

## **Faculty Tenure Track**

Faculty, through their creativity, contributions to knowledge advancement, engagement with the intellectual life of the University, and mentoring of learners, define the character and impact of Duke University. The awarding of tenure recognizes faculty for scholarship – sustained excellence in contributions to generalizable knowledge and the advancement of our core institutional missions – and anticipates continuous, ongoing scholarship across a faculty member's career. This document describes the criteria for promotion on the Faculty Tenure Track, emphasizing the underlying theme of excellence in scholarship required for progress along this track.

The Faculty Tenure Track is intended for faculty in clinical departments of the Duke University School of Medicine holding a degree of MD, MD/PhD, DO, DO/PhD, MD/DVM, PhD/DVM or PhD (or highest equivalent degree in relevant fields per the Faculty Handbook <https://provost.duke.edu/policies-resources/faculty-handbook>) who wish to be evaluated for promotion on the basis of their unique and innovative contributions to science and medicine through basic science research, translational research, clinical research, health services research, and education domains. Of note, policies for promotion and tenure of the faculty in basic science departments are delineated by the Duke University Office of the Provost.

Domains of scholarship applicable to evaluation for promotion broadly encompass the disciplines of the biological sciences, population health sciences, epidemiology, biostatistics, informatics, health services, quality and performance improvement, community engagement, pre-clinical and clinical trials, education and educational methodologies, and other domains relevant to the prevention, diagnosis, and / or treatment of disease and the enhancement of healthcare delivery. Such scholarship must be aspirational, innovative, and unique, and must have demonstrable impact outside of the institution.

***Scholarship*** can be demonstrated across any of four broad categories: 1) *scholarship of discovery – original research that advances knowledge*; 2) *scholarship of integration – synthesis that brings new insight about information and knowledge across disciplines, across topics within a discipline, or across time*, 3) *scholarship of engagement – application and evaluation of knowledge and expertise applied to consequential problems and societal needs of individuals and institutions*; and 4) *scholarship of teaching – systematic study of teaching and learning processes (Boyer EL, Scholarship Reconsidered: Priorities of the Professoriate. The Carnegie Foundation, 1990). Scholarship requires evaluation of work and demonstration of rigorous disciplinary expertise, along with dissemination outside of the institution in a durable format that can be evaluated and applied by others.*

Evaluation of applications for tenure and promotion are based on the individual's portfolio of nationally and internationally recognized scholarly achievement (rather than funding or effort spent on scholarly activities per se). Clinical faculty desiring promotion on this track will likely devote a substantial portion of time to research. Note that these criteria do not apply to faculty in basic science departments.

Promotion criteria in this track rely heavily on the assessment of high quality, disseminated, scholarly work that has measurable impact both inside and outside the institution. Other unique scholarly work, such as invention disclosure, the granting of patents, and non-traditional publications, may also be considered, if content is judged to be impactful. Faculty seeking promotion on the Faculty Tenure Track must be able to demonstrate recognition at the national and international levels for Associate Professor and Professor appointments, respectively. Reputation is assessed by evaluation of a combination of scholarly activities conducted outside of the institution (such as invitations to serve on editorial boards of journals, participation in National Institutes of Health (NIH) study sections and Councils, and presentation of invited lectures at high impact conferences), and appraisal by independent colleagues in the relevant field of study. While not an absolute requirement, independent external funding is typical of faculty promoted on this track. Clinical faculty who participate as co-principal investigator or co-investigator (such as site PI) may be considered to have demonstrated qualifying scholarly contributions if those contributions are clearly documented, substantial, integral to the success of the research endeavors, and establish a career-long pathway of research participation and contribution. Similarly, faculty who collaboratively author nationally adopted guidelines, consensus documents, or educational curricula may be considered to have demonstrated qualifying scholarly contributions if those contributions are clearly documented, substantial, integral to the success of the endeavor, and otherwise meet the criteria described for impactful and original work.

Impact is defined as work that is of exceptional quality and affects and influences clinical care, healthcare and / or the education of learners. Work will have health and / or societal impact in one or more of the domains of clinical and medical benefits, community and public health benefits, economic benefits, and policy and legislative benefits (Luke DA, et al., *The Translational Science Benefits Model: A New Framework for Assessing the Health and Societal Benefits of Clinical and Translational Sciences*. Clin Transl Sci (2017) 00, 1–8; doi:10.1111/cts.12495).

It is expected that non-clinical faculty on the Faculty Tenure Track receive a majority of their research salary and research support from externally peer-reviewed grants, laboratory service agreements, collaborative research projects, or as independent principal investigators. For non-clinical faculty, a pattern and expectation of sustained career funding of an independent research or educational program must be established for consideration of a tenured appointment.

The potential for promotion will also be assessed by the level of engagement in the academic community of the University, School of Medicine, and Health System. Professional conduct that reflects the Core Values of the School of Medicine and the Duke University Health System is required. These Core Values include (<https://medschool.duke.edu/about-us>):

- Excellence in education, research and patient care
- Respect for and inclusion of people from all backgrounds
- Commitment to service, solving real world problems
- Sense of urgency in transforming discoveries into improved human health

- Professionalism and integrity demonstrated in all aspects of performance and effort – expectations are further articulated in the Statement on Faculty Professionalism (<https://medschool.duke.edu/about-us/faculty-resources/faculty-development/professionalism/statement-faculty-professionalism>)

These Core Values reflect what is required of all Duke faculty and are an expectation of faculty seeking promotion in any track.

Faculty are expected to excel in additional activities, as appropriate to their areas of interest and contributions to Duke. With promotion, faculty are expected to demonstrate increasing levels of leadership in their sphere of expertise. All faculty are expected to contribute to the education of learners. In the case where educational activities generate content that is unique, widely disseminated, and can be demonstrated to impact educational practice outside of the institution, this intellectual content may be considered as supportive of promotion on the Faculty Tenure Track. Some, but not all, faculty on this track will deliver clinical care, and / or be involved in administration and service. Assessment of the faculty member's performance in clinical, educational, and administrative endeavors (as secondary measures to scholarly productivity) will be based on accepted performance metrics relevant to these activities (e.g., clinical outcomes measures, assessments of educational activities, and programmatic success, respectively). Collaborative activities, particularly those that facilitate the success of others, are highly valued, and ongoing, effective, and generous mentoring of learners is an expectation that increases with faculty rank.

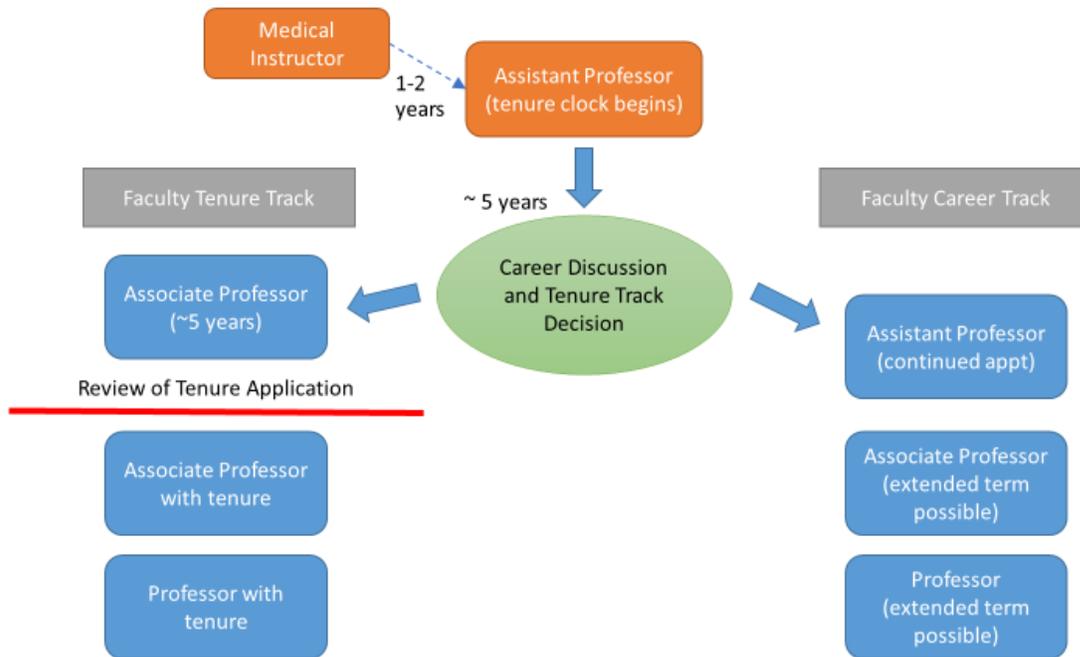
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### **Tenure Timeline (“Tenure Clock”)**

The initial hire of early career faculty (e.g., at the completion of fellowship or post-doctoral training) is “undifferentiated” with respect to tenure track (neither Tenure or Career Track). The initial appointment may be made either at the rank of Medical Instructor or Assistant Professor (see further descriptions below). Appointment as a Medical Instructor allows junior faculty time to develop a scholarship portfolio and achieve early career accomplishments without time accrual on the tenure clock. Appointment at the rank of Medical Instructor is typically for a period of 1-2 years (maximum of 3 years). Appointment at the rank of Assistant Professor marks the beginning of the ten-year probationary period for achieving tenure. Regardless of whether the Faculty Tenure Track or Faculty Career Track is ultimately chosen, the “tenure clock” always starts on the date of hire at the rank of Assistant Professor. This is a critical point, particularly for individuals who may be undecided about which track to ultimately follow.

The decision to advance an (undifferentiated) Assistant Professor to a differentiated track (whether Faculty Tenure Track or Faculty Career Track) occurs in discussion with the faculty member, faculty member mentor, and the Department Chair or Division Chief. For faculty electing to follow the Faculty Tenure Track, this decision is expected to occur in the 4<sup>th</sup>-5<sup>th</sup> year of hire and is generally coincident with promotion to the rank of Associate Professor without tenure (see graphic below).

Ten years (starting from the date of hire at the rank of Assistant Professor) are permitted to achieve tenure via a two-step promotion process, first to the rank of Associate Professor without tenure, then to the rank of Associate Professor with tenure. The decision regarding the awarding of tenure is to be made by the conclusion of the ten-year tenure probationary period. Should tenure not be granted, the faculty member may be subject to termination of employment. Unless for cause, termination will occur no sooner than 1 year from the date of notice of an adverse tenure decision.



The table below illustrates expectations of faculty members on the Faculty Tenure and Faculty Career Tracks. There is intentional overlap between activities on these tracks.

Activity	Expectations of Faculty Tenure Track	Expectations of Faculty Career Track
Peer-reviewed publications	expected	expected
1 <sup>st</sup> author peer-reviewed publications	expected	supportive
Senior author peer-reviewed publications	expected	supportive
Team science middle author publications	expected	supportive
External funding (clinical or education focus)	expected	supportive
External funding (research focus)	expected	expected
Independent, peer-reviewed external funding	expected	supportive
PI of independent research group	expected	supportive
PI of independent non-NIH research grants	expected	supportive

PI of independent NIH research grants and contracts	expected	supportive
Institutional impact	expected	expected
National impact (Associate Professor)	expected	supportive
National impact (Professor)	expected	expected
International impact (Professor)	expected	supportive
Service to Duke		
Service on Duke committees (e.g., IRB, IACUC, IBC)	expected	expected
Chair of Duke committee	expected	supportive
Service with National Recognition		
NIH study section	expected	supportive
Journal editor or editorial board member	expected	supportive
Chair of National Meeting session	expected	supportive
Invited speaker	expected	supportive
Service with International Recognition		
Chair of International Meeting session	expected	supportive
Invited speaker	expected	supportive

All tenure-eligible faculty will be reviewed annually by the Department Chair, Division Chief, and / or the Department Appointments Promotion and Tenure Committee Chair, or a combination of the above. This annual review is conducted to provide timely feedback and guidance through the tenure clock and promotions processes. The annual review is to include a discussion of the progress of the faculty member through the promotion process, anticipated goals for the following year, potential issues, needs and obstacles, and a plan to address identified challenges. A form for facilitating this review can be found on the School of Medicine Appointments Promotion and Tenure website (<https://medschool.duke.edu/about-us/faculty-resources/faculty-development/resources/faculty-annual-reviews>).

It is expected that faculty will hold each rank below Professor for sufficient time to demonstrate excellence at that rank (typically at least 3-5 years).

Certain situations (e.g., major life events) as delineated in the Faculty Handbook that can be expected to markedly delay the development of scholarship may allow for an extension of the tenure probationary period. Extension requests must be approved by the Department Chair and the Dean of the School of Medicine. A request for an extension must be made at or near the time of the life event and cannot be considered once the tenure evaluation has commenced.

Research funding agencies may require that faculty making funding applications be on the tenure track. Duke University School of Medicine considers “undifferentiated” faculty with the rank of Assistant Professor who are eligible to enter the Faculty Tenure Track to be eligible for such awards; the School of Medicine will support the application with the requisite documentation.

Faculty previously at an outside institution hired into a position at Duke may be hired at the rank of Assistant Professor, Associate Professor, Associate Professor with tenure, Professor, or Professor with tenure based on existing scholarship and career trajectory. The applicable track will be determined at the time of hire. Appointments must be formally approved by the appropriate department and (for tenure appointments) institutional APT committees (and other applicable committees and authorities) to become official. Until the approval process has been completed, the new faculty member will be at the rank of Instructor, Temporary. Where applicable, the ten-year probationary period for achieving tenure for these faculty begins on the date of hire.

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### **Criteria for Appointment, Promotion and Tenure**

**The primary criterion for the awarding of tenure is scholarship, which requires the dissemination of original, innovative, and scholarly work in a durable format that has substantial and measurable impact outside of the institution. In addition, to be considered for tenure, faculty are required to demonstrate excellence across other domains including clinical practice, education, and leadership / service.**

Excellence in the delivery and advancement of clinical practice, a high level of effectiveness in teaching and education, and local / national leadership and service are important and expected components of the promotion consideration but are not in themselves sufficient for promotion. The term “scholarship” is explicitly used throughout this document (rather than the words “research” or “investigation”) as “scholarship” best reflects the desire of the School of Medicine to include a variety of academic activities that meet the definition highlighted in bold above and as described by Boyer. Effort inclusive of the entirety of the Duke Health System, including the Durham Veteran’s Administration (VA) Medical Center and the national VA system, may be considered in support of promotion.

The following outlines the general guidelines and performance measures for appointment and promotion on the Faculty Tenure Track. It is recognized that individual faculty will demonstrate productivity and contribution in different areas of focus such that all criteria in each performance area will not be applicable to every individual.

### **Appointment Ranks**

#### **Medical Instructor**

The rank of Medical Instructor is intended as an entry level appointment. The tenure clock is not active for faculty at this rank. This “pre-tenure clock” appointment provides the beginning faculty member time to establish a clinical practice along with the foundations of an academic career prior to advancing to the rank of Assistant Professor. Appointment at the rank of Medical Instructor is typically for a period of 1-2 years (maximum of 3 years), after which it is expected that the faculty member will transition to the rank of Assistant Professor as a Regular Rank faculty member, or transition to the Non-Regular Rank faculty if the intent is to engage solely in

clinical practice. The Clinical Sciences Appendix of the Faculty Handbook has additional information about distinctions between Regular Rank and Non-Regular Rank faculty.

### **Assistant Professor**

The rank of Assistant Professor is intended as an entry level appointment. This appointment is “undifferentiated” regarding track assignment. During time at this rank, the faculty member has the opportunity to become established in scholarly endeavors. The date of hire at the rank of Assistant Professor marks the start of the tenure probationary period. Criteria for promotion from Medical Instructor to Assistant Professor and for initial appointment at the Assistant Professor level are developed at the Department level.

The decision to advance an (undifferentiated) Assistant Professor to the Faculty Tenure Track occurs in discussion with the faculty member, faculty member mentor, and the Department Chair or Division Chief. For faculty electing to follow the Faculty Tenure Track, this decision is expected to occur in the 4<sup>th</sup>-5<sup>th</sup> year of hire and is generally coincident with promotion to the rank of Associate Professor without tenure. For faculty electing to follow the Faculty Career Track, timing of the promotion to the rank of Associate Professor is not necessarily associated with the timing of the track decision.

Scholarship expectations while at the rank of Assistant Professor include the publication of peer-reviewed manuscripts that establish evidence of scholarly achievement and suggest a career trajectory that will support Regular Rank faculty promotion. The required number of publications is not pre-specified, although a number may be established by departments as appropriate to the expectations of the specialty. Content of the published material may focus on original research, clinical applications of basic or translational science, population health, or any other health or healthcare related area. This minimal requirement may be waived if it is uncharacteristic of the faculty member’s discipline. Development and dissemination of intellectual properties is also viewed as responsive to the scholarship requirements.

### **Associate Professor without tenure**

The rank of Associate Professor without tenure – Faculty Tenure Track is the first “differentiated” rank, and signals that a decision has been made for the faculty member to be evaluated per the criteria of the Faculty Tenure Track. The remainder of this document describes progression of faculty on the Faculty Tenure Track. Progression of faculty on the Faculty Career Track is described in the companion Faculty Career Track document.

To be promoted to the rank of Associate Professor without tenure, the faculty member will have established the following. The faculty member will have demonstrated scholarship in their primary field of interest as well as impact across other domains (clinical, educational, and leadership / service domains) that support the academic missions of the School of Medicine. Faculty at this level should have a developing national reputation, manifested as scholarly productivity that is sufficient to sustain a portfolio of academic excellence and the promise of ongoing contributions to the academic community of the University. For clinical faculty, the ability to attract clinical referrals from a wide region or, for primary care fields, acknowledgement as a recognized expert in the care of patients, populations or communities will be considered in

the promotion decision as well as outstanding contributions to teaching, mentoring, and leadership / service. Professional conduct consistent and in keeping with the Core Values of the School of Medicine and the Duke University Health System and the Statement on Faculty Professionalism is required. This rank is assigned independent of the final tenure decision (i.e., it is a pre-tenure rank).

Expectations of individuals to be promoted to the rank of Associate Professor without tenure include the following.

### Scholarship

- Scholarship should be reflective of original thought, initially bringing new insights to the University community, and expected to eventually create novel approaches to relevant basic science, translational, clinical educational, and / or healthcare issues for broader dissemination.
- Independent, external evidence of scholarship within the faculty member's chosen field is required.
  - Examples include Principal Investigator (PI) status on a funded research program or clinical trial, management of an academic core activity, or major contribution to a collaborative initiative. Status as Co-Investigator or project PI may be considered if it is evident that the faculty member brings substantive and unique contributions to the scholarly effort.
- Initial success in the procurement and management of external funding is typical, particularly for non-clinical faculty promoted on the Faculty Tenure Track.
  - Receipt of an externally awarded federal grant (e.g., NIH K, P, R or U mechanisms, or grants awarded by the National Science Foundation [NSF], Department of Defense [DOD], or Veteran's Administration [VA]) will be viewed as responsive to scholarship requirements at this level. Other examples include consistent foundation or industry support in the faculty member's field of interest sufficient to allow their pursuit of novel, impactful scholarship and / or innovation.
  - Procurement of external funding, although important, is not required for promotion. A greater weight is placed on the record of scholarship reflecting substantive contributions to the area of study (rather than funding or effort spent on scholarly activities per se).
- Collaboration with other investigators is encouraged, and important contributions to a substantial funded collaborative initiative are responsive to the scholarship requirements at this level.
  - Team science is recognized and valued by the School of Medicine as an essential component of academic scholarly work. To appropriately acknowledge and reward the contributions of the individual faculty member, faculty promotion dossiers should document such contributions when the faculty member is not the first or senior author on a publication or the principal investigator of a grant. This includes annotation of team science publications and grants on the Duke CV regarding the roles and contributions of the faculty member and reflection about same in the personal statement. Additional documentation can include letter(s) of support from members of the team. The letter of support provided by the Division

Chief and Department Chair should also address the contributions of the faculty member to team science.

- Authorship of peer-reviewed publications is required. Numbers and impact will vary by department and type / topic of scholarship. Ranges of numbers of publications for faculty previously promoted at each rank are available from Department and School of Medicine APT offices. It is expected that as a faculty member progresses in rank, the faculty member will author an increasingly larger proportion of first author, co-first author, and senior author manuscripts, and (as appropriate) provide and promote substantive contributions to team science efforts. For faculty who have little or no clinical or leadership / service responsibilities, expectations are for higher than minimal numbers of publications. Publication number alone is insufficient for promotion – the body of work must demonstrate impact on the field. Publications should be based on outstanding, original, and innovative findings, educational innovations and / or important clinical applications of novel principles, either scientific or technical.
  - Scholarship responsive to this requirement is centered on publication of work in the faculty member's area or expertise that is viewed as significant. Objective metrics may include the impact factor of the journals accepting the work, advancements of the faculty member's *h*-index or similar metrics, and lay press or other acknowledgement of the work's broad interest.
  - The 5 most important papers, as identified by the faculty member, will be included in the promotion dossier and reviewed by the Department APT (DAPT) Committee for originality and significance of scholarship.
  - For clinical and team science researchers, publications related to studies of which the individual is not first or senior author can be counted toward the minimum number of first / senior author publications if there is attestation and description of the faculty member's intellectual contributions made by the team leader or collaborators (in letters of support), and the DAPT Committee judges the faculty member's contribution to be significant.
  - Scholarship in the field of education is considered supportive of promotion in this track provided there is dissemination of original, innovative, scholarly work in a durable format that has substantial and measurable impact outside of the institution. Examples include the development of innovative educational curricula that are published and disseminated, with evidence of successful adoption and high impact outside of Duke, published and experimentally validated methodologies, and white papers in collaboration with national and international educational groups. For education researchers, publications related to educational collaboratives for which the individual is not first or senior author can be counted toward the minimum number of publications if there is attestation and description of the faculty member's intellectual contributions made by the team leader, and the DAPT Committee judges the faculty member's contribution to be significant.
  - As appropriate, intellectual property development is also considered, provided there is evidence of the faculty member's significant contribution and the work is peer reviewed.

- Metrics and expectations more reflective of specialty-specific standards for scholarship may be further delineated at the Department level as long as those specifications meet the minimum standards described in this document.

### Clinical Activities

- While outstanding clinical service is typically evident in this requirement, this can also be satisfied by impact on a clinical field.
- Faculty who practice in a specialty or subspecialty and are referral-based clinicians should have a regional reputation for excellence. For primary care and other physicians who work primarily within the Duke Health System, evaluation for promotion will be based on recognition of the faculty member as an expert in the care of patients, populations, or communities. This recognition should grow to a national reputation during the time spent within this faculty rank, proportionate to the degree to which clinical activity is the basis for advancement.
- Faculty with scholarship focused primarily in clinical research should demonstrate evidence of broad clinical impact and / or innovation.
- Faculty with scholarship focused on basic science and translational research should ideally (but not necessarily) demonstrate evidence of progressive translational integration of their portfolio with ongoing clinical programs.

### Educational Activities

- Faculty are expected to participate in the dissemination of knowledge, particularly within their area of scholarly focus.
- Faculty are expected to demonstrate leadership with national health professions educational organizations.
- Faculty are expected to provide mentorship to learners, educator-scientists and / or clinician-scientists, as appropriate for their environment and expertise.
  - All faculty on the Faculty Tenure Track should have a strong and active mentoring portfolio, as appropriate to their faculty rank, with increasing mentoring expected at higher academic ranks.

### Leadership / Service

- Faculty are encouraged to develop a reputation and should assume responsibility as institutional leaders at this level and demonstrate a consistent pattern of effective leadership skills. For example:
  - Selection to lead initiatives, selection to participate in Duke sponsored leadership development activities, selection as a residency or fellowship associate program director or program director, or chair of a major graduate medical education committee such as a clinical competency committee
- Service as full committee member on institution-wide committees is encouraged, such as Institutional Review Board (IRB) panel, Institutional Animal Care and Use Committee (IACUC), Institutional Biosafety Committee, or Medical School Admissions committee.

Service should extend for at least one year to be considered in the dossier, with attendance consistent with committee standards.

- Evidence of institutional contributions to administrative activities is also encouraged, typically outside of the Division or Department.
- Open Science provides a mechanism for data sharing that supports data transparency and integrity, facilitates scientific discovery and promotes public health. Participation in Duke Open Science and other Open Science platforms is highly valued by the School of Medicine. Opportunities for documentation of contributions to Open Science include annotation of publications listed in the Duke CV, in the personal statement (for bodies of work such as specific research initiatives), and in the letter of support provided by the Division Chief and Department Chair. Participation is considered under the broad category of service to the School of Medicine. The quality and use of data deposited into Open Science platforms by faculty may be recognized for contributing to knowledge generation and research integrity. Specifics of the policy are available at <https://scholarworks.duke.edu/open-access>.
- Evidence of leadership at the Division or Department level in the context of research and other scholarly activities is expected, including active participation in the identification and recruitment of new faculty as requested by the Chair.
- Professional conduct consistent and in keeping with the Core Values of the School of Medicine and the Duke University Health System and the Statement on Faculty Professionalism is required.

### **Associate Professor with tenure**

This rank is appropriate for faculty who have demonstrated an extended period of academic excellence at a national level and whose accomplishments justify a permanent affiliation with the University and the academic privileges afforded through tenure. The granting of tenure is an acknowledgement of the judgement on the part of the institution that the individual faculty member will be an asset to Duke throughout the duration of their career. Faculty members must conduct themselves in a manner that is considered aspirational. Professional conduct consistent and in keeping with the Core Values of the School of Medicine and the Duke University Health System and the Statement on Faculty Professionalism is required.

To be promoted to the rank of Associate Professor with tenure, the faculty member will have established the following. Criteria for achievement listed under each category below are meant to build on those described for prior ranks and should be considered in that context.

### Scholarship

- Establishment of a national reputation as an investigator as demonstrated by substantive scholarship, publication, grant funding, participation in NIH study sections and other review groups, and / or offices in professional societies is expected prior to an award of tenure. This includes demonstration of a sustained program of scholarship with a trajectory of increasing contributions and the mentoring of young investigators, as well as a national reputation for innovative scholarship that contributes to the academic missions.

- Tenure may be granted for outstanding educational scholarship that aligns with the description of tenure-worthy scholarship above.
- Sustained success in the procurement and management of external funding is typical of faculty at this level.
  - Receipt of multiple external federal grants (NIH K, P, R, or U mechanisms and / or renewals), or other national granting agencies such as the NSF, DOD or VA, will contribute toward the requirement for scholarship at this level. Other examples include consistent foundation or industry support in the faculty member's field of interest sufficient to allow them to pursue novel, impactful investigation. External investment in innovative techniques and substantial philanthropic support is also considered supportive of promotion.
- Collaboration with other investigators is encouraged, with commitments to team science viewed highly favorably.
- Support of the Duke Open Science policy is viewed highly favorably.
- Authorship of peer-reviewed publications is required. Numbers and impact will vary by department and type / topic of scholarship. Ranges of numbers of publications for faculty previously promoted at each rank are available from the Department and School of Medicine APT offices. It is expected that as a faculty member progresses in the academic ranks, the faculty member will author an increasingly larger proportion of first author, co-first author, and senior author manuscripts, and (as appropriate) provide and promote substantive contributions to team science efforts. Publications reflecting large collaborative efforts are encouraged. For faculty who have little or no clinical or leadership / service responsibilities, expectations are for higher than minimal numbers of publications. Publication number alone is insufficient for promotion – the body of work must demonstrate impact on the field. Publications should be based on outstanding, original, and innovative findings, educational innovations and / or important clinical applications of novel principles, either scientific or technical.
  - Scholarship responsive to this requirement is centered on publication of work in the faculty member's area or expertise that is viewed as significant. Objective metrics may include the impact factor of the journals accepting the work, advancements of the faculty member's *h*-index or similar metrics, and lay press or other acknowledgement of the work's broad interest.
  - The 10 most important papers, as identified by the faculty member, will be included in the promotion dossier and reviewed by the Department APT (DAPT) Committee for originality and significance of scholarship.
  - For clinical and team science researchers, publications related to studies of which the individual is not first or senior author can be counted toward the minimum number of first / senior author publications if there is attestation and description of the faculty member's intellectual contributions made by the team leader or collaborators (in letters of support), and the DAPT Committee judges the faculty member's contribution to be significant.
  - Scholarship in the field of education is considered supportive of promotion in this track provided there is dissemination of original, innovative, scholarly work in a durable format that has substantial and measurable impact outside of the institution. Examples might include the development of innovative educational

curricula that are published and disseminated, with evidence of successful adoption and high impact outside of Duke, published and experimentally validated methodologies, and white papers in collaboration with national and international educational groups. For education researchers, publications related to educational collaboratives for which the individual is not first or senior author can be counted toward the minimum number of publications if there is attestation and description of the faculty member's intellectual contributions made by the team leader, and the DAPT Committee judges the faculty member's contribution to be significant.

- As appropriate, intellectual property development is also considered, provided there is evidence of the faculty member's significant contribution and the work is peer reviewed.
- Metrics and expectations more reflective of specialty-specific standards for scholarship may be further delineated at the Department level as long as those specifications meet the minimum standards described in this document.

#### Clinical Activities

- While outstanding clinical service is typically evident in this requirement, this can also be satisfied by impact on a clinical field.
- For clinical faculty, the clinical reputation should be characterized by mastery of their clinical domain; ideally, their research will inform clinical practice. The faculty member should be able to convey this expertise to others.
  - Examples of appropriate performance include a strong national reputation for excellence that increases the clinical and educational opportunities for the institution, a regional referral pattern (if appropriate), inclusion in national guideline setting or protocol writing panels, and other markers of clinical excellence such as outcomes measures, patient satisfaction indices, and positions with national societies.
  - Discoveries that advance new technologies or therapeutic agents or procedures, particularly those associated with intellectual property, are considered responsive to the clinical requirements for tenure.

#### Educational Activities

- While tenure is granted primarily on the basis of scholarship, the expectation is that all individuals who seek tenure will have made educational contributions to the institution and beyond. Examples of educational activities that can be used to support promotion include:
  - Invited lectures at national meetings, seminars, and workshops, regional presentations, and successful mentorship of graduate students and residents pursuing advanced degrees (e.g., Master's and PhD degrees).
  - Development and / or maintenance of an accredited residency or fellowship program as a residency or fellowship program director or associate program director, or similar responsibility.

## Leadership / Service

- Advancement for tenure must be supported by objective evidence of effective leadership skills demonstrated within the institution and beyond.
- Examples are committee service (e.g., chair search, strategic faculty recruitments, five-year reviews, periodic reviews of academic units including departments, divisions, centers, institutes, and other work groups as needed), participation in national leadership training such as offerings of the Association of American Medical Colleges (AAMC) and Executive Leadership in Academic Medicine (ELAM) programs.
- Service as a full committee member on institution-wide committees such as an IRB panel, Institutional Animal Care and Use Committee (IACUC), Institutional Biosafety Committee, Medical School Admissions committee, with attendance consistent with committee standards, is expected. The goal at this level of promotion is to recognize efforts to develop effective processes, structure and procedures that facilitate and improve organizational effectiveness and deliver positive impact on the institution.
- Service as the program director of an Accreditation Council for Graduate Medical Education (ACGME) accredited program is considered supportive.
- Overlap is acknowledged between national leadership as an investigator and scholar (NIH study section, editorial board membership and leadership, session chair or program planning committee for national meeting) and service as defined in this section.
- Open Science provides a mechanism for data sharing that supports data transparency and integrity, facilitates scientific discovery and promotes public health. Participation in Duke Open Science and other Open Science platforms is highly valued by the School of Medicine. Opportunities for documentation of contributions to Open Science include annotation of publications listed in the Duke CV, in the personal statement (for bodies of work such as specific research initiatives), and in the letter of support provided by the Division Chief and Department Chair. Participation is considered under the broad category of service to the School of Medicine. The quality and use of data deposited into Open Science platforms by faculty may be recognized for contributing to knowledge generation and research integrity. Specifics of the policy are available at <https://scholarworks.duke.edu/open-access>.
- Professional conduct consistent and in keeping with the Core Values of the School of Medicine and the Duke University Health System is required.

## **Professor with tenure**

The rank of Professor is reserved for faculty members who have attained extraordinary national and international eminence as demonstrated by exceptional scholarship, publications, and participation in activities that reflect national and international influence and prominence such as participation in NIH study section and equivalent review groups, offices in professional societies, and / or prizes and awards. Faculty at the Professor level will be recognized as national and international leaders and have demonstrated evidence of pivotal scholarly accomplishments.

To be promoted to the rank of Professor with tenure, the faculty member will have achieved the following. Criteria for achievement listed under each category below are meant to build on those described for prior ranks and should be considered in that context.

## Scholarship

- Faculty at this rank will have a significant role in leadership of a nationally prominent program of scholarship. Significance of the work is demonstrated by impactful scholarship, publications, participation in NIH study sections and equivalent review groups, and / or office in professional societies.
- Exceptional scholarship in education consistent with that described above will be considered as supportive of promotion.
- Faculty at this rank will typically have an established record of sustained funding through peer-reviewed grants (e.g., NIH, NSF, DOD, VA, foundations, industry).
- Evidence of highly collaborative scholarly efforts as demonstrated through joint grant submissions and co-authorship of peer-reviewed publications, and leadership roles on multi-investigator, multi-project grants is expected.
- Authorship of peer-reviewed publications is required. Numbers and impact will vary by department and type / topic of scholarship. Ranges of numbers of publications for faculty previously promoted at each rank are available from the Department and School of Medicine APT offices. It is expected that as a faculty member progresses in the academic ranks, the faculty member will author an increasingly larger proportion of first author, co-first author, and senior author manuscripts, and (as appropriate) provide and promote substantive contributions to team science efforts. Publications reflecting large collaborative efforts are viewed favorably. For faculty who have little or no clinical or leadership / service responsibilities, expectations are for higher than minimal numbers of publications. Publication number alone is insufficient for promotion – the body of work must demonstrate national and international impact on the field. Publications should be based on outstanding, original, and innovative findings, educational innovations and / or important clinical applications of novel principles, either scientific or technical.
  - Scholarship responsive to this requirement is centered on publication of work in the faculty member's area or expertise that is viewed as significant. Objective metrics may include the impact factor of the journals accepting the work, advancements of the faculty member's *h*-index or similar metrics, and lay press or other acknowledgement of the work's broad interest.
  - The 20 most important papers, as identified by the faculty member, will be included in the promotion dossier and reviewed by the Department APT (DAPT) Committee for originality and significance of scholarship.
  - For clinical and team science researchers, publications related to studies of which the individual is not first or senior author can be counted toward the minimum number of first / senior author publications if there is attestation and description of the faculty member's intellectual contributions made by the team leader or collaborators (in letters of support), and the DAPT Committee judges the faculty member's contribution to be significant.
  - Scholarship in the field of education is considered supportive of promotion in this track provided there is durable dissemination of original, innovative, scholarly work that has substantial and measurable impact outside of the institution. Examples might include the development of innovative educational curricula that are published and disseminated, with evidence of successful adoption and high impact outside of Duke, published and experimentally validated methodologies,

and white papers in collaboration with national and international educational groups. For education researchers, publications related to educational collaboratives for which the individual is not first or senior author can be counted toward the minimum number of publications if there is attestation and description of the faculty member's intellectual contributions made by the team leader, and the DAPT Committee judges the faculty member's contribution to be significant.

- As appropriate, intellectual property development is also considered, provided there is evidence of the faculty member's significant contribution and the work is peer reviewed.
- Metrics and expectations more reflective of specialty-specific standards for scholarship may be further delineated at the Department level as long as those specifications meet the minimum standards described in this document.

#### Clinical Activities

- While outstanding clinical service is typically evident in this requirement, this can also be satisfied by impact on a clinical field.
- The clinical faculty member must have a national or international reputation for exceptional knowledge with continued evidence of influence in the field of clinical medicine.
  - Clinical and / or academic reputation should foster referrals from across a multi-state region or demonstrate evidence that scholarship has otherwise contributed to national and international clinical practice standards. Patient referrals and clinical care should be integrated into a program for advancing the medical education and / or research goals of the institution. Further evidence of reputation can be demonstrated by inclusion in national and international guideline setting panels, or by participation in national boards and leadership groups within the faculty member's field.

#### Educational Activities

- Professors are expected to have participated in the dissemination of knowledge across a wide arena. Activities may include invited lectures at national and international meetings, seminars, and workshops. Participation is expected in medical student, resident, graduate student, and peer education and training. Formal teaching responsibilities are not required, but if carried out contribute most substantively to the overall portfolio of educational activity when accompanied by measures of effectiveness.
- Professors with an education focus are expected to have substantive participation with national educational organizations for three or more years such as an ACGME Review Committee or a national ACGME or AAMC Committee or Task Force.
- Mentorship of learners, both formal and informal, is a critical responsibility. Ongoing contributions are expected and should increase with rank. Documentation should be provided as to the impact of mentorship.

#### Leadership / Service

- Professors should be clearly recognized as leaders in the institution. Evidence of institutional leadership across the mission areas in a manner that improves the effectiveness of the organization is required for promotion at this level.
- Multi-year service as a full committee member on institution-wide committees such as an IRB panel, Institutional Animal Care and Use Committee (IACUC), Institutional Biosafety Committee, Medical School Admissions committee, with attendance consistent with committee standards, is required. The goal at this level of promotion is to developing effective processes, structures and procedures to facilitate and improve organizational effectiveness and deliver positive impact on the institution.
- Service as the program director of an ACGME accredited residency or fellowship program is recognized as supportive of promotion.
- Contributions to the institution through service to the Duke School of Medicine, Duke Hospital, Duke University, and Department committees, will be considered favorably for promotion.
- Overlap is acknowledged between national leadership as an investigator and scholar (NIH study section, editorial board membership and leadership, session chair or program planning committee for national meeting) and service as defined in this section.
- Open Science provides a mechanism for data sharing that supports data transparency and integrity, facilitates scientific discovery and promotes public health. Participation in Duke Open Science and other Open Science platforms is highly valued by the School of Medicine. Opportunities for documentation of contributions to Open Science include annotation of publications listed in the Duke CV, in the personal statement (for bodies of work such as specific research initiatives), and in the letter of support provided by the Division Chief and Department Chair. Participation is considered under the broad category of service to the School of Medicine. The quality and use of data deposited into Open Science platforms by faculty may be recognized for contributing to knowledge generation and research integrity. Specifics of the policy are available at <https://scholarworks.duke.edu/open-access>.
- Professional conduct consistent and in keeping with the Core Values of the School of Medicine and the Duke University Health System is required.

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### **Post Tenure Expectations**

The awarding of tenure codifies a long-term commitment by Duke to support the faculty member throughout a faculty member's career. It is expected that tenured faculty will demonstrate ongoing intellectual engagement with their field and with the missions of the institution, commensurate with the long-term employment commitment made by the institution. Tenured faculty are expected to continue to demonstrate sustained excellence in the components of their career, including scholarship, education, leadership and mentoring. Tenured faculty undergo review by their Department Chair and / or Division Chief at least every three years. Professional conduct consistent and in keeping with the Core Values of the School of Medicine and the Duke University Health System and the Statement on Faculty Professionalism is required.