The ABCs of APT*

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*APT = APPOINTMENT, PROMOTION AND TENURE
Section 1

KNOW YOUR ENVIRONMENT
There are approximately 2150 faculty in the School of Medicine
Basic Science Tracks at Duke

• Tenure Track
• Non Tenure Track
Clinical Science Tracks at Duke

• Tenure Track
  – Tracks 1,2,3

• Non Tenure Track
  – Tracks 4,5
Additional Track

• Practice of Medical Education
WEBSITE: https://medschool.duke.edu/about-us/faculty-resources

Faculty Resources

The School of Medicine consists of more than 2000 academic and clinical faculty in 33 departments, centers and institutes. Their combined efforts make Duke one of the largest biomedical research enterprises in the country, with more than $600 million in sponsored research expenditures annually and more than 9,743 patients on 645 active clinical trials.

The synergy among the School's physicians, researchers, educators, and staff offers unprecedented opportunities for teamwork among the scientists in our labs and caregivers in our hospitals and clinics.
Faculty Appointments, Promotion, & Tenure

The Faculty APT Office

The Faculty Appointments, Promotion and Tenure Office assists in facilitating best practices in the consideration of faculty appointments, promotions and tenure for the School of Medicine and School of Nursing.

Working closely with department managers and chairs, the office provides guidance, training and resources necessary to recruit and retain exceptional faculty. We support the School of Medicine's and School of Nursing's missions of excellence and innovation in education, patient care and research.

- Basic Science APT
- Clinical Science APT
- The Practice of Medical Education
- Benefits & HR Information
Basic Science APT

These sections contain documents, forms and information for those seeking promotion and for those who manage the promotion process in basic science departments.
Basic Science APT For Faculty

Appointment and Promotion in the Basic Sciences departments follow the guidelines set forth by the Provost office. The following link provides detailed guidance for this process.

www.facultyaffairs.provost.duke.edu/index.html

The Basic Science Promotion Process

Tenure/Tenure Track in the Basic Sciences

Tenure may be granted at the time of appointment or through promotion from Assistant Professor to Associate Professor. Tenure review should begin no later than the beginning of the seventh (7th) year on the tenure track, and the candidate must be notified of the result of this review prior to the beginning of the eighth (8th) year. In accordance with University bylaws, if the candidate for tenure is not notified of a decision regarding tenure by the start of his/her eighth (8th) year on the tenure track, then tenure is granted by default after completion of the eleventh year.

A report is available from dFac that departments can use to track their faculty's chronological progress toward the accrual of tenure. Circumstances that lead to the automatic (default) award of tenure are always to be prevented. Careful attention to automatic tenure award dates is needed to plan properly the steps in review processes that have been developed for evaluating the recommendation of tenure. If review is delayed due to departmental administrative reasons a waiver to delay review should be requested.

Non Tenure Track in the Basic Sciences

Regular Rank appointments within the Basic Science Departments are those having the modifying descriptor of Research in the title. These are considered to be term appointments without tenure-sevice
Clinical Science APT

This section contains documents, forms and information for those seeking promotion and for those who manage the promotion process in clinical science departments.

For Faculty

For Administrators
Clinical Science APT for Faculty

All new faculty members in the Clinical Sciences are initially appointed to either the Academic Clinician (Track 4) or Academic Research (Track 5) non-tenure tracks as agreed upon by the faculty member and the department chair. A change from these tracks to one of the tenure tracks normally occurs at the Associate Professor rank for those who are deemed potentially eligible for tenure. Track assignments may be changed only with the mutual agreement of the faculty member and the departmental chair. The tenure clock begins at the first appointment to any of the five tracks.

The time from the initial appointment in any track until a decision to, or not to, award tenure is ten years (Tenure Clock). In accordance with university bylaws, if the candidate in a tenure track (Tracks 1-3) is not notified of a decision regarding tenure by the end of their tenth year, then tenure is granted by default.

The tenure review process can be initiated by the department chair at any time. Normally the review process to determine the awarding of tenure begins no later than the start of the tenth year. This allows approximately six (6) months for departmental process and another six (6) months for disposition at the Medical Center and university levels. It can be initiated at any time the chair feels is appropriate.

Each clinical department has a limited number of tenured positions for each track. These numbers are established by the chair and administration on the basis of financial and programmatic needs. The number of untenured tenure track positions is significantly greater than the number of tenured positions so that tenure may not be granted to all qualified faculty. Untenured faculty are appointed on a yearly basis with renewal subject to financial and programmatic considerations.

The Associate Professor without tenure rank is a prerequisite to switching to a tenure track. The change in tracks could occur at the time that the Associate Professor without tenure decision is made or later. All Assistant to Associate Professor promotions would be recommended by the department.
Faculty Appointments, Promotion, & Tenure

The Practice of Medical Education

- Assistant Professor of the Practice
- Associate Professor of the Practice
- Professor of the Practice

General Considerations

Appointments under the guidelines for the Practice of Medical Education are normally used for full-time Faculty who are engaged largely in medical education endeavors (usually > 80%) or who have a significant role in development, instruction, or administration of an education program in the School of Medicine and who do not have a primary appointment in another School of Medicine department as well as for those who have a primary appointment in another department but whose medical education effort represents > 50 of their total effort. The primary criterion for appointment and promotion will be excellence in curricular design, evaluation and assessment, faculty development, administration, multiple strategies of instruction, or scholarly activity, including research involving medical education. Additional factors include mentoring, collaboration, longevity of service, creativity, and impact of contributions to the Medical School and other educational programs of Duke Medicine. Recognition of the quality of their work at regional and national levels along with evidence of dissemination of their work products is valued. Medical education faculty appointments are reviewed annually for reappointment, unless a contract for a longer
Criteria For Promotion: Basic Sciences

- Important and original contributions
- Publications demonstrating
  - substantial independent scholarship and
  - important research contributions,
  - including opening new avenues of investigation and/or new ways of tackling a fundamental question.

From Appendix J, Duke Faculty Handbook
Criteria for Promotion: Basic Sciences

• For publications on which the candidate is not first or senior author, the candidate must clearly articulate their specific contribution(s) in statement of research contribution.
Criteria for Promotion: Basic Sciences

• Demonstrated success at external funding ... and a strong likelihood of sustained funding at that level.

• Strong national/international reputation, including invited participation in major meetings in their field.

• Significant contributions to teaching.

• Service to the department and university, as well as participation in interdisciplinary collaborations between departments and/or schools.
Timing of Promotion: Basic Sciences

• Formal review should be conducted every 3 years
• Must submit tenure materials by beginning of 7th year.
• Tenure decision must be made by end of 7th year.
Criteria for Promotion: Clinical Sciences

- Apply to:
  - MDs
  - PhDs
  - MD/PhDs
  - Other terminal degree holders in the clinical departments

- Specific Criteria Depend on Track
Clinical Science Tracks at Duke

<table>
<thead>
<tr>
<th>Track</th>
<th>Role</th>
<th>Tenure</th>
<th>Example Effort Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Clinician Educator</td>
<td>Y</td>
<td>75% Clinical, 25% education or administration</td>
</tr>
<tr>
<td>2</td>
<td>Clinician Scientist</td>
<td>Y</td>
<td>50% Clinical Research, 50% Clinical</td>
</tr>
<tr>
<td>3</td>
<td>Researcher</td>
<td>Y</td>
<td>&gt;75% Research</td>
</tr>
<tr>
<td>4</td>
<td>Academic Clinician</td>
<td>N*</td>
<td>Varies by individual</td>
</tr>
<tr>
<td>5</td>
<td>Researcher</td>
<td>N*</td>
<td>&gt;80% Research</td>
</tr>
</tbody>
</table>

*Tenure eligibility requires change to Track 1, 2 or 3. Typically decision to change made at promotion to Assoc Prof.
Initial Appointment

• Typical initial faculty appointment is now to a non-tenure track (Track 4 or 5)
  – Medical Instructor* or Assistant Professor – non-tenure Track

• Review performed at time of Associate Professor promotion (~5 years) will determine decision to stay on non-tenure track or move to tenure track

*Medical Instructor is a regular rank appointment
Time as a Medical Instructor is not counted for tenure
Track 1: Clinician / Administrator / Educator

- Tenure Eligible
- Designed to reward physicians who see patients (typically $\geq 75\%$) and do some research, administration, or education
- Primary focus: publications & reputation
  - Referral patterns
  - National committees & professional organizations
  - Review articles, case reports, chapters
Track 1: Clinician / Administrator / Educator

- Also appropriate for faculty who spend the majority of their time on a combination of clinical care, administration, and/or teaching
- Similar to Track 4, but difference is stronger emphasis on scholarly activity in Track 1
Track 1

• Scholarship: participation in clinical research, drug trials, multi-center efforts.
• Clinical volumes
• Teaching or administrative accomplishments
  – Residency, fellowship director
Track 2: Clinician / Researcher

- Tenure Eligible
- Designed to reward physicians who see patients and do ~50% research
- Natural home for Clinical Investigators
- Primary focus: publications & reputation
  - Referral patterns
  - National committees & professional organizations
  - Manuscripts – high level journals
Track 2

- Grants
- Clinical volumes – lower volumes expected than on Track 1
- Teaching or administrative accomplishments count but are secondary to research and clinical care expectations
Track 3: Primary Research

- Tenure Eligible
- Designed for faculty who typically do ≥75% research
- Natural home for Lab-focused MDs and PhDs
- Primary focus: publications & reputation
  - History of funding
  - Publications
  - Nationally significant research
Track 3

- Grants – Peer reviewed (NIH, Selective foundations)
- Publications – expect to be placed in major journals
- Teaching or administrative accomplishments count but are secondary to research objectives
Track 4: Academic Clinician

• Non-Tenure Track
• Entry Track for all clinical faculty, regardless of ultimate career goals
• Ultimate home for clinicians whose academic accomplishments do not warrant tenure.
• Natural home for pure academic clinicians
Track 4

- Primary focus: clinical care and academic contributions
  - Referral patterns
  - Local, regional and national committees & professional organizations – reputation
  - Teaching
  - Clinical trials, reviews, book chapters
Track 4

• No tenure
  • But remember, if you later switch to a tenure-eligible track, your tenure clock started on date of first appointment to Assistant Professor on any track (1-5)

• Transfer to Tracks 1-3 typically occur at the Associate professor or later level
Track 4

• Grants – very secondary
• Publications – much less critical, although they enhance clinical reputation
Track 5: Researcher

- Not Tenure Eligible
- Designed for faculty who typically do ≥80% research
- Natural home for PhDs in clinical departments
- Primary focus: publications & funding
  - Publications – high level journals
  - Consistent funding – annual appointments
Track 5

• Teaching or administrative accomplishments count but are secondary to research objectives
  – Most teaching in the context of the research work
The Practice of Medical Education

• Intended to extend the educational capabilities of the School of Medicine

• For full-time faculty who are engaged largely in medical education endeavors and who do not have a primary appointment in another SoM department

• Also for faculty who have a primary appointment in another department but whose medical education represents >50% of their total effort
The Practice of Medical Education: Criteria for Promotion

• Excellence in curricular design, evaluation and assessment, faculty development, administration, multiple strategies of instruction, or scholarly activity, including research involving medical education.
  – Additional factors include mentoring, collaboration, longevity of service, creativity, and impact of contributions to SoM and Duke Medicine
  – Recognition of the quality of work at regional and national levels along with evidence of dissemination of their work products is valued.

• Appointments reviewed annually, unless a contract for a longer period has been executed.
  – Additional details on APT website under clinical sciences APT for faculty
Why have Tracks?

- To explicitly reward the variety of career pathways that are valued and needed at this institution.
Changing to Tenure Track

• Move to tenure track will typically occur at time of promotion to Associate Professor.
  – Must be approved by the department APT committee and Chair
  – Promotion typically considered after 4-5 years on faculty
• An Associate Professor on Track 4 or 5 can still change to tenure track at next promotion.

Important notes about timing:
• Must submit tenure materials by beginning of 10th year
• Tenure decision must be made by end of 10th year
What are the criteria?

• Focus
  – Build a thread of continuity throughout your work
  – The theme should be apparent to reviewers
  – Develop in several categories
    • Scholarship, reputation, leadership, funding, service, mentoring, collaboration

• Periodically assess
  – whether you are diffusing your efforts too much
Boyer’s Expanded Concept of Scholarship

Discovery
  – Research

Integration
  – Interpreting use of new knowledge across disciplines

Application
  – Aid society and professions in addressing problems

Teaching
  – Studying the process of education

Boyer’s Model of Scholarship, Marta Nibert
Examples of Scholarship

• Integration:
  – translating research discoveries e.g. through review articles, explaining what this means for the field, addressing the implications

• Application:
  – service, engagement with the world- identifying and calling attention to problems early

• Teaching:
  – creating a new curriculum, and evaluating its effectiveness.
What are the ranks at Duke?

Clinical

- Medical Instructor
  - (incubator status, tenure clock not active)
- Assistant Professor
- Associate Professor
- Associate Professor with Tenure
- Professor with Tenure
- Professor (without tenure)
  - Tracks 4&5 only

Basic

- Assistant Professor
- Associate Professor with tenure
- Professor
- And others tailored to individual circumstances, not linked to tenure track
  - E.g. Research Assistant Professor.
Basic Science Promotion Process

- Faculty member and Chair agree to submit dossier
- Departmental review
- Basic Science APT Committee
- Provost’s APT Committee
- Board of Trustees Final Action

About 12 months

Dossier for promotion with tenure MUST be submitted by beginning of 7th year

BoT = Board of Trustees
Clinical Science Promotion Process to Med Instructor, Assistant Professor and Associate Professor (without tenure)

- Faculty member & Chair Agree to submit dossier
- Faculty member submits dossier to DAPT Committee
- DAPT Committee forwards recommendation to Chair
- Chair forwards to SoM APT office and BoT
- Chair notifies faculty member of DAPT recommendation

DAPT = Departmental APT
BoT = Board of Trustees
CS-APT = Clinical Sciences APT

Clinical Sciences Promotion Jan 23, 2014
Clinical Science Promotion Process
Associate and Full Professor, Non-Tenure

Faculty member & Chair agree to submit dossier
Faculty member submits dossier to DAPT Committee
DAPT Committee forwards recommendation to Chair
Chair forwards to Dean/SF MCEC, Chancellor
For information only:
Provost and BoT

About 12 months

Chair notifies faculty member of DAPT recommendation

DAPT=Departmental APT
BoT=Board of Trustees
CS-APT=Clinical Sciences APT

Clinical Sciences Promotion Jan 23, 2014
Clinical Science Promotion Process
Tenured Associate Professor and Full Professor

Faculty member & Chair Agree to submit dossier
Faculty member submits dossier to DAPT Committee
DAPT Committee forwards recommendation to Chair
Chair forwards to Dean/
SoM APT office
SoM CS-APT Committee
MCEC/Chancellor
BoT Final action

End of yr 9 at latest
About 12 months
Dossier for promotion with tenure MUST be submitted by beginning of 10th year
Chair notifies faculty member of DAPT recommendation

DAPT=Departmental APT
BoT=Board of Trustees
CS-APT=Clinical Sciences APT

Clinical Sciences Promotion Jan 23, 2014
Clinical Sciences APT Process

- Clinical Sciences APT committee only reviews tenure decisions and promotions to full professor on Tracks 1-3
Tenure Clock

- Tenure clock starts with first appointment at Assistant Professor rank regardless of track
What is tenure?

• It is a mark of accomplishment
• Currency in the academic community
• Tenure is a promise of continued employment, absent malfeasance
• A specific salary is not promised
Section 2

COMMUNICATE
Shape your “public” profile

• Send good news upward
• Ask for a CV review
• Check your listing in the faculty database, Scholars@Duke, physician referral directory
• Hone your “elevator pitch”
Shape your “public” profile

• Consult a librarian
  – Impact factor
  – H-index
  – Times cited

medical-librarian@duke.edu or 660-1100
Develop a Reputation

• “National and international reputation”
  – Presentations
  – Service on Society committees
  – Participation in writing clinical guidelines
  – Service on editorial boards
Save evidence of your work

- Teaching evaluations
- Invitations to serve on committees
- Unsolicited letters from patients
- Notices of awards
Communicate

• Identify the person responsible for moving your promotion forward
  —Division Chief, Section Head...

• Communicate with them about your career development and goals
Ask for an annual review

• See templates on facdev.medschool.duke.edu
• Prepare for the review by
  – Writing down all activities
  – Stating goals (1 yr and longer term)
  – Listing accomplishments
  – Planning questions
Annual Review

• Discuss how your work addresses promotion criteria

• Ask questions
  – “What areas do I need to develop further in the next year?”
  – “Are there specific actions I can take to strengthen my portfolio?”
  – “What accomplishment(s) would make it possible for you to fully support my promotion?”
Plan your dossier

• Formatted CV
• Intellectual statement
• Relevant portfolio
  – Teaching
  – Administrative
  – Clinical
• External evaluation
Plan your dossier

- Formatted CV
- Intellectual statement
- Relevant portfolio
  - Teaching
  - Administrative
  - Clinical
- External evaluation
Intellectual Statement
Addresses “critical areas of experience, contribution and accomplishment”

From Med School APT Website:

APT Intellectual Statement Guidelines

Each Faculty dossier submitted for promotion and/or award of tenure should contain an intellectual development statement from the candidate, addressing critical areas of experience, contribution and accomplishment (e.g., Educational Background and Training, Activities, Teaching Contributions, Academic Achievements and Scholarship, Grant Support, local, national and international Leadership, etc., as appropriate). This statement should also include the candidate’s vision and goals for continuing professional development within the academic environment.

With regard to the summary of educational contributions, certain materials should be provided as part of the candidate’s intellectual development statement. (Additional materials are to be provided by the departmental Chair.) While appropriate summaries of teaching, mentoring and educational activities are expected from all regular rank faculty, comprehensive summaries of such activities will be especially important for Faculty on Tenure Solicitation (i.e., Tenure Track) faculty and for Faculty on the Clinical Track. Faculty involved primarily with research should include teaching and mentoring activities that occur within the context of ongoing research efforts (e.g., laboratory training and instruction). The text and table below are provided as a general guide for organizing relevant materials. They should be adapted to the particular activities of the individual faculty member.

Materials prepared by the candidate in support of recommendations for promotion or tenure:

1. Within the intellectual development statement, the candidate should address his/her accomplishments and plans as a teacher, mentor and educator. Elements to be included with regard to the educator role.
Intellectual Statement

• Educational Background & Training
• Activities
• Teaching Contributions
• Academic Achievements and Scholarship
• Grant Support
• Leadership (local, national, international)
• Community engagement
• Plans for continued development
Intellectual Statement

This statement should also include the candidate’s vision and goals for continuing professional development within the academic environment.
Intellectual Statement

• Explicitly connect your accomplishments to written promotion criteria
  – “Through my work in X I have had the opportunity work on national guidelines/present at an international meeting for Y, addressing the promotion criterion for “national reputation””
External Evaluation

• APT committee sends requests for external evaluation

• Evaluators are individuals who are in your field, but who reap no secondary gain by your advancement
  – No colleagues, collaborators, mentors
External Evaluation

• Evaluators base their review on the materials in your dossier
  – CV
  – Intellectual Statement
  – Copies of scholarly work
External Evaluation

• Assesses
  – Quality
  – Significance
  – Impact
  – How you rank relative to others
  – Likelihood of achieving similar rank at another leading institution
Learn More

• Seminars on basic and clinical science APT processes offered at least once per year

• Visit events.medschool.duke.edu to sign up
Questions?

• Resources
  – Department
    • Administrative Liaison
    • Faculty Liaison
  – Faculty APT Guidelines
    • https://medschool.duke.edu/about-us/faculty-resources/faculty-appointments-promotion-tenure
  – Faculty Handbook
    • http://provost.duke.edu/faculty-resources/faculty-handbook/
  – Duke Advantages for Faculty
    • http://provost.duke.edu/faculty-resources/advantages/
  – Office for Faculty Development
    • https://medschool.duke.edu/about-us/faculty-resources/faculty-development
Breakout Sessions

Basic Science Departments go to Room E

Christopher Nicchitta, PhD
Professor of Cell Biology
Associate Dean, Research Training

Raphael Valdivia, PhD
Associate Professor of Molecular Genetics and Microbiology
Vice Dean for Basic Science
Clinical Science Departments Stay Here

Ed Buckley, MD
Joseph A.C. Wadsworth Professor of Ophthalmology
Professor of Pediatrics
Vice Dean for Education
Interim Chair, Ophthalmology

Mark Dewhirst, DVM, PhD
Gustavo S. Montana Professor of Radiation Oncology
Associate Dean for Faculty Mentoring

Diana McNeill
Professor of Medicine
Director of Duke AHEAD

Laura Svetkey, MD, MHS
Professor of Medicine
Vice Chair for Faculty Development and Diversity
Director, Duke Hypertension Center
Director of Clinical Research, Sarah W. Stedman Nutrition and Metabolism Center