Bylaws of College of Medicine

UTHSC

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Approved by the College of Medicine Executive Dean, May 4, 2022
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Section One

Structure and Function of College of Medicine
COUNCIL
ORGANIZATION AND STRUCTURE

SECTION I. NAME:

The Council of the College of Medicine Faculty hereafter referred to as “The Council.”

SECTION II. FUNCTION AND PURPOSE OF THE COUNCIL:

The Council shall be the body of the College of Medicine which collectively reviews, advises, and makes recommendations to the Executive Dean of the College of Medicine on matters relating to policies and programs of the College of Medicine. Reports from the standing committees of the College of Medicine shall be presented to the Council on a regular basis by the Associate Deans, and the Council has the right to make recommendations to the Executive Dean prior to the implementation of substantial policy (as distinct from technical, administrative, or procedural) changes proposed by the committees.

SECTION III. MEMBERSHIP OF THE COUNCIL:

A. Voting Members. The voting members shall include the Executive Dean of the College of Medicine, all departmental chairs in the College of Medicine, the President and President-Elect of the College of Medicine Dean’s Faculty Advisory Council (DFAC), Directors of College of Medicine programs, and Associate Deans in the College of Medicine.

B. Non-voting Members. The non-voting members shall include Assistant Deans in the College of Medicine and other persons appointed by the Executive Dean of the College of Medicine.

C. Officers. The Executive Dean of the College of Medicine will serve as Chair of the Council. A Vice-Chair and a Secretary will be elected from the Council at large.

SECTION IV. MEETINGS OF THE COUNCIL:

A. The Council shall meet at a regularly scheduled time to be determined by the Council. Meetings shall be held as necessary to conduct the business of the Council. At least three
(3) working days’ prior to a meeting a copy of a proposed agenda shall be distributed by the Executive Dean’s Office to members of the Council. Council members may request specific agenda items. Requests for agenda items should be submitted in writing to the Executive Dean’s Office at least five (5) working days prior to the regular meetings for the items to appear on the printed agenda. In addition, agenda items may be raised from the floor at the meeting.

B. Special meetings of the Council may be called upon the written request of any five (5) members of the Council. Such requests shall be submitted to the Chair of the Council and the special meeting must be held within fifteen (15) working days of the request.

C. A quorum shall be defined as fifty-one percent (51%) of the voting membership.

D. The minutes of each meeting of the Council shall be maintained with copies distributed to the membership within ten (10) working days after the meeting. The Council shall vote on their acceptance at the subsequent meeting. The approved minutes shall be available in the Executive Dean’s Office and the Office of the President of the DFAC.
ADMINISTRATIVE ORGANIZATION

SECTION I. THE EXECUTIVE DEAN OF THE COLLEGE OF MEDICINE:

A. Duties and Responsibilities. The authority and responsibility for the operation of the College of Medicine has been delegated to the Executive Dean of the College of Medicine by the University.

B. Appointment. The Executive Dean shall be appointed in accordance with the policy established by the University Of Tennessee Board Of Trustees.

C. Reporting Relations. As the chief executive officer of the College of Medicine, the Executive Dean shall report directly to the Chancellor of the University of Tennessee Health Science Center.

D. Campuses. The College of Medicine is a statewide institution with clinical campuses located in Chattanooga, Knoxville, Nashville, and Memphis. In addition, some aspects of the educational program are available in Jackson and almost every city/town in Tennessee where preceptors for the Family Medicine clerkships are located. The four campuses - College of Medicine - Chattanooga; College of Medicine - Knoxville; College of Medicine – Nashville; and College of Medicine - Memphis - all have a regional Dean who is responsible for the operating functions at those locations. At the Memphis campus, the Executive Dean shall serve as the Memphis Dean in the absence of a separately named Memphis Dean. Department Chairs and other administrative personnel at these locations report to the respective regional Deans. In turn, each regional Dean reports to the Executive Dean of the College of Medicine who is the Chief Academic Officer for the College.

SECTION II. DEPARTMENTAL ORGANIZATION:

A. Departments. The College of Medicine shall be organized into departments relating to the various clinical and biomedical science disciplines. The departments shall be responsible
for the teaching, research, and service programs within the specific disciplines at the respective campuses.

B. Department Chairs. Each department shall be directed by an administrative official with the title of Department Chair. This position shall be responsible to the Dean of each campus (Regional Dean) for the total operation of the department as it relates to teaching, research, service, and patient care. This includes responsibility for the financial and personnel affairs of the department. Upon consultation with and approval by the Regional Dean, the department chair may organize the department into various divisions and sections as may be necessary to carry out the function of the department.

C. Appointment of Department Chairs. The appointment of each department chair shall be the responsibility of the Regional Dean with concurrence of the Executive Dean, the Vice Chancellor for Academic, Faculty and Student Affairs and the Chancellor. He/she shall be advised by a committee which shall be appointed and charged with the responsibility of studying and advising on the needs of the department, interviewing applicants, and recommending candidates. Further specifics are outlined in the currently approved UTHSC Faculty Handbook.

SECTION III. ACADEMIC PROGRAMS IN THE COLLEGE OF MEDICINE

A. Doctor of Medicine Degree: M.D.
B. Master of Medical Science - Physician Assistant: MMS-PA

SECTION IV. COMMITTEES OF THE COLLEGE OF MEDICINE:

A. General Purpose and Function of the Committees. Appropriate standing committees shall be established by the Executive Dean of the College of Medicine and charged with responsibilities in the areas of (1) review and recommendations of policies, procedures and programs and (2) implementation and evaluation of activities within the purview of each committee.
B. Reporting Relations. Each standing committee will report to the Executive Dean of the College of Medicine through the appropriate Associate Dean. Reports from the committees will also be presented to the Council by the Associate Deans on a regular basis so that the Council can make recommendations for changes to the pertinent approving authority prior to the implementation of significant policy (as distinct from technical, administrative, or procedural) changes proposed by the committees.

C. Composition of the Committees. The membership of the standing committees of the College of Medicine shall be appointed by the Executive Dean of the College of Medicine. Nominations of faculty for possible committee membership will be obtained from the Dean’s Faculty Advisory Council, self-nomination/peer nominations, and from appropriate Associate Deans; some of whom serve as chairs of the various standing committees. Typically, where committee membership is not already specifically prescribed (see below), the Executive Dean will appoint committee members from this nomination pool. The membership of the various standing committees will be made up by members of the faculty of the College of Medicine. In addition, the Committee on Admissions, the Committee on Student Affairs, and the Committee on Undergraduate Medical Education (CUME) and its Course and Module Directors Curriculum, Clinical Sciences (CSS), and Curriculum Integration subcommittees shall include student representation. The membership of other committees may include student and staff representation as deemed appropriate by the Executive Dean. Whenever necessary, subcommittees shall be appointed by the Executive Dean of the College of Medicine in consultation with the chair of the appropriate standing committee to address specific policies, procedures, or program activities. All subcommittees shall report through the appropriate standing committee or Associate Dean to the Executive Dean of the College of Medicine. Where appropriate, staff support for these committees will be appointed by the Executive Dean. Membership on all committees shall be reviewed annually. In addition to the basic voting membership of committees and subcommittees, appropriate non-voting (ad hoc) members may be appointed by the Executive Dean with the advice of the appropriate committee or subcommittee chair.
D. **Standing Committees.** The following shall be standing committees of the College of Medicine:

For the Program leading to the Doctor of Medicine: 1-4 (below)

1. The Committee on Undergraduate Medical Education (MD) (CUME).

   a. **Function.** The Committee shall be responsible for (1) reviewing and approving policies, procedures, and programs regarding undergraduate medical education and (2) implementing and evaluating the undergraduate curriculum of the College of Medicine. The CUME will work collaboratively with pertinent CUME subcommittees, college chairs and faculty (e.g. course or track directors) in the pursuit of its objectives. However, the CUME has final authority for approving all aspects of the undergraduate medical curriculum. Subcommittees of the CUME shall be established to coordinate and implement the educational program in specific areas. These subcommittees shall be:

   (1.) **Course and Module Directors Curriculum Subcommittee.** This subcommittee is responsible for (1) reviewing and recommending policies, procedures, and programs in the preclinical (M1/M2) biomedical sciences portion of the curriculum to the CUME and (2) implementing and evaluating the preclinical biomedical sciences curriculum. The Course and Module Directors Curriculum Subcommittee will work collaboratively with pertinent college chairs and COM faculty (e.g. course or track directors) in the pursuit of its objectives. Membership of the Course and Module Directors Curriculum Subcommittee shall be named as provided in Section IV-C. Included in its membership shall be at least one medical student.

   (2.) **Clinical Sciences Subcommittee.** This subcommittee is responsible for (1) reviewing and recommending policies, procedures, and programs regarding the third-year core clerkships to the CUME, (2) managing the implementation and evaluation of the clerkship curriculum, (3) reviewing for approval new
elective and senior clerkship proposals from faculty members and (4) implementing and evaluating the clinical elective curriculum. The Clinical Sciences Subcommittee will work collaboratively with pertinent college chairs and COM faculty and health care partners in the pursuit of its objectives. Membership of the Clinical Sciences Subcommittee shall be named as provided in Section IV-C. Included in its membership shall be at least one medical student.

(3.) Curriculum Integration Subcommittee. This subcommittee is responsible for (1) identifying gaps and/or redundancies in the curriculum that negatively affect student achievement of program objectives, (2) developing processes to promote better horizontal and vertical integration and (3) making recommendations for improvement to the CUME based on the data. The committee has a major role in providing guidance to the CUME on continuous curriculum improvement. The Curriculum Integration Subcommittee will work collaboratively with pertinent CUME Subcommittees, college chairs and COM faculty (e.g. course or track directors) in the pursuit of its objectives. Membership of the Subcommittee consists of faculty teaching in the preclinical and clinical phases of the curriculum as well as student representatives. This committee is led by the Assistant Dean of Curriculum Integration.

b. Membership and Chair. Membership on the CUME shall be named as provided in Section IV-C, and the membership shall include at least one medical student. The Associate Dean for Medical Education will serve as the Chair. Membership on the subcommittees will be determined by the function of the committee, except that the chair of each subcommittee is appointed by the Executive Dean.

2. Progress and Promotions Committee for a Medical Class 2XXX (MD). This committee is responsible for monitoring student progress and making recommendations to the Executive Dean through the Associate Dean for Medical
Education concerning the results of student performance in the undergraduate curriculum. Membership of the Progress and Promotions Committee shall be named as provided in Section IV-C.

3. The Committee on Admissions (MD).
   a. **Function.** The Committee shall be responsible for (1) reviewing and recommending policies, procedures, and programs on admission of applicants to the College of Medicine to the Executive Dean of the College of Medicine, (2) implementing and evaluating the admissions process and (3) reviewing and accepting the applicants for admission to the College of Medicine.
   b. **Membership and Chair.** The membership shall be determined as provided in Section IV-C. A faculty member chosen by the Executive Dean will serve as the Chair. Student representation shall be included.

4. The Committee on Professionalism and Student Affairs (MD).
   a. **Function.** The Committee shall be responsible for (1) reviewing and recommending policies, procedures, and programs regarding student affairs to the Executive Dean of the College of Medicine and (2) implementing and evaluating various aspects of the student campus life supportive of the academic programs.
   b. **Membership and Chair.** The membership shall be appointed as provided in Section IV-C. A faculty member chosen by the Executive Dean will serve as the Chair. Student representation shall be included.

5. The Committee on Appointment, Promotion and Tenure (CAPT)
   a. **Function.** The committee at each regional campus shall be responsible for (1) reviewing and recommending policies, procedures, and programs in the area of appointments, promotions, and tenure of the faculty of the College of Medicine to
the campus Regional Dean of the College of Medicine, (2) implementing and evaluating procedures on appointments, promotions, and tenure of faculty, (3) reviewing and recommending to the Regional Dean action on all individual nominations by department chairs for appointment, promotion, and award of tenure, and (4) other matters (i.e. assessment) as assigned by the Regional or Executive Dean.

b. **Membership.** Subject to and consistent with College of Medicine Bylaws and policies, the membership shall be appointed by the Regional Dean or, for the Memphis Campus, as outlined in Appendix F. A faculty member chosen by the Regional Dean will serve as the Chair. Campus committees are to be chaired by a faculty member who is not a departmental chair. The committees will function under the administrative guidance of the Senior Associate Dean of Faculty Affairs.

c. **Maintaining Comparability of Promotion and Tenure Criteria Across Campuses.** To help ensure promotion and tenure criteria are comparable across campuses in the College of Medicine, requests by the Regional Deans for changes to policies, programs, or procedures related to promotion and tenure will be reviewed by the Executive Dean. The Executive Dean will determine if the changes are consistent with current college policies and processes or if further discussion is required in the entire college related to the proposed change. Recommendations by Regional Deans on individual faculty promotion and/or tenure will also be reviewed by the Executive Dean and, after making an independent recommendation, the Executive Dean will forward all recommendations to the UTHSC Chief Academic Officer.

6. The Committee on Graduate Medical Education.

   a. **Function.** Subject to and consistent with the College of Medicine Bylaws and policies, the committee shall be responsible for (1) reviewing and recommending policies, procedures, and programs in graduate medical education to the Regional Dean of the College of Medicine, and implementing and evaluating policies,
programs, and procedures relating to graduate medical education for the College of Medicine.

b. **Membership.** Each campus will have its own committee. The membership shall be appointed as provided in Section IV-C. An Associate Dean for Graduate Medical Education or designees of the Regional Dean will serve as the Chair.

For the Program leading to the Master of Medical Science - Physician Assistant (MMS-PA, the Committees outlined in items 7-10 below apply)

7. Admission Committee (PA)
   a. **Function.** The committee reviews and selects applicants and makes admissions recommendations to the Associate Dean of Medical Education and ultimately the Executive Dean of the COM.

   b. **Membership.** The entire PA Department faculty, including the Chair of the department and Program Director participate in the admissions process. The Executive Dean of the COM will appoint the chair of the committee.

8. Progress and Promotions Committee (PA)
   a. **Function.** The committee is responsible for evaluating student performance and documenting any remedial instruction. The committee makes recommendations to the Associate Dean of Medical Education and ultimately the Executive Dean of the COM.

   b. **Membership.** The Committee is comprised of the entire PA Department faculty, the Department Chair, and Program Director. The executive Dean of the COM will appoint the chair of the committee.

9. Curriculum Committee (PA)
   a. **Function.** The committee is responsible for designing, implementing, coordinating and evaluating the curriculum. The committee makes recommendations to the
Associate Dean of Medical Education and ultimately the Executive Dean of COM.

b. Membership. The faculty of the PA Department, the Department Chair, the program director, and the medical director are members of the curriculum committee. The Executive Dean of the COM will appoint the chair of the committee.

10. Committee on Professionalism and Student Affairs (PA)
    a. Function. The committee will be responsible for reviewing and recommending policies, procedures, and programs regarding student affairs and addressing questions of professionalism. The committee reports to the Associate Dean of Medical Education and ultimately the Executive Dean of the COM.
    b. Membership. The committee will be comprised of the entire PA Department faculty, Department Chair, Program Director and Medical Director. The Executive Dean will appoint the chair of the committee.

E. Ad Hoc Committees. Ad Hoc Committees of the College of Medicine may be appointed as deemed necessary by the Executive Dean and Regional Deans of the College of Medicine. Generally, these committees will be assigned clear and specific duties for a limited time. At least one member of these committees shall be a member of the Council.

SECTION V. ADMINISTRATIVE OPERATION OF THE OFFICE OF THE EXECUTIVE DEAN:

The Executive Dean of the College of Medicine shall establish and appoint various staff officers and officials to assist in the daily operation of the College of Medicine. These officers and officials shall be assigned specific areas of responsibility by the Executive Dean.

Functions and structure of a medical school are found in the “Accreditation Standards” of Medical Education Programs Leading to the MD Degree” found at the Liaison Committee on Medical Education (LCME) website at https://lcme.org/
Accreditation Standards for Graduate Medical Education are found at the Accreditation Council for Graduate Medical Education (ACGME) website at www.acgme.org

Accreditation Standards for Physician Assistant Education are found at the ARC-PA website at http://www.arcpa.org

Departments and Organization Charts for the College of Medicine may be found on the UTHSC website and on the regional campus websites for the College of Medicine.
Section Two

Faculty Bylaws
ARTICLE I. NAME
The name of this organization shall be the Faculty Organization of the College of Medicine of the University of Tennessee Health Science Center, hereinafter referred to as FCM.

ARTICLE II. PURPOSE
The purposes of the organization are to:

▪ Promote and facilitate communication among the members of the faculty and the College of Medicine administration
▪ Afford faculty members opportunities to review and discuss policies and programs of the College of Medicine
▪ Allow faculty a voice relative to the policies and procedures of the College of Medicine through designated faculty representation on the Dean's Faculty Advisory Council (DFAC)
▪ Periodically advise the Dean concerning the efficacy of the committee structure in the College of Medicine
▪ Make recommendations through the DFAC concerning the membership and Chairpersons to the standing committees of the College of Medicine
▪ Make recommendations through the DFAC concerning the membership of any ad hoc committees whose membership includes representatives from the faculty

ARTICLE III. MEMBERSHIP
▪ Voting Members - Membership in FCM shall be open to all persons holding regular Full-Time or Part-Time faculty appointments (i.e., instructor, assistant professor, associate professor, professor) in the College of Medicine.
▪ Non-voting Members - Emeritus faculty and volunteer faculty with a faculty appointment are eligible for non-voting membership
▪ Ad Hoc Membership - The President of the Faculty Senate of the Health Science Center in Memphis is given an ad hoc membership to the DFAC
▪ Membership Dues - There shall be no dues assessment for FCM membership

ARTICLE IV. MEETINGS AND VOTING
Meetings
1. General meeting – There shall be at least one general meeting of FCM per year, held in the
Spring. The time and place of the meeting will be designated by the Dean’s Faculty Advisory Council and notice of the meetings must be given two (2) weeks in advance. Video/audio conferencing will be utilized to allow all faculty at all campuses to attend.

2. Special meetings - Special meetings with video/audio conferencing capabilities may be called by the president of the DFAC or may be held in response to a written request by twenty (20) members of FCM, or in response to a request by the Dean of the College of Medicine. Written notice of the special meetings stating the time and place and purpose of the meeting must be given at least five (5) working days prior to the meeting.

3. Dean's Faculty Advisory Council (DFAC) meetings
   
a. Regular Meetings - The DFAC shall hold no fewer than eight (8) monthly meetings per year at a regular time and place selected by the DFAC. The meetings will address business from all campuses with video/audio conferencing available between sites. The president will set the agenda for each of these meetings.

    b. Called Meetings - Called meetings may be held at the request of the DFAC president, in response to a request from a majority of the members of the DFAC, or in response to a request by the Dean of the College of Medicine. The purpose of the meeting shall be stated, and no other business shall be transacted at such called meetings.

Voting

1. For general and special meetings of the FCM a quorum shall consist of forty (40) members of FCM.

2. Issues before FCM shall be decided by a simple majority vote of the members present. There will be no proxy voting at the General Meeting, although faculty votes may be accepted prior to the meeting by mail or email or other electronic means.

Elections

1. Nominations - DFAC shall prepare a slate of candidates to serve as officers of the organization. The slate of candidates shall be distributed with the notice of the Spring meeting, two weeks prior to the date of the meeting. Nominations will be accepted from the floor.

2. Voting - New officers of FCM/DFAC shall be elected by majority vote and will assume their duties at the close of the Spring meeting.

Rules of Order

ROBERTS RULES OF ORDER shall govern at all meetings of FCM, unless they conflict with the Bylaws of FCM.

ARTICLE V. OFFICERS AND THEIR DUTIES

Officers

1. The officers of FCM/DFAC shall be a president, vice president/president-elect, and secretary.
2. Officers shall be elected by majority vote of FCM members at the Spring General Meeting per Article IV, C.

3. An administrative term shall be twelve (12) months. The President may not serve consecutive terms.

Duties of the Officers

The president shall:

▪ preside at all meetings
▪ interpret the Bylaws with the parliamentarian
▪ cast the deciding vote in case of a tie (president may not abstain in a tie situation) and may vote or abstain from other votes
▪ supervise the affairs of the organization
▪ be empowered to appoint a replacement for a vacated elected officer of FCM (to fill the unexpired term) with approval of the DFAC
▪ be an ex officio member of the Faculty Senate

The president-elect shall:

▪ become president if the president vacates
▪ preside at meetings if the president is absent
▪ accept any administrative responsibility requested by the president or Executive Dean
▪ be an ex officio voting member of the College of Medicine Council

The secretary shall:

▪ keep minutes of all sessions of the DFAC and general membership meetings
▪ record attendance at meetings for this purpose
▪ notify the DFAC of any meetings, and prepare notices of general meetings for distribution
▪ keep the official minutes and original Bylaws of FCM
▪ be responsible for publication of the Minutes of DFAC and the General Faculty Meetings

The Executive Dean shall be parliamentarian.

ARTICLE VI. COMMITTEES

There shall be one committee of FCM:

Dean's Faculty Advisory Council (DFAC): The DFAC will be composed of the elected officers - president, vice president/president-elect, secretary, and elected members from the various campuses. Past presidents shall be ex officio members of the DFAC for the two years following their term of office (this is not intended to replace the elected member of the committee from the
Election of Dean's Faculty Advisory Council members:

All campuses will have proportionate faculty representation on the DFAC. DFAC membership will be a maximum of 40 members with proportionate representation per campus that is consistent with the percent of compensated faculty FTE at that campus as a function of the FTE of compensated faculty in the entire College of Medicine. In Memphis, each department will elect one representative to the Dean's Faculty Advisory Council. At the Nashville, Knoxville, and Chattanooga campuses a process for electing faculty representatives will be established. The election of all representatives is ideally held around the time of the annual spring meeting. The term of office of Dean's Faculty Advisory Council members elected by departments/divisions/units shall be two (2) years and is renewable. A representative’s term shall begin on July 1 of the year in which the representative is elected.

Duties of Dean's Faculty Advisory Council members:

▪ to provide the Dean with names of faculty for vacancies on the College and/or Campus-wide-Committees
▪ to ascertain and represent the viewpoints of the faculty of their departments or campuses at Dean's Faculty Advisory Council meetings
▪ to suggest topics for inclusion on the agenda of the College of Medicine Executive Committee or Council or both
▪ to determine faculty viewpoints on prospective College of Medicine policies, procedures, and programs and to inform the FCM
▪ to transmit to their department / campus members’ information concerning FCM Dean's Faculty Advisory Council meetings and other matters
▪ to select an alternate to attend meetings of the Dean's Faculty Advisory Council when the elected member is unable to attend

ARTICLE VII. AMENDMENTS

These Bylaws may be amended by a quorum and a majority of those present and voting at any General meeting, provided notice of the proposed change(s) is given at least two weeks (14 days) prior to such meeting. Changes are subject to approval by the Executive Dean, Chief Academic Officer, and the Chancellor of the University of Tennessee Health Science Center.

ARTICLE VIII. LOGISTICAL SUPPORT

The secretary of DFAC shall be responsible for preparing notices of meetings. The Dean's office will be responsible for distribution of meeting notices and other necessary information, and may provide secretarial or staff support to FCM for limited periods of time.
ARTICLE IX. AUTHORIZATION OF FCM

FCM is reinstituted and organized according to the document - Organization and Structure of the College of Medicine, dated March 5, 1985, issued by the Dean of the College of Medicine, and approved by the Chancellor of the University of Tennessee Health Science Center.

ARTICLE X. DISSEMINATION OF INFORMATION

The minutes of the FCM meetings, after approval by the Dean's Faculty Advisory Council, will be distributed to the COM faculty and posted on DFAC Web Site.

The president of DFAC will prepare an Annual Report that will be disseminated among faculty and published on the DFAC web site.
Section Three

Appointment, Promotion, and the Award of Tenure

This document (College of Medicine Bylaws) is superseded by the currently approved UTHSC Faculty Handbook. The currently approved UTHSC Faculty Handbook may be found on the Office of Academic, Faculty and Student Affairs Office webpage.
CRITERIA FOR APPOINTMENT IN OR PROMOTION TO SPECIFIC ACADEMIC RANKS

Appointment to the Faculty is based on the past demonstration and/or promise of excellence in teaching, clinical care, research/scholarly activity, and/or service. Proper credentials will be the prime criterion for appointment. The original appointment of an individual to a specific faculty rank must be based on credentials documented through the Institutions at which they were obtained (degrees verified by providing an official transcript, postdoctoral training, residency, fellowship, etc.). Each candidate will be evaluated with respect to past performance in academic and scholarly activities appropriate to his/her fields.

A description of Faculty Ranks and Faculty Appointments can be found in the currently approved UTHSC Faculty Handbook.

There are two types of regular appointments: tenure track and non-tenure track. Academic rank and the award of tenure are separate at the University of Tennessee. In a following section entitled, “Criteria for Award of Tenure” the tenure processes are outlined. As described in the currently approved UTHSC Faculty Handbook, the appointment of a faculty member in the non-tenure track is contingent upon the availability of salary funds either from sources not controlled by the University, e.g., grants, contracts, clinical practice, etc., or from University-controlled funds.

Individuals may be appointed to the non-tenure track at any rank for which they qualify, including Instructor, Assistant Professor, Associate Professor, and Full Professor.

Renewal of non-tenure track appointments will be based on availability of funds, documentation of continued excellence in performance, and contribution to the goals of the College and the faculty member’s department(s). Non-tenure track faculty may be appointed
for one (1), two (2), or three (3) year initial terms, which may be renewable afterward as one-year terms. Whereas a faculty member in the tenure track must attain tenure by a specified mandatory tenure date (usually within six years) or be terminated with a one (1) year notification period, faculty members on the non-tenure track may be reappointed for as long as funds are available, and performance is acceptable. The faculty titles for non-tenure track appointments are the same as for tenure appointments; both are without tenure distinction. Non-tenure track faculty may participate in faculty governance at the same level as tenured or tenure track faculty, with the exception that they will not be able to vote in decisions regarding the award of tenure.

Duties of non-tenure track faculty will be specifically listed in the initial and annual appointment letters. Individuals with duties primarily in clinical practice and teaching will be identified as Clinician Educators; those with duties primarily in collaborative research and teaching will be identified as Research faculty.

A current faculty member in either track is eligible to apply for any advertised UTHSC faculty position whether tenure track or non-tenure track. If the current faculty member is selected for the new position, this in effect could lead to a change in his or her current track from non-tenure to tenure or vice versa. However, each faculty member would normally be permitted to change tracks only once. All posted and advertised faculty positions are filled in accordance with University guidelines that include a review by appropriate departmental recruitment, appointment, and promotion committees as well as college committees, such as the COM CAPT. The intent is to select the most qualified person for the new position whether tenure track or non-tenure track.
Decisions regarding the actual awarding of tenure and further promotions will be based on the time of the initial appointment in the tenure track.

Appointment or promotion in the non-tenure track requires demonstrable scholarship. For Clinician Educators, there should be evidence of excellent teaching and professional service. For Researchers, there should be evidence of excellent teaching and outstanding research, either individual or collaborative in nature.

Scholarly achievements readily identifiable in the traditional realms of endeavor of the faculty member (teaching, clinical care [if appropriate], research/scholarly activity, and/or service) are the major criteria for promotion.

The following criteria will be applicable for all faculty appointments including tenure track, non-tenure track, adjunct, affiliated, and volunteer. Criteria to support appointment or promotion to Assistant Professor, Associate Professor, or Professor must be considered with the realization that not all candidates for appointment or promotion will excel in all relevant categories of scholarly achievement. The categories that best demonstrate the strengths of each candidate must be prioritized independently for that candidate. For example, individuals whose primary appointment and function is to be a clinician educator may or may not perform clinical or basic research. For non-tenure track appointments and promotions, particularly for basic science appointments, individuals may not be expected to either obtain independent extramural funding or maintain an independent research program. The requirement for documented scholarly achievement to support promotion, however, will be no less important, regardless of the type of appointment.

Further details about the requirements for each rank are in the currently approved UTHSC Faculty Handbook.
A specific Clinician Educator track in the College of Medicine recognizes clinicians whose area of academic excellence is in teaching, patient care, and service. The track encompasses the following non-tenured ranks: Assistant Professor, Associate Professor and Professor. Guidelines suggesting suitable activities for promotion to each level have been developed within the College of Medicine and promulgated to faculty and chairs (see Appendix G); such guidelines will be reviewed and amended from time to time, as needed. For faculty who wish to seek promotion, progress evaluations can be undertaken during regular annual performance reviews of agreed-upon goals and objectives. Appointment at the Assistant Professor level will be for clinicians who are board-certified/board eligible, if applicable, and who have begun a clinical service career involving patient care and dedicated teaching of students, residents and/or fellows. To advance to the rank of Associate Professor, the individual will provide documented evidence of sustained dedication and excellence in teaching and patient care. He or she will also have developed a record of regional leadership or scholarship in clinical medicine and/or medical education. To advance to the rank of Professor, the individual will provide documented evidence of sustained excellence in teaching and patient care, and a national or international record of scholarly contributions and publications related to clinical medicine and/or medical education.

**Criteria for the Different Academic Ranks:**

The metric for promotion can be found in the currently approved UTHSC Faculty Handbook. General requirements for appointment or promotion to the faculty are as follows:
I. Instructor

A. Training

1.) Medical Doctor Degree, Doctoral degree or terminal degree in one’s discipline.

2.) Residency training or postdoctoral research training of one (1) to three (3) years

B. Potential Commitment to excellence in teaching, patient care (if appropriate), research, and/or service.

Documentation of the appropriate education and experience will be provided to the Dean of the College of Medicine by the Chair of the department in which the appointment is to be recommended. The rank of Instructor is considered transient. The credentials of the individual are not yet adequate to judge whether he/she will merit a more permanent faculty appointment in this institution; thus, appointment will be on an annual basis with careful review of continuation each year. For regular faculty, the chair is urged to make a critical decision on retention (and generally, thus, promotion) of an instructor no later than three (3) years after original appointment.

II. Assistant Professor

Appointment or promotion to Assistant Professor implies completion of training, during which the faculty member has already demonstrated that he/she has an adequate background to develop a career in academic medicine.

A. Training

1.) Medical Doctor Degree, Doctoral degree or their equivalent.

2.) For physicians, certification by the American Board or foreign equivalent certifying body in his/her basic medical specialty is required. Only a physician whose role is in
teaching, research and/or service without a patient care component is exempted from seeking certification. The requirement for certification may also be temporarily waived if the subspecialty requires a year or more of clinical practice before being eligible for the Boards. This waiver will be particularly relevant for disciplines that necessitate a delay in completing Board certification.

3.) For biomedical scientists with a Ph.D. degree, at least two (2) years post-doctoral training and one (1) first author publication is generally expected.

4.) Normally the expected timeline for training prior to appointment as assistant professor is as follows:
   a) For individuals with a Ph.D. the average time between graduation with a bachelor’s degree and appointment as Assistant Professor is six (6) to eight (8) years, four (4) to six (6) years in graduate school and two (2) to four (4) years post-doctoral training.
   b) For individuals with a M.D. who will assume a position that will be 80% or more clinical service with teaching responsibility but no research, the average time between completion of a bachelor’s degree and appointment to Assistant Professor will also be six (6) to eight (8) years, four (4) in medical school, and a minimum of two (2) to four (4) years residency to achieve Board certification.
   c) For individuals with an M.D. or M.D./Ph.D. who will assume a position that will include basic or clinical research, the time between completion of a bachelor’s degree and appointment to Assistant Professor will also be six (6)
to eight (8) years but will likely tend more toward eight (8) years to encompass residency training and a fellowship for research training.

B. Potential

1.) Promise of excellence in teaching.

2.) Promise of excellence in research/scholarly activity and/or clinical care and promise for continued productivity such as by one of the following:
   a) High quality performance in a clinical or research fellowship or graduate training as documented by directors of these programs.
   b) Collaborative or independent research leading to publication and/or presentation.
   c) Outstanding performance in patient care activities.

3.) Promise of excellence in service to the Department, College, University and/or Community.

The question of fulfillment of these criteria will be reviewed by the Committee on Appointment, Promotion and Tenure of the College of Medicine and by the Associate Dean for Faculty Affairs who will then make recommendations to the Executive Dean. The actual appointment will be a matter between the chair of the department in which the appointment is to be made and the Executive Dean of the College of Medicine, and the Vice Chancellor of Academic, Faculty and Student Affairs.

III. Associate Professor

While the years in the rank of Assistant Professor are a period in which a faculty member is given the opportunity and is expected to develop skills and expertise relative to his/her role in
the department (in one of the usual academic arenas - teaching, patient care, research, and/or service), an appointment in or a promotion to the rank of Associate Professor signifies considerable accomplishment of these goals with definite promise of continued productivity and development. A promotion to the rank of Associate Professor signifies an expectation of eventual promotion to the rank of Professor. A period of four (4) years is usually the **minimum** time in the rank of Assistant Professor after which promotion to Associate Professor could be made.

A. Training

1.) Any recommendation for appointment or promotion to the rank of Associate Professor must extensively and specifically document the nominee's contributions and accomplishments. These include all those required for the rank of Assistant Professor and demonstrated excellence in teaching, patient care, research and/or service, and promise of continued productivity therein.

2.) In addition, certification by the American Board or equivalent credentials is expected for faculty with an MD degree who have clinical responsibilities.

B. Accomplishments

1.) Scholarly achievement for individuals with a Ph.D. and a basic sciences appointment may include the following in order of priority and importance:

   a) peer reviewed publications that have significant scientific impact based on the citation index factor, numbers of views, and downloads, etc for the top five (5) publications produced as an Assistant Professor

   b) consistent extramural grant support
c) evidence of national recognition of success in the candidate’s area of expertise such as chairing or co-chairing sessions at national meetings, invitations to speak at national meetings or at other institutions, presentations at national meetings, manuscript reviews or appointment on editorial boards, invited book or journal reviews, and service on study sections or other invitations for grant reviews

d) success of trainees in obtaining academic positions

e) demonstrable proficiency in teaching determined by the number of hours committed and student and peer faculty evaluations

f) service on University and Departmental committees

g) Demonstrated willingness to participate in collaborative research both inside and outside the candidate’s Department

h) professional consulting services and service on educational or directory boards outside the University

i) operation and direction of a core research facility to provide research service and training

2.) Scholarly achievement for individuals with a M.D. and an appointment that is primarily clinical service with teaching may include the following:

a) Board certification in the relevant specialty is required

b) excellence in clinical service as demonstrated by the development or implementation of innovative clinical or diagnostic procedures and technologies

c) success of trainees in obtaining board certification
d) demonstrable proficiency in teaching determined by student and peer faculty evaluations

e) excellence in the development and implementation of standard clinical procedures and in training residents and fellows in the application of those procedures

f) publications including peer reviewed publications, invited publications, reviews of clinical procedure, textbook chapters on clinical procedure, case studies, and clinical reports

g) international, national, and regional presentations

h) service on University committees and boards

i) service on hospital committees and boards

3.) Scholarly achievement for M.D. or M.D./Ph.D. with both clinical and research commitments will include a combination of both of the above categories with priority assessed according to percent of appointment allocated to each of the two (2) main areas

Accomplishments in all areas are considered. However, one’s outstanding accomplishments in a particular area, as determined by one’s primary role(s), may overcome limited accomplishments in other areas. For further clarification with respect to criteria for volunteer faculty and educators, see the currently approved UTHSC Faculty Handbook.

IV. Professor

Attainment of the rank of Professor is an indication that, in the opinion of colleagues, the individual has made, and continues to make, outstanding contributions in teaching, patient care
(if appropriate), research, and/or service, as defined under the Associate Professor rank; has achieved a high level of creative productivity in the academic arena and has earned national and in most cases international recognition. The higher one's rank, the more he/she should be recognized for sharing his/her knowledge, skills, expertise and talents beyond the institution. It should be stressed that appointment in or promotion to this rank is recognition of outstanding accomplishments rather than of longevity of service. However, a period of five (5) years is usually the minimum time at the rank of Associate Professor after which promotion to Professor is made. As with other ranks, the following criteria should not be considered all-inclusive, but as guidelines. Any recommendation for appointment or promotion to the rank of Professor must be accompanied by explicit documentation.

Candidates must meet the requirements for Associate Processor rank, and in addition, the following are considered:

A. National recognition by peers as an authority in his/her particular field of clinical and/or scientific endeavor.

B. Effective and devoted leadership in the educational sphere and recognition as an effective and stimulating teacher.

C. Maintenance of an active research program with continuity for prolonged periods, that has produced significant scientific contributions and/or young scholars who themselves have become productive and capable of independent investigation.

D. Innovative and significant contributions in clinical medicine and its sub-specialties which signify advancements in health care.

E. Contributions to academic life by service and leadership on College and/or UTHSC academic committees.
F. Overall academic accomplishments and contributions, including:

1.) Membership and perhaps leadership in scientific (professional) organizations on regional and national levels.

2.) Recognition outside the institution such as through honors, invited professorships, peer-reviewed publications, participation on study sections or peer review panels, and/or appointments to qualifying specialty and subspecialty boards.

3.) Recognition within the institution through involvement on a leadership level in administration and policy-making functions.

4.) Significant contributions to public service.
CRITERIA FOR AWARD OF TENURE TO FACULTY

Academic rank and the award of tenure are separate at the University of Tennessee Health Science Center. For a person appointed on tenure track formal review of the accomplishments of the individual is to be undertaken by the chair annually with the faculty member’s evaluation and at the mid-point of the probationary period by the senior faculty of the department.

Specific information on the award of tenure is located in the currently approved UTHSC Faculty Handbook. The awarding of tenure is based not only on the individual’s professional excellence but also includes consideration of the anticipated needs of the academic programs of UTHSC.

Probationary Period and Interim Tenure Review:

When an individual is appointed to the faculty on a tenure track, the length of the probationary period shall be six (6) years. A faculty member may request an early consideration for tenure before the sixth year of his or her probationary period but no sooner than the next regular tenure cycle after completion of the first year of the probationary period.

For each faculty member on a tenure track, an interim tenure review shall be conducted at the mid-point of the probationary period for all individuals in accordance with the currently approved UTHSC Faculty Handbook. The review shall be conducted by the departmental promotion and tenure advisory committee and by the chair of the faculty member’s department at the same time as the faculty member’s annual performance assessment. The departmental chair shall certify in the annual performance assessment that the review has been completed and note the results thereof. The purpose of the interim review is to establish a mutual understanding
between the faculty member and the departmental leadership regarding his/her progress towards attainment of tenure. A negative interim review does not preclude the award of tenure but should place the candidate on notice of deficiencies which must be corrected before tenure could be recommended. A negative interim review should be accompanied by a definite plan whereby the faculty member can meet the departmental expectations which would allow a favorable recommendation at the end of the probationary period. Alternatively, an unfavorable review may lead to a notice of non-reappointment of the faculty member. This will be undertaken in keeping with the currently approved UTHSC Faculty Handbook. A favorable interim tenure review does not commit the department to a subsequent recommendation for tenure or the college to the award of tenure.

Further specifics pertaining to the award of tenure to and promotion of faculty are in the currently approved UTHSC Faculty Handbook. Annual deadlines for various reviews will be provided to academic units as guidance is received from the campus Chief Academic Officer.

**Termination**

For termination proceedings for Adequate Cause of tenured or tenure-track faculty, the bylaws shall provide for participation by the tenured faculty of the department as described in the currently approved UTHSC Faculty Handbook.
Section Four

Peer Review of Teaching
Providing the highest quality learning experiences for UTHSC students is one of the College’s major responsibilities. To ensure this responsibility is consistently met, all faculty members receiving compensation from UTHSC and participating in educational activities are required to undergo periodic peer review of their teaching. This review occurs at two levels. The first level is an Informal Peer Review of Teaching designed to provide collegial input for improvement and encouragement toward excellence in teaching. It is required every five (5) years for teaching faculty. If the quality of teaching during this informal process is found to be deficient, a second level review is performed. This second level of review adheres to the format of the Formal Peer Review of Teaching which is required for faculty being considered for promotion or tenure. Both the “Informal” and “Formal” Reviews of Teaching are outlined below.

**Informal Peer Review of Teaching**

The objective of Informal Peer Review of Teaching is to regularly assess and, where needed, constructively improve the quality of teaching and of students’ educational experiences. All faculty members who receive compensation from UTHSC and who provide educational experiences to students must undergo Informal Peer Review of Teaching. Newly appointed faculty members will undergo a teaching review, preferably within a year of when teaching activities commence. All faculty members will be additionally reviewed at least one (1) year prior to eligibility for promotion or every five
(5) years, whichever comes first. Those faculty members with the highest percent effort in the education mission will be informally peer reviewed first. A group to be reviewed in a given year will be composed of approximately two thirds (2/3) clinicians and one third (1/3) basic scientists, and no more than 20% of a given Department will be reviewed in a given year. Peer review in preparation for consideration of promotion will employ the procedures for the Formal Peer Review of Teaching (see below).

For the informal peer-review process, a peer reviewer will be selected by the faculty member in consultation with the chair/course director. The reviewer should be at the same or higher rank than the faculty member being reviewed. Care must be taken to avoid selecting a reviewer who may have a conflict of interest. Typically, the best candidate will be one who is familiar with the teaching modality to be observed – e.g., if the teaching event is a team-based learning (TBL), then the reviewer should be well experienced in TBL. It is important to recognize that teaching evaluations are highly contextual and that what constitutes good/poor teaching in one setting may not apply to another. The evaluation should be independent of the reviewer’s particular preference of teaching style, recognizing that varying styles of teaching can be equally effective. The setting for peer review of teaching must be in the faculty member’s primary teaching setting, i.e. lecture hall, laboratory, or clinical setting. The setting is to be determined by the faculty member in consultation with the chair. If the chair agrees, the faculty member can request that the review be by remote viewing of real-time or recorded class event. Those who teach in a clinical setting should suggest a suitable approach, e.g., to invite reviewers to join a teaching session with students on rotation, or to record a session for
reviewers to audit thereafter. In like manner, those who teach in laboratories should suggest a suitable format by which to review their teaching.

The faculty member to be reviewed will pick the exact date and time of teaching observation, in consultation with the reviewer. Any materials associated with the teaching event under observation should be provided to the reviewer at least three (3) days prior to observation events. Examples of materials include PowerPoint of lecture, background material for clinical setting, TBL handout, manuscript for editing session, etc. If available, anonymous student evaluations will be provided to gain student perspective. Such student reviews and information regarding how they were gathered will be provided to the peer reviewer prior to the teaching experience being reviewed. Prior to the peer review, the reviewer will meet with the reviewee to determine the reviewee's objectives in the review and specific aspects that he/she would like to receive particular attention, e.g., are the arguments sufficiently clear, was sufficient time left for questions, responses, etc.

During the teaching session being reviewed, the reviewer will use the COM relevant form, currently entitled "COM Informal Peer Reviewer Points of Observation", for classroom, for laboratory, or for clinical setting. A post-review meeting between the faculty member and reviewer to provide feedback on the observations is required. This meeting should occur as soon as possible after the review so that specifics rather than vague concepts can be discussed. Email is not sufficient for the post-review feedback. This verbal feedback is confidential between the reviewer and faculty member. It is to be a two (2)-way discussion that elaborates on short notes taken by the reviewer during the
in the person observation(s), remote viewing of real-time or recorded event(s), or concerns raised by the faculty member being reviewed.

**Requirements and Outcomes Following Informal Peer Review:**

- Overall evaluation of the teaching experience will be rated as “acceptable” or “unacceptable”.

- If the overall evaluation is rated "acceptable" this will be relayed to the department chair as soon as possible and noted in the faculty member’s annual performance review and permanent personnel file.

- If the reviewer rates the observed teaching as “unacceptable”, an additional teaching review will be performed within six (6) months of the initial review, with the additional requirement of documented, remedial action taken during the interim. The remedial action(s) will be based on a plan developed by the reviewer and faculty member under review. In the spirit of constructive faculty development, this initial evaluation does not become part of the faculty member’s formal annual faculty performance review or permanent personnel file.

- If two (2) successive evaluations are rated as "Unacceptable", a more comprehensive, formal, second-tier teaching review will be conducted at the next feasible teaching opportunity and will adhere to the format used in preparation for tenure or promotion considerations (see below “Formal Peer Review of Teaching”). The results of this second-tier review, either "acceptable" or "unacceptable" will become part of the faculty member’s annual performance review and permanent personnel file.
• Notification of the informal peer review's final outcome, "acceptable" or "unacceptable", should be completed and forwarded to the chair/division chief as soon as possible, but within two (2) business weeks of the last required review.

**Formal Peer Review of Teaching**

All faculty being considered for tenure or promotion must undergo peer-review of teaching. A peer reviewer will be agreed upon by the faculty member and chair. The reviewer should be at the same or higher rank than the faculty member being reviewed. The chair and faculty member must be careful to pick a reviewer that does not have a conflict of interest (COI). Typically, the best candidate will be from outside of the department, and one who is familiar with the teaching modality to be observed, e.g., if teaching event is a team-based learning (TBL), then reviewer should be well experienced in TBL.

The faculty member being reviewed has the right to reject the first reviewer proposed by the chair. This right to exclude one proposed reviewer must be done with written notification of the exclusion given to the chair within forty-eight (48) hours after the chair has forwarded their initial recommendation to the faculty member being reviewed. The chair will then pick a different reviewer. If a single reviewer cannot be agreed upon by the chair and faculty member under review, then two (2) reviewers will be used in which one will be selected by the faculty member and one will be selected by the chair.
• As noted above, reviewers should be at the same or higher rank than the faculty member being reviewed, and conflict of interest (CoI) should be given careful consideration.

• Two (2) observations of teaching activities of the faculty member are required. For consideration in either tenure or promotion, typically the peer reviews of teaching are not done in the same year, but an initial peer review and then a second peer review at a late time to allow time for the faculty to potentially improve their teaching and/or demonstrate a consistent level of excellence. These reviews can both be by a single reviewer, or two (2) different reviewers as described above.

• One reviewer:
  o This reviewer will evaluate two different teaching sessions.

• Two reviewers:
  o Ideally, two (2) observations of teaching should be performed on the same teaching event by the two (2) reviewers. Reviewers of a common teaching event will help the chair and faculty member better understand concerns and help them in devising how the faculty member might improve.

Training for peer reviewers will consist of the requirement that peer reviewers read and follow the guideline provided by COM; currently entitled "Tips for Peer Reviewers of Teaching". Setting for the peer review must be in the faculty member’s primary teaching setting, i.e., lecture hall, research laboratory, clinical setting, etc. The
setting is to be determined by the chair in consultation with the faculty member. If the chair agrees, the faculty member can request that the review occur by remote viewing of real-time or recorded class event. Those who teach in a clinical setting should suggest a suitable approach, e.g., to invite the reviewer(s) to join a teaching session with students on rotation, or to record a session for the reviewer(s) to audit thereafter. In like manner, those who teach in laboratories should suggest a suitable format by which to review their teaching.

The faculty member to be reviewed will pick the exact date and time of the two (2) teaching observations. Any materials associated with the two (2) teaching events under observation should be provided to the reviewer(s) at least three (3) days prior to observation events. Examples of materials include Power Point of the lecture, TBL handout, or manuscript for editing session with graduate student(s).

A post-review meeting to provide feedback of the two (2) observations is a requirement of this procedure. The meeting should occur as soon as possible after the review so that specifics rather than vague concepts can be discussed. Email is not sufficient for the post-review feedback. This verbal feedback is confidential between the reviewer(s) and faculty member. It is to be a two (2)-way discussion that elaborates on short notes taken by the reviewer during the in the person observation(s), remote viewing of real-time or recorded event(s), or concerns raised by the faculty member being reviewed. If two (2) reviewers were utilized, separate feedback sessions are required.
Following Formal Peer Review:

- A completed form, currently entitled, “Peer Reviewer Documentation of Observation” for “Classroom”, “Lab” or “Clinical Setting” is required for each observation. These forms will go to the chair, faculty member, and faculty and be part of the faculty member’s next annual review. Short notes that the peer reviewer(s) might take during observations will not be submitted to the chair or placed in faculty member’s file but discussed with the faculty member during the feedback session.

- Determination of Needs Improvement:
  - **One peer reviewer**: If the peer reviewer identifies six (6) or more substantive criteria over the two (2) observations where the faculty member's performance is determined to be “Unacceptable”, the faculty member's teaching is considered to “Needs Improvement” and a memo from chair documenting steps and strategies for improvement is required. This memo will be developed in consultation with the faculty member and the peer reviewer and cover a year timeframe.
  - **Two peer reviewers**: If there are two (2) peer reviewers, they must have cumulatively identified six (6) or more substantive criteria where the faculty member’s performance is determined to be "Unacceptable" for the faculty member to be considered to "Needs Improvement".
  - Should the faculty member not agree with the final rating of “Needs Improvement”, he/she may appeal through administrative channels.
(starting with the Chair) or through Faculty Senate per the approved UTHSC Faculty Handbook.

- Should the initial peer review of teaching indicate the need for improvement, a formal improvement plan must be developed as part of the next annual review.

- Review and forms should be completed before August of the year in which tenure or promotion consideration is to occur so that compliance with the requirement of peer review of teaching can be confirmed prior to the beginning of tenure or promotion consideration. Reviews are required documents to be submitted when a faculty member comes up for consideration of tenure and/or promotion.
APPENDIX A
PROCEDURES FOR INITIATING AND PROCESSING
RECOMMENDATIONS FOR APPOINTMENT TO THE FACULTY

1. A recommendation for appointment to the faculty of the College of Medicine is ordinarily initiated by the chair of the department(s) to which the faculty member is appointed. If a faculty member is to be appointed jointly in two or more departments, such nominations must be submitted, individually or jointly, by the chairs of all departments in which appointment is requested. Appointments may be made at any time during the academic year. The level of initial appointment will be determined by mutual agreement among the departmental chairs, the faculty candidate and the Executive Dean of the College of Medicine. The criteria for appointment at any given rank are identical to those stated previously.

2. When the departmental chair submits a nomination for new appointment to the Executive Dean, the following additional documents must also be submitted:

   a. For documentation of degree work and experience, these documents need to be official transcripts or, in the case of degrees completed at international institutions, a credential evaluation performed by a UTHSC-approved credentials evaluation agency.

   b. An up-to-date curriculum vitae constructed according to the format outlined in the currently approved UTHSC Faculty Handbook.

   c. At least two (2) external supporting letters of recommendation are required.

   d. For faculty whose native language is not English, a completed “Certification of Effective Communication in English” will be submitted as required by the currently approved UTHSC Faculty Handbook.
APPENDIX B
PROCEDURES FOR
INITIATING AND PROCESSING RECOMMENDATIONS
FOR PROMOTION AND AWARD OF TENURE TO
FACULTY

1. A recommendation for promotion of or award of tenure to a faculty member of the College of Medicine is ordinarily initiated by the chair of the department(s) in which the faculty member is appointed. An individual faculty member has the privilege of requesting his/her own promotion or award of tenure. Such a request should conform to the relevant stipulations of this document and to those in Appendix C, and it should be directed ordinarily to the departmental chair(s). In the case of a faculty member who holds a joint appointment in two or more departments, promotion may take place in one department without its occurrence in the other department(s). In any case, nominations must be submitted, either individually or jointly, by the chairs of all departments in which a promotion is requested. Award of tenure is recommended by the chair of the jointly appointed faculty member's base department, although tenure is an institutional responsibility. All procedures associated with faculty promotion and the award of tenure must follow the procedures in the currently approved UTHSC Faculty Handbook.

2. Anonymous Voting for Promotion and Tenure
The COM requires a procedure of anonymous voting by faculty members during deliberations of all tenure and promotions decisions. This method ensures that these important decisions remain free from bias and influence.

3. A. Promotion
For requests for promotion, the chair of any department must convene a promotion advisory committee consisting of at least three (3) members. The promotion advisory committee may have more members as long as each member is a faculty member (full-time, part-time, affiliated, or volunteer) of that department with a majority of the members holding a full-time appointment in that department. The promotion advisory committee should consist of faculty members of equal or higher academic rank than the rank of faculty member being proposed for promotion. The chair shall not be a voting member of this committee but may be present to hear the discussion of the committee members. This committee will review all properly documented recommendations for promotion and submit its recommendation and vote with a simple majority constituting a positive recommendation to the department chair. The committee may review a request from the department chair, initiate such recommendations itself, or review a request from a faculty member regarding his/her own promotion. The chair of the departmental committee must write a letter summarizing the departmental committee's recommendations (including both the majority and minority opinions) and votes on all nominees considered by the departmental committee and forward it to the department chair. Each nominee should have an individual letter written by the departmental committee to preserve confidentiality. A copy of this letter must accompany all promotion requests forwarded to the Executive Dean's Office.
B. Tenure

For requests for the award of tenure, the chair of any department consisting of at least three (3) tenured faculty members, in addition to the chair, must convene a tenure advisory committee. The committee may have more members provided all members are tenured within UTHSC and are members of that department. A majority of the members must hold a primary appointment in the department. The chair shall not be a voting member of this committee but may be present to hear the discussion of the committee members. This committee will review all properly documented recommendations for the award of tenure and submit its recommendation and vote with a simple majority constituting a positive recommendation to the department chair. The committee may review a request from the department chair, initiate such recommendations itself, or review a request from a faculty member regarding his/her own tenure. The chair of the departmental committee must write a letter summarizing the departmental committee's recommendations (including both the majority and minority opinions) and votes on all nominees considered by the departmental committee and forward it to the department chair. A letter should be written for each individual candidate to preserve confidentiality. A copy of this letter must accompany all requests for the award of tenure forwarded to the Executive Dean's Office.

Departments may convene separate advisory committees for promotion or tenure requests or have the same committee consider both, as long as only tenured faculty vote for the award of tenure requests.

4. The department chair reviews and considers the recommendations of the departmental promotion and tenure advisory committee. On the basis of these recommendations, he/she then formulates a letter of nomination, according to the format in Appendix C, to be forwarded to the Associate Dean of Faculty Affairs. The chair should include in his/her letter of nomination a statement regarding the opinion and vote of the departmental advisory committee if one was convened. Should the chair nominate an individual for promotion or the award of tenure in contrast to a negative recommendation of the departmental advisory committee, this fact must be noted in the chair's nominating letter and the reasons for the chair's action must be justified. With respect to tenure, the departmental committee may forward a dissenting report to the Executive Dean.

5. Individuals whose request for promotion is denied at the department level may appeal this action to the campus Dean and/or via procedures outlined in the Faculty Handbook. All tenure recommendations from the Department, whether positive or negative, shall be reviewed by the campus Dean and the Executive Dean.

6. The nomination letter from the department chair or division chief, constructed according to the format in Appendix C, must be accompanied by:
   a. An up-to-date curriculum vitae constructed according to the format in the currently approved UTHSC Faculty Handbook. This is required before any request can be considered by the Committee on Academic Appointments, Promotions, and Tenure.
b Letters of endorsement are required for recommendations for promotion of and award of tenure to faculty. Additional information on letters of endorsement is provided in Appendix D.

7. All recommendations and supporting documents will be forwarded by the departmental chair to the Associate Dean for Faculty Affairs of the College of Medicine by each stipulated annual deadline. Documents to be submitted include the candidate’s: (1) CV and any other supporting documentation the candidate wishes to submit, (2) peer review of teaching assessments; all since being hired, (3) 5 years of annual performance reviews for tenured and tenure-track faculty, (4) internal and external letters of evaluation, (5) Department Promotion and Tenure Committee letter, and (6) Chair’s letter.

8. Each recommendation, with supporting documentation noted above, will be presented, and reviewed by the Committee on Appointments, Promotions and Tenure (CAPT). The CAPT will make a positive or negative recommendation on each nomination to the Associate Dean for Faculty Affairs, for transmittal to the Dean. The recommendation of the Committee will represent the will of the majority of those present, but the minority views may also be transmitted. Further specifics about the structure and charge of the CAPT are indicated in Appendix F.

9. The Dean will decide on each recommendation based on the advice of the CAPT, on the advice of the Associate Dean for Faculty Affairs, and on the basis of other circumstances. On those recommendations in which the Dean concurs, he/she will so advise the chair making the recommendation. The recommendation with all supporting documents will then be forwarded to the Vice Chancellor for Academic, Faculty and Student Affairs and the Chancellor for further processing.

10. If the CAPT renders a negative recommendation, the Department Chair is informed in writing of the reason(s) for the recommendation. The Department Chair may appeal back to the CAPT or directly to the Executive Dean before the decision at the college level is made by the Executive Dean. The ultimate decision on the promotion or award of tenure to a faculty member at the college level should be largely the result of negotiations between the Dean and the departmental chair with the Dean having the final responsibility. In the case of a negative decision by the Executive Dean on a request for promotion or the award of tenure, the individual faculty member will be informed in writing of the decision prior to or at the same time as the Executive Dean forwards the recommendation to the Vice Chancellor for Academic, Faculty and Student Affairs.

Notification for negative recommendations will follow the procedures described in the currently approved UTHSC Faculty Handbook. It should be noted that for a tenure decision, at all levels of recommendation (Chair, Dean, Chief Academic Officer, Chancellor), a copy of the written explanation for a decision will be provided to the tenure candidate at the time it is forwarded to the next level of review. The chair will also provide a copy of their decision to the Department tenured faculty.
APPENDIX C
PREPARATION OF PROPOSAL LETTER

A letter nominating a faculty member for promotion or award of tenure must include the following:

a. Name of individual
b. Date of original appointment
c. Date of each prior promotion, if applicable
d. Date of award of tenure, if applicable
e. Date on which promotion or tenure is to become effective
f. Individual's discipline or field
g. Information in the outline below

In preparation of the letter, the chair should be aware that the letter of proposal will be read by members of the CAPT and may be read by the candidate and other appropriate individuals associated with the University of Tennessee.

The following outline describes some examples of important, specific information of which a department chair may be more knowledgeable than the CAPT. Provision of this and other academically-related data is needed for a fair and detailed evaluation by the CAPT and may be of decisive value. The use of this outline in preparation of the proposal letter will facilitate consideration by the CAPT. All items may not be applicable to every faculty member. Therefore, the items contained herein need not be addressed rigidly, but serve only as a guide to aid the chair in writing the strongest possible letter of nomination. The letter must be accompanied by an up-to-date curriculum vitae of the individual, constructed according to the format in the currently approved UTHSC Faculty Handbook.

A. TEACHING

1. Specific role(s) in:
   a. Curriculum and/or course planning
   b. Active participation in teaching students
   c. Active participation in extramural educational activities

2. Peer review of nominee's teaching performance

3. Information derived from students regarding teaching competence and effectiveness. This applies in particular to teaching by example and by word while carrying out clinical duties, and stimulating and effective contributions to departmental conferences, seminars and other academic discussions

4. Special teaching accomplishments and skills
   a. Founded a course or developed a manual, etc.
b. Innovative seminar or conference leader
c. Teaching award(s)

5. Number and names of trainees (Graduate Students, Post-doctoral Fellows, etc.) and their accomplishments in mentor’s lab and after leaving the mentor’s lab (usually recorded in the curriculum vitae)

6. Special contributions:
   a. Role in Grand Rounds, intra and/or extramurally
   b. Invited participant in conferences of other departments/divisions

7. National educational activities:
   a. Editor, on editorial board of, or expert consultant to, refereed publications
   b. Visiting professorships, named lectureship, significant participation in educational programs or medical societies

8. Academic rank and educationally-related accomplishments at other institutions in which previously appointed

9. Individual honors and recognitions

B. CLINICAL ENDEAVORS

1. Document significant clinical accomplishments:
   a. Development of new or improved methods of practice or the administration related thereto, etc.

2. Peer status
   a. Board and/or subspecialty certification (usually already recorded in the curriculum vitae)
   b. Department “expert” on a given area
   c. Recognition of clinical expertise

3. Individual honors and recognitions

C. RESEARCH

1. Specific accomplishments and significance thereof, keyed where possible to specific published work

2. Grant Support:
   a. Subjects and extent of
   b. Candidate’s role in the projects

3. Work in progress
4. As regards a candidate’s published scholarly contributions:
   a. Designate by number(s) or title(s) those specific publications which are:
      i) Particularly significant
      ii) Particular contributions to the knowledge of a field or specialty
   b. Identify candidate’s role(s) as co-author
   c. Identify the status (peer reviewed or not) of journal(s) and other publications to which the candidate has contributed; impact factors of journals are useful.
   d. Indicate papers or other contributions accepted for publication or in advanced stages of preparation
   e. Indicate abstract activity (evident when bibliography is complete)

5. NIH Study Section or equivalent extramural appointment(s)

6. Individual honors and recognitions

D. SERVICE AND ADMINISTRATIVE RESPONSIBILITIES

1. Role in different Departmental committees

2. Role in different College committees and/or subcommittees

3. Role in UTHSC committees or activities

4. Significant administrative responsibilities, especially those which may not be well known outside of the department
   a. Vice or Deputy Chair
   b. Chair (or member) of Departmental or Divisional committees for education, research, practice, advanced trainees' admissions, etc.
   c. Director and/or developer of Departmental units, special clinics, etc.

5. Role in extramural administrative activities

E. OTHER INDIVIDUAL ACCOMPLISHMENTS

1. Significant election to a society
   a. Status of the society in the field
   b. Criteria for election
   c. Relevance to academic rank (membership in the senior society (ies) with restricted membership strengthens proposals for promotion to senior ranks)

2. Activities in societies, foundations, or similar local, regional or national professional organizations
   a. Officer
   b. Committee member or Chair

3. Special awards, e.g., from Universities, Societies, etc.
APPENDIX D
LETTERS OF ENDORSEMENT

1. Letters of endorsement for promotion or tenure must follow the guidelines set forward in the currently approved UTHSC Faculty Handbook.

2. For letters which are solicited in support of a candidate’s tenure decision, the referee writing the letter must be tenured at the rank of Assoc. Professor or higher at his/her institution.

3. The letter of endorsement is governed by the Open Records Law of the State of Tennessee and may be reviewed by the faculty member.
APPENDIX E
POLICY AND PROCEDURES REGARDING FACULTY APPOINTMENTS OF A SPECIAL NATURE

This appendix on appointments deals with nine (9) areas of a special nature:

1. Appointment of non-physician health care professionals, at less than a doctoral level.
2. Appointment of persons who are not biomedical or related scientists (secondary appointment) and who hold professional administrative positions.
3. Appointment of staff in interdisciplinary programs.

Further specifics on appointments can be found in the currently approved UTHSC Faculty Handbook.

Point 1 (Appointment of Faculty Without Terminal or Physician Assistant Degrees):
Persons with less than a doctoral level degree or a Master of Medical Science Physician Assistant, are ordinarily not eligible for faculty appointments. However, they may be appointed to another category (such as “Research Associate”). There is a personnel policy for this category and these guidelines must be followed as well. Non-physician health care professionals such as medical social workers, nurses, including nurse practitioners and midwives, audiologists, physical therapists, occupational therapists, and others are also not ordinarily eligible for a faculty appointment in the College of Medicine. However, faculty appointments for these health care professionals may be sought in the appropriate other colleges that make up UTHSC, i.e., in the College of Nursing or College of Health Professions.

In any specific case, a department chair may petition the Dean for exception to the above policy and request a faculty appointment based on special credentials demonstrated by the appointee. The role undertaken by the appointee cannot substitute for credentials for faculty appointment but may be taken into consideration.

Point 2 (Secondary Appointment as Faculty):
A professional-administrative staff member of the College of Medicine may be nominated for a secondary academic appointment in an appropriate department based on appropriate credentials.

Point 3 (Interdisciplinary Programs):
The portion of the policy regarding staff of interdisciplinary programs deals with clarification in the College of Medicine for individuals recruited primarily to positions in interdisciplinary programs.

1) A faculty appointment for a person appointed to the staff of an interdisciplinary program must be in an existing department of the College.
2) As in all other categories of appointments, the primary criterion for the faculty appointment of a member of the staff of an interdisciplinary program is credentials. An additional criterion is the participation of the person in the academic program of the department in which he or she holds a faculty appointment or is to be appointed. For that participation, the faculty member must be responsible to the chair of that department.

3) The joint appointment of a person in an interdisciplinary program and in a department is, in general, in the best interest of the appointee, the interdisciplinary program, the department, the College of Medicine, and UTHSC, and is to be encouraged. However, it requires a spirit of close cooperation between the director of the interdisciplinary program and the department chair. They should jointly plan the roles to be carried out by the appointee in the interdisciplinary program and in the department, as well as levels and sources of compensation. They should jointly recruit for the position and work closely together to make the joint appointment a success.
Subject to and consistent with the College of Medicine Bylaws and policies, the three (3) Committees on Appointment, Promotion and Tenure (CAPT) for the Memphis-Nashville, Chattanooga, and Knoxville campuses are responsible for (1) reviewing and recommending policies, procedures and programs in the area of appointments, promotions, and tenure of the faculty of the College of Medicine to the Regional Dean who will discuss them with the Executive Dean of the College of Medicine; (2) implementing and evaluating procedures on appointments, promotions, and tenure of faculty to the campus Deans; (3) reviewing and recommending to the campus Dean action on all individual nominations by department chairs for appointment at the level of assistant professor or above, promotion, and award of tenure (the Associate Dean for Faculty Affairs reviews nominations for appointment at the instructor level and, at his/her discretion, may seek a recommendation from the CAPT, before making recommendations to the Dean).

Members of the CAPT are appointed by the campus Dean of the College of Medicine. On the Memphis-Nashville campus this is to be on the recommendation of the Associate Dean for Faculty Affairs in consultation with the President of the DFAC. At Chattanooga and Knoxville campuses this is to be in consultation with DFAC members from those campuses. The campus Dean will appoint a faculty member to serve as chair.

Members of the CAPT assume a weighty responsibility in reviewing the academic credentials of present and aspiring faculty colleagues. Because of the importance of this task and the confidential nature of the material under consideration, College of Medicine faculty members chosen to serve on the CAPT should be individuals whose own academic accomplishments and personal qualities have earned them a high level of respect among their peers.

At the Memphis-Nashville campus, in addition to the chair, the Committee shall consist of a minimum of twelve members, and shall ordinarily include:

- At least three tenured faculty members from basic science departments on the Memphis campus
- At least three tenured faculty members from the clinical science departments on the Memphis campus
- A faculty member from the VAMC
- A faculty member from St. Jude Children's Research Hospital
- A minority tenured faculty member
- A female tenured faculty member
- Two members elected by the faculty of the College of Medicine (i.e. through their election onto DFAC
- A volunteer faculty member

The categories listed are not intended to be mutually exclusive. In general, members of the CAPT should be drawn from the tenured faculty in the College of Medicine. This will not be
possible in the case of the volunteer faculty member, and certain other members (e.g., St. Jude, VAMC) who may not have been awarded tenure. Members shall serve three (3)-year terms and, in general, shall not be eligible for reappointment within three years of the expiration of the original appointment. The CAPT shall meet regularly, and in special session as required, to consider nominations for appointment, promotion and tenure or other matters of concern to the Committee. For both promotion and tenure requests, a simple majority, in addition to the chair will be present for each meeting. For requests for the award of tenure, only tenured members will vote. A simple majority is necessary to approve a recommendation with the chair only voting in cases of a tie vote. Typically, committee members from the same department as a faculty member who is being nominated will leave the room during the discussion and vote by the Committee. However, it is acknowledged that in larger departments such as Medicine, Pediatrics and Surgery, a committee member may have never met the nominee and may participate in the discussion and vote on the nominee promotion and/or tenure in CAPT.
Faculty at UTHSC's College of Medicine serve in a wide variety of capacities. For physicians and PAs whose primary responsibilities are caring for patients and teaching trainees, the traditional, research-focused criteria for promotion do not always adequately capture the value these faculty bring to the institution. Thus, the following lists of activities consistent with promotion were established by surveying the COM faculty and administrators.

It is important to emphasize that the following two lists serve only as suggestions/guides of the types of activities that might be cited as evidence of career progress during annual performance reviews as well as during reviews for promotion. Non-tenure track faculty, such as Clinician Educators, who wish to pursue promotion, should collaborate with their department chairs to identify which activities are individually most suitable to pursue and track over time.

**Activities Consistent with Promotion from Assistant to Associate Professor**

- Participates in hospital/clinic committees
- Assistant/associate program director for residency/fellowship
- Leader in course, clerkship, residency, or fellowship
- Recognized excellence in teaching
- Demonstrates innovation in teaching
- Participates in quality improvement efforts
- Serves on scientific committees for trainees and students
- Mentors trainees and students
- Author - poster abstracts
- Author - non-peer reviewed articles/reviews/lay press/book chapters
- Authors peer reviewed research publications
- Prepares/presents podcasts, blogs, social media advocacy
- Principal Investigator (PI) on IRB approved non-funded research project
- Collaborator (non-PI) on extramural Grant
- Collaborator (non-PI) on IRB approved non funded research project
- Emerging grant / journal reviewer
- Invited to speak in area of expertise - regional
- Meeting organizer - regional
- Participates in regional organization in area of expertise
- Officer in regional organization in area of expertise
- Serves on department, college, and/or UTHSC committees
- Participates in department recruitment efforts
- Participates in community outreach
- Develops new outcomes-based course
- Peer reviewer for faculty colleagues
- Author - textbook chapter(s)
- Applies for extramural grant as PI
• PI on smaller NIH or research foundation-like funding or pharmaceutical trial
• Ad hoc study section member
• Meeting workshop organizer/chair - regional
• Participates in national organization in area of expertise
• Emerging as Go-to/invited speaker

Activities Consistent with Promotion from Associate to Full Professor

• Nationally recognized thought leader in teaching
• Chief of staff
• Serves as clinical/medical director
• Nationally recognized thought leader in teaching
• Mentor to faculty colleagues
• Authors textbook
• Editor of textbook
• PI on R01-like extramural funding
• History of R01-like funding
• Holder of patents
• Journal editor-in-chief
• Journal editorial board member
• National recognized expertise in research
• Invited to speak in area of expertise - regional
• Invited to speak in area of expertise - national
• Invited to speak in area of expertise - international
• Meeting workshop organizer/chair - national
• Meeting workshop organizer/chair – international
• Meeting organizer - national
• Meeting organizer - international
• Officer in national organization in area of expertise
• Officer in international organization in area of expertise
• Chairs committee(s) in dept, college, UTHSC
• Develops new outcomes - based course
• Peer reviewer for faculty colleagues
• Author - textbook chapter(s)
• Applies for extramural grant as PI
• PI on smaller NIH or research foundation-like funding or pharmaceutical trial
• Ad hoc study section member
• Meeting workshop organizer/chair - regional
• Participates in national organization in area of expertise
• Emerging as Go-to/invited speaker
University of Tennessee Health Science Center
Bylaws Approval
College of Medicine

Bylaws approval within the College:
- Dean’s Faculty Advisory Council – December 6, 2021
- College of Medicine Faculty, by vote – May 4, 2022
- College of Medicine Executive Dean – May 4, 2022

Burt Sharp, M.D.
President, COM Dean’s Faculty Advisory Council

Scott E. Strome, M.D.
Executive Dean, College of Medicine

Other Required Approvals:

Cynthia Russell, Ph.D.
Chief Academic Officer

Peter Buckley, M.D.
Chancellor