification (if applicable - clinical specialties)
- c. Demonstrated ability in teaching
- d. Demonstrated involvement in high-quality research which has been accepted for publication or is published in peer-reviewed national or international journals
- e. Documentation of competence in the skills of communication, including effective communication in teaching students and in oral and written presentations of research

Each department may add specialty-specific criteria for appointment, in their Departmental 7.12 Statement.

2. Associate Professor and Professor

- a. The criteria and standards for appointment at the rank of Associate Professor are those stated for awarding of tenure.
- b. The criteria and standards for appointment at the rank of Professor are those stated for promotion to this rank.

In addition, for clinically active faculty, it is expected that for appointment at the rank of Associate Professor or Professor they will have achieved appropriate Board Certification in the specific field where they are practicing.

3. Secondary Appointments

The appointment home for a faculty member is always in the primary department (the tenure home is the University of Minnesota). Joint and/or secondary appointment requests will be made by the secondary department with the support of the primary department in the form of a request letter(s) signed by both department heads, addressed to the Associate Dean for Faculty Affairs in the Medical School. In the case that the appointment being requested is at the Associate Professor or Professor level, the secondary department may conduct a faculty vote by written ballot, based on the proposed collaborative activity in the secondary department for the faculty member. The results of the vote should be reported at the time of the request for appointment.

B. ANNUAL APPRAISALS OF PROBATIONARY FACULTY

In fulfillment of Sections 7.11 and 7.12 and in accord with Section 7.2 of the Board of Regents Policy: *Faculty Tenure*; “the tenured faculty of each academic unit annually reviews the progress of each probationary faculty member toward satisfaction of the criteria for receiving tenure. The head of the unit prepares a written summary of that review and discusses the candidate’s progress with the candidate, giving a copy of the report to the candidate.”

All tenure-track faculty will undergo an annual review each academic year. An academic year is defined in Section 5.3 in the Board of Regents Policy: *Faculty Tenure*. Annual appraisals in the Medical School and its departments comply with the procedures described in *Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty*. Each department will outline the specific process and criteria for annual appraisals, but at the very least will include a review by the tenured faculty of the department and an annual conference with the Department Head. These procedures are provided for by Sections 16.3, 7.4, and 7.61 of the Board of Regents Policy: *Faculty Tenure*.

The annual review of probationary faculty will be recorded on the *University of Minnesota (UM) Form 12* and will reflect the faculty member's performance relative to the 7.12 Statement. A record of the vote by the tenured faculty for continuation or recommendation for promotion and/or tenure will be included on the *UM Form 12*, if a vote was taken. (This vote on annual reviews is optional). Each department will determine, and so state in their departmental 7.12 Statement, whether or not such a vote will be taken. If such an annual vote is taken in any department, a 2/3 majority of eligible voting faculty is required for continuation of the probationary appointment. A motion for termination also requires a 2/3 majority of eligible voting faculty for action to be taken. A record of the vote, either for continuation or termination, must be included on the *UM Form 12*. If a faculty member has extended his or her probationary period according to Section 5.5 of the Board of Regents Policy: *Faculty Tenure*, this must be noted on the *UM Form 12* during the annual review.

The department head will meet annually with each probationary faculty member to review his/her completed *UM Form 12*. The department head and faculty member will sign the completed *President's Form 12*. The *UM Form 12* is forwarded to the dean for review, comment, and signoff.

The *UM Form 12* is then forwarded to the senior vice president for academic affairs and provost (SVPP) for review, comment, and signoff. A copy is kept in the SVPP Office. The signed *UM Form 12* will be kept in the probationary faculty member's tenure file and will become a part of the dossier.

For faculty members with joint and/or secondary appointments in another Medical School or University Department, annual reviews will be carried out according to the *Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty*. For a candidate who has an appointment in more than one unit, the candidate's offer letter will specify how the candidate will be evaluated annually and at the time of the tenure and/or promotion decision, including which unit's 7.12 statement will be used as the basis for evaluation and which unit's votes of tenured faculty will be counted or reported for the second level of review in the Medical School. The primary unit will receive input from the secondary unit on performance of responsibilities specific to that unit prior to each annual review and decision on promotion and tenure.

IV. CRITERIA FOR TENURE

Section 7.11 of the Board of Regents Policy: *Faculty Tenure* states:

7.11 General Criteria. *What the University of Minnesota seeks above all in its faculty members is intellectual distinction and academic integrity. The basis for awarding indefinite tenure to the candidates possessing these qualities is the determination that each has established and is likely to continue to develop a distinguished record of academic achievement that is the foundation for a national or international reputation or both [FN 2]. This determination is reached through a qualitative evaluation of the candidate's record of scholarly research or other creative work, teaching, and service [FN 3]. The relative importance of these criteria may vary in different academic units, but each of the criteria must be considered in every decision [FN 4]. Demonstrated scholarly or other creative achievement and teaching effectiveness must be given primary emphasis; service alone cannot qualify the candidate for tenure. Interdisciplinary work, public engagement, international activities and initiatives, attention to questions of diversity, technology transfer, and other special kinds of professional activity by the candidate should be considered when applicable. The awarding of indefinite tenure presupposes that the candidate's record shows strong promise of his or her achieving promotion to professor.*

[FN 2] "Academic achievement" includes teaching as well as scholarly research and other creative work. The definition and relative weight of the factors may vary with the mission of the individual campus.

[FN 3] The persons responsible and the process for making this determination are described in subsections 7.3 through 7.6.

"Scholarly research" must include significant publications and, as appropriate, the development and dissemination by other means of new knowledge, technology, or scientific procedures resulting in innovative products, practices, and ideas of significance and value to society.

"Other creative work" refers to all forms of creative production across a wide range of disciplines, including, but not limited to, visual and performing arts, design, architecture of structures and environments, writing, media, and other modes of expression.

"Teaching" is not limited to classroom instruction. It includes extension and outreach education, and other forms of communicating knowledge to both registered University students and persons in the extended community, as well as supervising, mentoring, and advising students.

"Service" may be professional or institutional. Professional service, based on one's academic expertise, is that provided to the profession, to the University, or to the local, state, national, or international community. Institutional service may be administrative, committee, and related contributions to one's department or college, or the University. All faculty members are expected to engage in service activities, but only modest institutional service should be expected of probationary faculty.

[FN 4] Indefinite tenure may be granted at any time the candidate has satisfied the requirements. A probationary appointment must be terminated when the appointee fails to satisfy the criteria in the last year of probationary service and may be terminated earlier if the appointee is not making satisfactory progress within that period toward meeting the criteria.

A recommendation for tenure is made when an eligible faculty member has fulfilled the General Criteria for tenure, as stated in Section 7.11, and the standards stated by the Medical School and the department. Candidates must be evaluated for tenure during their mandatory decision year at the latest. The mandatory decision year occurs during the sixth probationary year for tenure-track faculty in the basic science departments, and in the ninth year for tenure-track faculty in clinical departments.

When distinction in research has greater weight in the decision to award tenure, the candidate must also show, at a minimum, evidence of competence in teaching. When distinction in teaching has the greater weight in the decision to award tenure, the candidate must also show, at a minimum, evidence of competence in research. Distinction in research requires documented evidence of high-level, independent scholarly effort. Distinction in teaching requires documented evidence of innovation and effectiveness in teaching, which have attracted national recognition.

Probationary faculty can extend their maximum period of probationary service, by one year for each occurrence of circumstances as described in Section 5.5 of the Board of Regents Policy: *Faculty Tenure*. In the case of childbirth, adoption, or foster placement of a child, a probationary faculty member must notify the department head, the dean of the Medical School and the senior vice president for academic affairs and provost of this circumstance using University of Minnesota Form UM 1764 and the extension of the probationary period is automatic. In the case of caregiver responsibilities or personal illness or injury, the probationary faculty member must receive the approval of the senior vice president for academic affairs and provost using University of Minnesota Form UM 1765. No probationary period may be extended for more than three years. (See the *Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty* for more details.)

A. TEACHING

Distinction in teaching for the granting of tenure must include scholarly work in education. Evidence of the generation of new methods of pedagogy with national recognition by peers (AAMC, ACE) and impact on educational programs nationally is required. Activities may occur in a variety of educational settings and formats, including: didactic presentations, lectures, seminars, conferences, tutorials, laboratories, case

discussions, grand rounds, hospital and clinic rounds, patient care, surgical and other procedures, and continuing education. Competence in teaching requires participation in appropriate courses with satisfactory learner evaluations.

Assessment of distinction in teaching and advising students is based upon:

1. Innovative contributions to the field of medical education which have been adopted for use by other institutions and are recognized by peers as scholarly contributions.
2. Review of course(s) taught, directed, or developed; a list of students and degree candidates for whom the faculty member has served as academic adviser.
3. Evidence of teaching excellence at the undergraduate, graduate, and/or post-doctoral levels, evaluated by the written statements and/or compiled ratings of students.
4. Written statements by the Head of the Department, academic peers, and others familiar with the candidate's performance in teaching and educational scholarship.
5. Accumulation of above forms of evidence on teaching competence and excellence over a sustained period of time.

Assessment of competence in teaching is based upon:

1. Learner and/or peer evaluations.

B. RESEARCH/SCHOLARSHIP

Assessment of distinction in research is based upon the following:

1. A review of the candidate's scientific publications, particularly those in national or international peer-reviewed journals. Evidence is sought that the work is scholarly, creative, and of high quality and significance, whether focused on laboratory endeavors, clinical investigations, or analysis or synthesis of clinical observations and experience.
2. Independence of research accomplishments or significant contribution to interdisciplinary or collaborative research. Evidence of independence or significant contribution to interdisciplinary or collaborative research may include:
 - a. Naming of the candidate as the first or senior author on multi-authored journal articles and/or documentation of major, substantial contributions by the candidate to the collaborative project and publication.
 - b. Statements of peer evaluators on the creativity and significance of the candidate's contributions to a collaborative research project and/or to multi-authored publications.
 - c. Identification of the candidate as the principal investigator or a major collaborator on peer-reviewed, funded research grants or contracts
 - d. Invitations/nominations to serve on study sections, national policy boards, editorial boards, etc.
3. External research funding from federal and other national granting agencies which sponsor programs in biomedical and other scientific research subject to peer review.
4. Significant original contributions based on clinical observations resulting in new therapies or techniques which impact the practice of medicine.

Assessment of competence in research is based upon:

1. Evidence of significant discipline-related publications, including reports of clinical investigations, identification through case reports of new syndromes or treatments, and descriptions of new techniques.
2. Participation in invited scientific and clinical symposia, meetings and lectures.
3. Letters from authorities in the candidate's clinical discipline assessing his/her contributions to the discipline.

C. CLINICAL SERVICE (if applicable)

Clinical Service expectations in decisions for tenure and promotion to Associate Professor include enjoying an excellent reputation inside and outside the Twin Cities area as an authority in a clinical specialty, as demonstrated by patient referrals from outside the area, invited visiting lectureships, and memberships in professional societies.

D. SERVICE

In the Medical School service contributions are an integral part of the academic unit. Such service can be used to demonstrate an additional area of strength for the recommendation of tenure. Examples of service contributions include:

1. Participation in discipline-specific regional and national organizations.
2. Service to the Department, School, or University on governance-related or policy making committees.
3. Service to the community, State, and public engagement.

V. CRITERIA AND STANDARDS FOR PROMOTION IN FACULTY RANK

A. ASSISTANT PROFESSOR

In the Medical School, the entry level rank for faculty is at the Assistant Professor level. It is therefore anticipated that there will be no promotions to this rank.

B. TO ASSOCIATE PROFESSOR

The general criteria and standards for promotion to the rank of Associate Professor are those stated for consideration of tenure (see IV above).

In addition, for clinically active faculty, it is expected that they will have achieved appropriate Board Certification in the specific field where they are practicing.

A recommendation for promotion to Associate Professor is made when an eligible faculty member has fulfilled the general criteria applicable to tenure, as stated in Section 7.11, and the specific criteria and standards for promotion to Associate Professor as stated by the Medical School and the Department. It is also an expectation of the University and the Medical School that all faculty promoted to associate professor with tenure are on a trajectory that will result in them achieving the rank of full Professor.

C. TO PROFESSOR

A recommendation for promotion to Professor is based on criteria set by the Medical School and the Department in accord with Section 9.2 of the Board of Regents Policy: *Faculty Tenure*

9.2 Criteria for Promotion to Professor. *The basis for promotion to the rank of professor is the determination that each candidate has (1) demonstrated the intellectual distinction and academic integrity expected of all faculty members, (2) added substantially to an already distinguished record of academic achievement, and (3) established the national or international reputation (or both) ordinarily resulting from such distinction and achievement [FN 7]. This determination is reached through a qualitative evaluation of the candidate's record of scholarly research or other creative work, teaching, and service [FN 8]. The relative importance of these criteria may vary in different academic units, but each of the criteria must be considered in every decision. Interdisciplinary work, public engagement, international activities and initiatives, attention to questions of diversity, technology transfer, and other special kinds of professional activity by the candidate should be considered when applicable. But the primary emphasis must be on demonstrated scholarly or other creative achievement and on teaching effectiveness, and service alone cannot qualify the candidate for promotion.*

[FN 7] "Academic achievement" includes teaching as well as scholarly research and other creative work. The definition and relative weight of the factors may vary with the mission of the individual campus. Not being promoted to the rank of professor will not in itself result in special post-tenure review of a tenured associate professor.

[FN 8] The persons responsible for this determination are the full professors in the unit who are eligible to vote. The outcome of the vote is either promotion to the rank of professor or continuation in rank as an associate professor. The procedures for voting are identical to those outlined in Section 7.4 for the granting of indefinite tenure, the nondisclosure of grounds for the decision (Section 7.5), and the review of recommendations (Section 7.6). In addition, a petition to the Judicial Committee for review of a recommendation of continuation in rank as an associate professor follows the procedures specified in Section 7.7 for decisions about promotion to associate professor and conferral of indefinite tenure.

Promotion to Professor is not based on time in rank, but on an increasing record of accomplishments. During the period as an Associate Professor, the candidate will have continued to develop his or her already distinguished record in teaching, research, and service and added substantially to the record that was the basis for the promotion to the rank of Associate Professor. The candidate must have achieved a national and international reputation in her or his area of expertise and be recognized as a leader and a mentor.

The proposal of a candidate for Professor will present evidence of additional significant academic, scientific, scholarly, and professional achievements such as:

1. The establishment of a training program for pre- and/or post-doctoral fellows in a specific discipline.
2. Election to prestigious scientific and/or professional organizations which recognize excellence and significant academic contributions.
3. Letters from authorities attesting to the candidate's acknowledged national or international reputation and recognition of leadership in his/her field; letters from prominent senior faculty members at other universities assessing the candidate's qualifications for promotion to the rank of Professor.
4. Nationally recognized leadership roles in the profession or the institution.
5. Evidence of effective mentoring of junior faculty, fellows, and M.D. and Ph.D. trainees.
6. Creating and sustaining a culture that fosters diversity.
7. Ongoing record of peer-reviewed publications.
8. Ongoing record of funding for research or scholarship (if applicable).
9. Ongoing excellence in clinical activity (if applicable).

VI. ANNUAL REVIEW OF TENURED FACULTY

In accordance with Section 7a of the Board of Regents Policy: *Faculty Tenure* and the *Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty*, each Medical School department will annually conduct a review of each tenured faculty member. The specific Departmental process for annual review and review criteria (i.e. the goals and expectations for continued performance by tenured faculty) will be described in the Departmental 7.12 Statement Part 2.

The Medical School procedures for annual review of tenured faculty are provided in Part 3 of the document (Annual Review of Tenured Faculty).

VII. VOTING PROCEDURES

- A. Promotion and tenure decisions in the Medical School require a positive vote by two-thirds of all eligible voting faculty members on the question to recommend affirmatively for promotion and/or tenure.
- B. Decisions to terminate the contract of a probationary faculty member also require a vote by two-thirds of all eligible voting faculty members in support of the motion to terminate the appointment.
- C. Tenured faculty are eligible to vote on the awarding of tenure to probationary faculty. Tenured faculty holding appropriate rank are eligible to vote on recommendations for promotion of candidates.

VIII. PROCESS FOR UPDATING THIS 7.12 STATEMENT

The Medical School will review its 7.12 Statement Preamble at least every five years, or more frequently as needed. Revisions will be made by the Associate Dean for Faculty Affairs. The revisions will be presented to the Faculty Advisory Council. All Medical School tenured and tenure-track faculty will be invited to review and give input on the statement, and approval will be obtained through a majority vote of the tenured and tenure-track faculty, in conjunction with approval of their departmental criteria, with the approval date noted on the document.

History of Revisions (approved by vote of the Faculty):

Original Document: Date unknown

Revision: April 15, 1993

Revision: July 2, 2009

Revision Approved by Medical School Faculty: June 21, 2012

Approved by Senior Vice President for Academic Affairs and Provost: June 22, 2012

PART 2. DEPARTMENTAL ADDENDUM

I. INTRODUCTORY STATEMENT

This document describes the specific criteria and standards which will be used to evaluate whether faculty in the Department of Anesthesiology, both in the basic and clinical sciences, meet the general criteria in Section 7.11 of the Board of Regents Policy: *Faculty Tenure*, as defined for this Department. It also provides the specific criteria and standards that will be used to evaluate associate professors for promotion to professor according to Section 9.2 of the Faculty Tenure policy.

This document contains the Department's Criteria and Standards pertaining to:

- A. Award of indefinite tenure
- B. Promotion from assistant professor to associate professor and from associate professor to professor
- C. The departmental process for the annual appraisal of probationary and tenured faculty
- D. The goals and expectations for the periodic annual review of tenured faculty

II. MISSION STATEMENT

The mission, vision, and core principles of the Department of Anesthesiology are instruments to align our values with the school and our day-to-day operations.

Mission: The University of Minnesota Department of Anesthesiology shall be a leader in clinical care, education, and medical inquiry.

Vision: The Department of Anesthesiology will be recognized: 1) as a superior and innovative postgraduate residency, 2) for a culture of inquiry, and 3) for a superior standard of compassionate patient care.

Core Principles:

Advancement in the Department of Anesthesiology is based on clinical care, quality outcomes, and is merit-based. It recognizes clinical, academic, and administrative contributions of the faculty. As a clinical service department, we shall fulfill a wide range of requests for services, with urgent and emergent services provided 24 hours per day, seven days per week. The clinical work frequently requires special competencies, and each member must be motivated to provide high quality care in a timely and efficient manner.

In general, it is the expectation that all faculty seeking tenure will progress steadily to achieve the rank of full professor.

Promotion and tenure decisions in the Department of Anesthesiology require a positive vote by two-thirds of all faculty members eligible to vote on the question to affirmatively recommend for promotion or tenure.

III. APPOINTMENT AND ANNUAL APPRAISALS OF PROBATIONARY FACULTY

A. APPOINTMENT OF PROBATIONARY FACULTY

Tenured and tenure-track appointments require pre-approval by the Dean of the Medical School to initiate a search. Faculty hired with tenure are subject to approval by the Senior Vice President for Academic Affairs and Provost of the University of Minnesota. The candidate should have three or more years post M.D. or post Ph.D. experience and the potential ability to meet the teaching, clinical and research mission of the department. Although independent research will not always be evident, the individual should have demonstrated involvement in high quality research. There should be documentation of competence and growth in the candidate's skills of communication, including effective communication in teaching students and in oral and written presentations of research. An annual review as detailed in Section B below will be conducted for all faculty.

B. ANNUAL APPRAISALS OF PROBATIONARY FACULTY

1. Process

The process for Annual Review of Probationary Faculty in the Department of Anesthesiology is in compliance with Section 7.2 of the Board of Regents Policy: *Faculty Tenure* and the *Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty*. The Promotion and Tenure committee in consultation with the Department Head will assign each probationary faculty member a senior faculty mentor(s). The role of the mentor(s) will be to advise and coach and assist with progress towards tenure.

Each year a letter will be sent to each probationary faculty member asking him/her to submit a revised curriculum vitae structured according to the format of the department, a summary of accomplishments during the last year and information on how last year's goals were met and a statement of goals for the following year. Concurrent to this, a letter will be sent to each mentor asking him/her to summarize the accomplishments of the probationary faculty member over the last year, any problems faced during the last year and recommendations for the coming year.

Formal feedback to each faculty on the tenure track will assess their rate of progress towards promotion, based on the criteria within this 7.12 Statement.

2. Criteria

The criteria for satisfactory performance to be used for the annual review in the Department of Anesthesiology are the same as with the appropriate criteria for rank, as defined in this 7.12 Statement.

IV. CRITERIA FOR TENURE

The Department of Anesthesiology accepts and subscribes to the criteria and standards for tenure of faculty at the University of Minnesota Medical School, as described in Part 1. Medical School Preamble. Moreover, each faculty member seeking tenure is expected to demonstrate unequivocal evidence of scholarship, defined as academic productivity that establishes a national reputation for excellence. Letters from external, independent reviewers are an important mechanism to demonstrate a national reputation. In general, accomplishments will be judged in the broad categories of:

- Research
- Academic, educational and clinical scholarship
- Demonstrated teaching effectiveness
- Administrative roles and duties
- Medical center and civic citizenship

A. TEACHING

Distinction in teaching for the granting of tenure must include scholarly work in education. Evidence of the generation of new methods of pedagogy with regional and national recognition by peers (AAMC, SEA, ASA, IARS) and impact on educational programs nationally is required. Teaching activities may occur in a variety of educational settings and formats, including: didactic presentations, lectures, seminars, conferences, tutorials, patient simulators, laboratories, advising of students, case discussions, grand rounds, hospital and clinic rounds, patient care, surgical and other procedures, and continuing education.

Assessment of effectiveness in teaching and advising students is based upon:

1. Innovative contributions to the field of medical education that have been adopted for use by other institutions and are recognized by peers as scholarly contributions.

2. Review of course(s) taught, directed, or developed, a list of medical students and residents for whom the faculty member has served as an academic advisor.
3. Evidence of teaching excellence at the undergraduate, medical school, and graduate levels, evaluated by the written statements and/or compiled rates of students or residents.
4. Written statements by the Head of the Department, academic peers, and others familiar with the candidate's performance in teaching.
5. Accumulation of the above forms of evidence on teaching competence and excellence over a sustained period of time.
6. Sustained service in an administrative position for education, such as residency program director, vice-chair for medical education, director of resident research, chair of the Clinical Competency Committee, or director of Human Patient simulation, are direct evidence of teaching excellence.

B. RESEARCH / SCHOLARSHIP

Each faculty member seeking tenure is expected to demonstrate unequivocal evidence of scholarship, with sufficient academic productivity to begin to establish a national reputation for excellence. While all candidates for tenure are expected to exhibit stellar scholarship, this activity may primarily focus on discovery, on integration, or on dissemination.

Scholarly activities will be evaluated via both qualitative and quantitative measures according to the following standards:

1. **Scientific Publications**
A sustained record of publication of exceptional, original, and innovative research findings, and/or important clinical applications of basic, applied, and clinical science. These scientific articles are reported in quality biomedical and peer-reviewed journals related to, and scientifically ranked, within the discipline of anesthesiology.
2. **External Research Funding**
One dimension associated with outcomes and accomplishments is a record of doing significant research over time. This can be associated with peer-reviewed sponsored funding of research and the continuity of that funding, in particular peer-reviewed research funding from federal or other national granting agencies, or reputable private granting agencies. Candidates are also encouraged to pursue commercial funding sources from medical device companies or pharmaceutical firms if appropriate to their research interests. Therefore the candidate must have had external funding during the probationary period. However the quantity and sources of funding will depend upon the availability of research funding for the candidate's specific area of interest. Although continuity of funding is important, the candidate need not necessarily have funding at the time he/she goes up for promotion.

3. Publication in Monographs, Reviews and Other Books
Publications through these modalities are part of the scholarly activities of a faculty member and will be considered as part of the basis for tenure. The “impact factor” of such publications may be considered.
4. Service as an Editor or a Member of the Editorial Board of a Reputable Journal or Monograph in a Biomedical Discipline
Editorial board service or regular contributions as a Journal reviewer is recognized as important service to the specialty in maintaining the highest standards of scientific publication.
5. Invited Participation in Symposia, Meetings and Seminars
Invitation by national and international scientific organizations to participate in symposia and meetings reflects a national level of recognition. Invitations to give seminars or Visiting Professor lectures before peers in other institutions both nationally and internationally is an additional important contribution to the dissemination of new knowledge.
6. Presentation of Papers at National and International Scientific Meetings
Abstracts should be published in scientific proceedings or journals (print or electronic media) related to those meetings. A significant number of such abstracts should lead to fruition as peer-reviewed Journal publications.
7. Interdisciplinary Contributions and Team Science.
While all candidates for tenure are expected to exhibit stellar scholarship, this activity may be reflective of both individual and team contributions, and both will be valued. However, to establish direct contributions to original research, the review process may solicit information from the candidate, the project director, principal investigator, co-investigators, and others as needed. A letter of support by the Departmental Chair may be an important pathway to document interdisciplinary team activities.
8. National Reputation
The candidate should begin to establish a reputation within her/his field as evidenced by memberships in study sections, advisory groups, prestigious scientific or professional societies, awards, prizes, and other notable academic achievements, a strong record of external funding of investigator initiated research, and/or recognition for superior accomplishments in a clinical specialty and leadership role in department or hospital. Significant original contributions based on clinical observations resulting in new therapies or techniques which impact the practice of medicine.

C. CLINICAL ACTIVITY

Excellence and innovation in clinical activity is expected, and may be demonstrated by significant accomplishment (commensurate with fraction of clinical time), supported by evidence such as the candidate introducing new or unique clinical services, approaches, or techniques.

Examples of a scholarly approach to clinical activity might include:

- Introduction of new clinical services, approaches, or techniques (e.g., ‘fast-track’ cardiac anesthesiology).
- Establishment or implementation of a novel clinical or anesthetic technique that has demonstrated improved or more efficient patient care.
- Promulgation of novel anesthetic approach to outside institutions.
- Advancement of a subspecialty or particular facet of patient care in the candidate’s field of expertise.

- Promotion of clinical trials or translational techniques that advance the frontier of care.
- Development of new patient care clinic, such as Pre-Operative Assessment Clinic.

Evidence of excellence or significant accomplishment in clinical activity might include:

- a. Expertise in a well-defined area of anesthesiology
- b. Statement by the candidate describing his/her clinical activities (e.g. number of patients anesthetized, procedures performed, OR responsibilities), what makes their service unique/outstanding, and how they have followed a scholarly approach.
- c. CME written materials and publications that support a scholarly approach to patient care.
- d. Two outside letters of evaluation supporting the candidate's clinical achievements.

D. SERVICE

Service, although not a primary criterion for tenure, will be taken into consideration in making decisions on tenure. Performance of service, however exemplary, cannot substitute for the primary criteria, research and teaching. Recognized national expertise in a clinical field, however, may be an important consideration, in the tenure process.

Social commitment and focus should be strong and unequivocal and be a critical guiding principle in how we use our resources and talents. It is only through these efforts that the people of the state of Minnesota can realize that our institution not only exists thanks to them, but also works for them, and with them. In direct relation to the latter, support from the state government to our institution can only be strengthened by a strong and unequivocal support from citizens of our state.

Public engagement may include scholarly products such as peer-reviewed publications, national peer recognition, dissemination and broad impact on the community. It may also involve additional forms of documentation, each of which is also evaluated for originality, independence, coherence, impact and collaborative skills, e.g.:

- Description of teaching programs that address needs of the anesthesiology community and beyond and take advantage of individual skills of members in the community.
- Description of teaching programs that address anesthesiology aspects of public health issues in the community and involve elements of the community.
- Description of research projects that are headed by faculty members of our department, but involve elements of the community, such as teachers, other professionals and students. Describe participation of collaborators and benefits to the state.
- Products such as videos, web-sites, CD-ROMs or educational manuals.
- Popular media with information on types of media, populations reached, influence, and citations.
- Summary of public influence such as involvement in policy development, policy changes, new laws or changes in agency practices. Examples include:
 - Political or public advocacy for public health initiatives,
 - Volunteer community health services,
 - Missions to underserved areas to deliver volunteer health services.

V. CRITERIA AND STANDARDS FOR PROMOTION IN FACULTY RANK

Promotion decisions in the Department of Anesthesiology require a positive vote by two-thirds of all eligible voting faculty on the question to affirmatively recommend for promotion. Eligible members include faculty at the proposed rank and above voting for promotion; and faculty with tenure voting for tenure.

If a faculty member has a joint appointment in another department and is being considered for promotion, the Department of Anesthesiology will contact the other department(s) to obtain their assessment and

record of vote on the proposed promotion. The department also follows the processes for joint appointments that are described in the *Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty*.

A. ASSISTANT PROFESSOR

Not applicable in the Medical School (entry level rank is Assistant Professor)

B. TO ASSOCIATE PROFESSOR

The criteria and standards for promotion to the rank of Associate Professor in the Department of Anesthesiology are those stated for consideration of tenure (see IV above). A recommendation for promotion to Associate Professor is made when an eligible faculty member has fulfilled the general criteria applicable to tenure.

C. TO PROFESSOR

The *Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty* requires that the tenured faculty of departments review and provide feedback to tenured associate professors every four years regarding their progress toward promotion to the rank of professor. A recommendation for promotion to Professor is based on criteria set by the Medical School in Part 1, Preamble and the department in accord with Section 9.2 of the Board of Regents Policy: *Faculty Tenure*. The criteria and standards stated for promotion to Associate Professor will continue to be applicable during the intervening period of time with the added criteria below. The proposal of a candidate for Professor will also present evidence of effective mentoring of assistant and/or associate professors; attention to fostering a culture that enhances diversity; and additional academic, scientific, scholarly, interdisciplinary and professional achievements such as:

1. Demonstrates intellectual distinction and academic integrity, for example: the establishment of a training program for pre- and/or post-doctoral Fellows in a scientific discipline or a medical/anesthesiology sub-specialty.
2. Addition substantially to an already distinguished record of academic achievement, such as election to prestigious scientific and/or professional organizations that recognize excellence and significant academic contributions, and leadership roles in these organizations and the University.
3. Establishment of the national or international reputation resulting from such distinction as evidenced by letters from authorities attesting to the candidate's acknowledged national and international reputation and recognition of leadership in his/her field; letters from prominent, senior faculty members at other universities assessing the candidate's qualifications for promotion to the rank of Professor.
4. Demonstrates interdisciplinary work, public engagement, international activities and initiatives as evidenced by nationally recognized leadership roles in the profession or the institution.
5. Contributing to the mentoring of junior faculty and trainees

VI. ANNUAL REVIEW OF TENURED FACULTY

The Department of Anesthesiology utilizes the process for Post-Tenure Review defined by Part 3, Annual Review of Tenured Faculty. The faculty member will be reviewed on the basis of the quality of efforts in research, teaching, and service. The review will focus on whether the faculty member continues to meet the goals and expectations for tenured faculty members as outlined in this 7.12 Statement.

The specific criteria for performance evaluation in the Department is based on completion of the Faculty Evaluation Form (done yearly) and review with the Departmental Head as noted below.

Review of Tenured Faculty

All faculty members are evaluated annually to assure optimal effectiveness and productivity, and to provide one basis for allocation of resources. Such reviews may be used to guide faculty to sustain productivity as their priorities and personal directions change over their career cycle. The review will evaluate performance, identify ways to improve performance if it has been less than optimal, and stimulate continued academic or administrative growth. This review will include an interview with the faculty. A written report of the evaluation (see process below) of the teaching, scholarly, and service activities will be submitted to the department head and to the faculty member under review. The Head and the faculty member will discuss the findings. The Department Head will submit to the Dean a brief summary of the written review report on the candidate (and the response of the Department Head to the career plan of the faculty member for the next five years.

A. MATERIALS TO BE REVIEWED

1. Materials that must be reviewed include:
 - a. Current curriculum vitae and supporting documents (see below).
 - b. Career plan for the next five years that covers teaching, scholarship (for individuals in the tenure track), service, and professional growth.
 - c. Other materials the faculty member believes are relevant to the review.
 - d. A verifiable personal assessment of teaching, scholarship or professional productivity, as appropriate for the faculty member, and service activities since the last review.
 - e. Statement by the Department Head that describes circumstances under which the faculty member has functioned during the reviewed period.
2. Other materials that may be reviewed at departmental discretion include:
 - a. Letters of evaluation from persons at other institutions that were solicited for appointment or promotion consideration during the review period.

B. PERSONAL ASSESSMENT

Each candidate shall prepare a document assessing his or her progress toward achieving or maintaining the standards of teaching, service, and scholarship or professional productivity appropriate for the academic rank, together with documentation of his or her progress and an outline of future efforts in these areas. The evaluation, documentation, and outline will be attached to the CV.

C. PROCESS OF REVIEW

The updated curriculum vitae and supporting documents are submitted to the Department Head by the faculty member to be evaluated. The evaluation involves critical review of the teaching, scholarship, or professional productivity, and service contributions of the faculty person in light of the goals and expectations developed for each faculty member. A written report is prepared on the candidate by the Department Head.

The review process ends with the sharing of the written statement with the faculty member. The individual faculty member may present a written response that becomes a part of the permanent record.

D. GOALS AND EXPECTATIONS

Satisfactory performance in teaching, research and service are expected of all tenured faculty members in the Department of Anesthesiology. The distribution of effort among these three spheres of academic activity may vary by individual and over time during the course of a faculty member's career. For

example, a tenured member of the faculty may sometimes assume administrative or committee duties that have the potential of diminishing the time available for research and teaching. Some members of the faculty may at some stages of their careers legitimately devote relatively more effort to teaching and service than to research or vice versa. The department and college should nurture and benefit from the special strengths brought by each individual member of the faculty while not losing sight of the overall responsibilities and obligations that tenure confers upon all members of the faculty. .

The goals and expectations for performance of tenured faculty for teaching, research, and service in the Anesthesiology Department are shown here. Tenured faculty are expected to achieve the goals and expectations in two of the three following areas:

1. Research

The extent and nature of research activity may vary over time depending upon the interests of the faculty member and goals of the department. However within any given period of three years, tenured faculty should report substantial accomplishments within one or more of the following categories:

- An independent or active collaborative role in a research program or programs;
- Refereed or invited research presentation(s) at a scholarly conferences or another academic institution;
- Organization or active participation in a scholarly conference, symposium, workshop, or panel;
- Evidence of grant submissions to support research efforts, either as a principle investigator, co-investigator or collaborator;
- Publication or submission of research articles, case studies, and/or research reviews in refereed medical or scientific journals;
- Publication of scholarly books, book chapters, review articles, and postings to web-sites or other non-refereed venues.
- Mentoring residents, medical students and/or other faculty in their research

2. Teaching

Tenured faculty are expected to remain effective teachers and to be actively engaged in communicating knowledge and in supervising, mentoring, or advising students, in compliance with collegiate and University policies. While the extent and nature of teaching activity may vary over time, tenured faculty should report at least two substantial accomplishments over a period of three years within one or more of the following categories:

- Teaching on clinical, research, or other educational topics as assigned by the Department Head in light of department and collegiate curricular needs
- Instructing residents and medical students in the operating room
- Supervising hospital rounds (ie ICU, Acute pain rounds).
- Maintaining effectiveness in teaching as demonstrated by teaching innovations, student evaluations, and resident and peer review of teaching.
- Scholarship in teaching and learning as evidenced by publication of scholarly articles, book chapters, supervising patient simulation or submission of educational grant proposals.
- Advising and mentoring students, residents, graduate students, and postdoctoral fellows.
- Instructional development that leads to products (textbooks, published manuscripts, instructional videos, instructional software, etc.).

- Evidence of active participation on department, university, state society, hospital, or other committees.
- Educational outreach activities related to the faculty member's scientific or professional expertise.
- Global educational outreach activities.

3. Service

Tenured faculty are expected to perform service within the department, the college and university, and in their scholarly disciplines, although the extent and types of service performed may vary over the course of a career. Over a period of three years tenured faculty should report at least two substantial accomplishments within one or more of the following categories:

- Active departmental, collegiate, state society, or University leadership or administration;
- Election or appointment to standing or ad-hoc committees of the department, medical school, or University.
- Reviewing and/or editing scholarly articles, book manuscripts, and grant proposals written by others, serving on Journal editorial boards or grant review panels.
- Presiding over paper presentation or platform sessions at conferences.
- Active service as an office holder or committee member for relevant professional organizations.
- Outreach activities related to the faculty member's scientific and professional expertise with clear benefit to the department, medical school or University.
- Providing patient care in university affiliated practices.
- Administrative duties such as residency director, CSU or UMP board member, or in hospital administration.

E. ANNUAL ASSESSMENT OF TENURED FACULTY AND POST-TENURE REVIEW COMMITTEE

If on the review the chair determines the tenured faculty member has not met the minimum performance goals for tenured faculty members, the chair will call a meeting of the post-tenure review committee. The post-tenure review committee will be composed of the chair and two elected tenured faculty members other than the individual being reviewed. The committee will then meet with the faculty member to formulate a plan and set of goals to enable him or her to meet the mission of the anesthesiology department. This plan will be in writing in a letter signed by both the department chair and the committee members. The faculty member has one year from the date of that letter to meet the goals articulated in the plan. If the faculty member does not meet the goals of the plan, then the committee and the chair may ask the Dean of the Medical School to begin a special peer review. See Part 3. Annual Review of Tenured Faculty of this document.

VII. PROCEDURES

A. VOTE

1. A vote will be taken for decisions to recommend a candidate for promotion and/or tenure. Such a vote will require a 2/3 majority for the motion to pass.
2. A vote will be taken for all decisions to terminate the contract of a probationary faculty member. Such a vote will require a 2/3 majority for the motion to pass.

VIII. PROCESS FOR UPDATING 7.12 STATEMENT

The department head and tenure track faculty, in consultation with medical school leadership, to internally assess and review the 7.12 Statement no less than every five years.

History:

Voted on and approved by the Anesthesiology Faculty, October 2, 2012

Approved by the Senior Vice President for Academic Affairs and Provost, October 3, 2012

PART 3. ANNUAL REVIEW OF TENURED FACULTY**A. ANNUAL REVIEW**

All tenured faculty must undergo an annual review each year. This process is key in allowing the faculty member and the department to assess individual progress. It also helps to protect the faculty member, the department, and the School, in case of any misunderstanding or conflict that may arise. For any questions about this process, please call the Office of Faculty Affairs and/or the Vice Provost for Faculty and Academic Affairs.

1. During the spring of each academic year, all department heads will schedule an annual review conference with each tenured faculty member. This responsibility may be delegated to Division Chiefs, Departmental Review Committee, Center Directors or other designee. All reviews must receive final approval and signature from the Department Head.
2. Prior to this conference the individual faculty member will provide the requisite information, as well as an updated curriculum vitae, following the department's annual review reporting format.
3. Annual reviews may be carried out in the format preferred by each department but must, at a minimum, be compliant with the rules detailed in the Board of Regents Policy: *Faculty Tenure*, Section 7a, and the *Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty*.
4. The annual review documentation should include:
 - a. Accomplishments of the previous year, particularly in relation to goals set for the year.
 - b. Detailed accomplishments in each domain relevant to the faculty member (as applicable: teaching, research and/or scholarship, service, and clinical activity (if applicable)):
 - i. Evaluation of quality and quantity of teaching, attitude towards learners, knowledge of subject matter, and specific contributions to continuing education.
 - ii. Evaluation of research and/or scholarly activity including current projects, grants applied for or funded, publications, and papers presented or submitted.
 - iii. Evaluation of service.
 - iv. Evaluation of clinical activity (when applicable), including volume of patients served, breadth of referrals, incorporation of patient care into teaching program, activity in local and national professional organizations.
 - c. Percentage of effort in each domain, to be updated annually.
 - d. Agreed upon goals for the upcoming year.
 - e. Plans for subsequent years with specific recognition of outstanding accomplishments and plans to maintain high performance level.
5. The Annual Review conference should emphasize frank discussion concerning the faculty member's past and present performance in given areas of responsibility, noting progress in achieving previously established goals and objectives. In particular, it is important to frame the evaluation in the context of the proposed distribution of responsibilities in the four domains of Teaching, Research/Scholarship, Service, and Clinical Activity (if applicable). If the faculty member is working towards promotion, the Department Head and the faculty member should ensure that year-by-year progress, consistent with the Departmental 7.12 Statement, has been appropriate to date and specific goals for the coming year should be agreed upon.

Pursuant to the *Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure Track and Tenured Faculty*, each department's tenured faculty shall review their tenured associate professors at a

minimum of every four years regarding their progress toward achieving the rank of professor. This review is based upon the criteria for promotion to professor in the department 7.12 statement. This four-year progress review can be part of the annual review process.

6. Following the Annual Review conference, the Department Head or designee will complete the Medical School Annual Review Form, summarizing the conference and stating the agreed upon goals for the upcoming year. The Medical School Annual Review Form must be signed by the faculty member, the evaluator (if applicable), and the Department Head.
7. For faculty members who have met the goals and expectations for tenured faculty for the department, according to the department 7.12 statement, the signed Medical School Annual Review Form is sent to office of Associate Dean for Faculty Affairs who signs on behalf of the Dean. The review form will be handled confidentially by the Dean and the Associate Dean and will assist them in supporting recommendations for promotion, special recognition, or salary adjustments.
8. If the department head or designee finds that the tenured faculty member's performance is below that of the goals and expectations of the department as specified in the 7.12 statement, then the case is referred to a committee of elected, tenured faculty members in the department. If that committee concurs with the judgment of the department head, then both the department head and the committee formulate a detailed written Faculty Improvement Plan for the faculty member. The letter from the department head and the elected committee must identify the ending date for the period of performance improvement and must request that the faculty member provide a report at that time describing his or her progress towards meeting the goals and expectations of the department.

The department head and the committee chair should make reasonable efforts to meet with the faculty member to discuss the plan for meeting the goals and expectations of the unit. The faculty member may request modification of the plan from the department head and the committee but may not at this stage file a complaint with the Senate Judicial Committee.

At the end of the time period specified for performance improvement, the faculty member under review must provide a report describing his or her progress toward meeting the goals and expectations of the department. The department head and the elected committee of tenured faculty will then review the progress that the faculty member has made regarding the recommendations as specified in the report from the faculty member.

This process above may be repeated for a second year if the faculty member has failed to complete the initial plan.

B. SPECIAL PEER REVIEW

1. Initiation
In compliance with Section 7a.3 of the Board of Regents Policy: *Faculty Tenure*, a Special Peer Review may be requested by the department head and the departmental review committee of elected, tenured faculty members following the unsuccessful completion of a Faculty Improvement Plan as described in Section A.8 above.
2. The Medical School Dean will be notified and asked to initiate a Special Review. The Dean must first review the file independently to determine that the faculty member falls below the department's goals and expectations and has not successfully completed the Faculty Improvement Plan. S/he determines that

special peer review is warranted.

3. The *Procedures for Reviewing Candidates for Tenure and/or Promotion: Tenure-Track and Tenured Faculty* describe details of the process for the special peer review. Some of these are highlighted below but the reader is referred to the *Procedures* and the *Faculty Tenure* policy for a complete perspective. All of the steps in the *Procedures* and subsection 7a.3 of the *Faculty Tenure* policy must be followed even if they are not described in this document.
4. Review Panel
 A Special Review Panel composed of tenured members at the same rank or above the rank of the faculty member under review:
 - i. Members are elected independently for each Special Review, by the tenured faculty of the department.
 - ii. Members (5) include:
 1. 1 member appointed by the faculty member being reviewed.
 2. 4 members elected from a slate of candidates nominated by department head and the tenured faculty.
 - iii. Members may be in the department or outside, if appropriate – case by case. If the faculty member has a secondary appointment in another department, that department should be represented on the committee.
 - iv. Members should not be the same as any previous review committee for that faculty member
5. Special Review materials include:
 - a. Department head and previous Review Committee statement(s) requesting Special Review.
 - b. Annual review with goals and effort distribution (at least 5 years if available).
 - c. Previous recommendations for faculty development and outcomes (Performance Improvement Plans).
 - d. Personal statement by the faculty member.
 - e. Current annotated curriculum vitae.
 - f. Teaching evaluations.
 - g. Reprints.
 - h. Supporting documentation, including, but not limited to, letters of acceptance for articles in press, and acknowledgement by journal or funding agency of manuscript or proposal receipt.
 - i. Any other relevant documentation.
6. Review Criteria and Methodology
 - a. The main focuses of the Special Review are the area(s) of deficiency identified in previous review(s).
 - b. Due process procedures, as defined in University documents, will be applied to address disagreements at different levels of the review and to offer protection for academic freedom.
 - c. Faculty members undergoing review may examine any material in their file at any time in the review process
 - d. Faculty member’s performance will be evaluated as either:
 - i. Satisfactory: meeting department and/or Medical School goals and expectations for tenured faculty members.
 - ii. Unsatisfactory: not meeting department and/or Medical School goals and expectations for tenured faculty members.
 - e. The actions that the Panel may recommend, listed in section 7a.3 of the Board of Regents Policy: *Faculty Tenure*, include:

- i. Terminate review if the Panel finds that the faculty member's performance meets the goals and expectations of the department.
 - ii. Alter allocation of effort if the Panel determines that the faculty member's strengths are not being fully utilized: it might suggest that the allocation of effort between teaching, research, and service be altered so as to maximize the faculty member's contributions to the University.
 - iii. Suggested improvements: if the faculty member's performance is likely to be improved by specific steps, and that process can adequately be monitored by further regular Annual Reviews, the Panel may suggest that those steps be taken and remit the case to the Annual Review process.
 - iv. Salary reduction if the faculty member's performance has declined in such a way as no longer to warrant the base salary that is attached to the position, the Panel may recommend a reduction in base salary of up to 10% (see Board of Regents Policy: *Tenure Faculty* for complete details).
 - v. Dismissal: if the faculty member's performance has fallen below the standard of the Board of Regents Policy: *Faculty Tenure* Section 10.21(a), "sustained refusal or failure to perform reasonably assigned duties adequately," the Panel can recommend the commencement of proceedings for termination of appointment, or involuntary leave of absence (see details below).
 - vi. The Panel may also recommend a combination of these measures.
- f. The recommendations of the Panel will be implemented by the Department, the Dean's Office or other administrative body, as appropriate, depending on the specific recommendation.

History of Revisions (approved by vote of the Faculty):

Original Document: Date unknown

Approved by Medical School Faculty: June 21, 2012

Approved by Senior Vice President for Academic Affairs and Provost: June 22, 2012