Overview
The appointment of full-time clinical faculty (FTCF) should advance the academic and service mission of the School of Medicine (SoM) by:

- Enhancing access to UWSOM clinical departments’ services for patients by providing clinical service, in a manner that is responsible to the increased demand of UW clinical services, consistent with patient expectations and UWSOM standards in terms of timeliness and ease of access
- Enhancing the management and efficiency of the UWSOM clinical services,
- FTCF should participate in teaching and training of students, residents, or fellows.

FTCF is defined as a person
- Whose appointment is 0.50 FTE or greater; and
- Who does not have a clinical practice outside of UWP or CUMG except with Sites of Practice Committee and dean approval; and
- Whose primary responsibility is to provide direct clinical services

Diversity and Equity:
Per the UW Faculty Code Chapter 24, Section 24-32.: "In accord with the University's expressed commitment to excellence and equity, any contributions in scholarship and research, teaching, and service that address diversity and equal opportunity shall be included among the professional and scholarly qualifications for appointment and promotion outlined below."

Guidelines for Promotion

- Clinical Care: A FTCF member usually has significant clinical responsibilities and a high level of clinical competency is expected in all ranks. FTCF who provide clinical professional services must have peer clinical evaluations as a component of academic advancement. The assessment of clinical competence should be performed in the following categories: clinical skills, medical knowledge, clinical judgment, humanistic qualities and interpersonal skills, professional behavior and attitudes; effectiveness as a consultant; overall clinical competence; peer teaching effectiveness and professionalism. A clinician is a role model for medical students and must demonstrate outstanding compassionate patient care, collegiality, integrity, professional excellence, respect for diversity, engagement in community and commitment to individual learning and scholarship. At the time of the FTCF appointment, guidelines should be established for the evaluation of the quality of clinical care and clinical productivity. Specific guidelines should be individualized for each full-time clinician and
should be developed by the department chair and section chief. Evidence for the above achievements by FTCF includes:

- Peer clinical evaluations. These should be obtained from faculty who work with the individual in the same clinical setting. At least some of the faculty should be outside of the individual's specific area of expertise. Peer evaluators should be chosen by the faculty member and the department chair (or division head). Evaluations from trainees may also be included in the overall clinical care evaluation packet. However, the majority of the evaluations should come from peer faculty. The evaluation should focus on two main areas:
  - medical knowledge, problem-solving skills, management of complex patients, psychomotor skills, and overall clinical skills; and,
  - humanistic qualities, responsibility, compassion, professionalism in interactions with both patients and colleagues, and management of the psychosocial aspects of illness.
- Letters from faculty and current or former colleagues as well as former trainees. Letters may attest that the faculty is considered by the medical community as a clinical resource, is sought out for clinical expertise, and has a strong referral base. The letters usually come from sources that have personal knowledge of the faculty member’s clinical skills and character.
- Documented clinical interventions and outcomes
- Self-evaluation of practice activities
- Data showing that the clinical practice has had a positive effect on health care outcomes within a practice setting or with specific patient population
- Recognition by peers locally, regionally, or nationally, commensurate with the FTCF member’s academic rank
- Recognition or awards based on practice activities
- Description of practice-related activities in peer-reviewed journals
- National board certification within practice area
- Requests for consulting services
- Any other evidence that demonstrates the quality of the application of clinical expertise (i.e., authored clinical protocols, invited presentations)
- Steady professional development in their practice area. Demonstration of continued professional development and clinical expertise is a necessary component of the review process

- Teaching: Excellence and effectiveness in teaching are essential criteria for appointment, advancement, and promotion of FTCF when the clinical practice site involves trainees (students, residents or fellows). FTCF engage in a variety of educational activities that may include teaching didactic courses, laboratories, and supervising the clinical work of undergraduate and graduate students. They may be called upon to provide non-credit programs and workshops, distance-learning programs, seminars, and continuing education programs. Faculty must demonstrate command of their subject matter, and continuous mastery of their subject field. Evaluation of teaching is based on combination of peer evaluations, student or participant evaluations. It is expected that the FTCF member will have consistently documented excellent ratings in teaching. Teaching effectiveness and excellence may be demonstrated by:
Teaching evaluations
Record of advising and clinical supervision activity. These activities may include but are not limited to student group advising, career development advising, and academic advising.
Peer evaluations
Self-evaluations
Teaching portfolio
Teaching awards
Authorship of textbooks or other teaching materials
Development of online courses in addition to traditional teaching roles
Although not required, peer-reviewed and disseminated scholarship will be considered exceeding expectations and taken into consideration at the time of promotion.

• **Professionalism:** Professional behavior is expected of all members of the Department. Professionalism includes demonstrating honesty, integrity, respect, compassion, accountability, and a commitment to altruism, diversity, equity and inclusion in all our work interactions and responsibilities. Because professionalism is expected in all areas of a faculty member's performance, deficiencies in professionalism may be seen as limiting a faculty member's ability to be successful in teaching, research, and professional service. For promotion to each successive rank in the Department, a faculty member is expected to grow in his or her fulfillment of this commitment and to be or become a role model for professionalism. The department will evaluate the professionalism of faculty in a standardized fashion annually. Regularly scheduled faculty reviews will include an evaluation for professionalism, and these reviews will be included in promotion materials for the department appointments and promotions committee. Examples of professionalism include:
  o Demonstrates respect toward all others both in direct interactions and in indirect references
  o Aware of own limitations; seeks and accepts constructive feedback
  o Answers questions directly and respectfully
  o Tactfully offers assistance and support for team members
  o Inspires trust in patients, colleagues, coworkers, and subordinates
  o Listens well and responds appropriately
  o Is dependable, competent, and responsible

**Appointments and Promotions to Specific Ranks:**
Consistent with the Faculty Code, clinical appointments will be annual appointments for the academic year July 1 through June 30. Each year, faculty must vote to reappoint, and the department chair must forward recommendations to reappoint to the dean. Reappointment decisions must be made by March 31 of the first year and by December 31 of each succeeding year.

**Full-time Clinical Instructor (Salaried):** Qualification for appointment as a clinical instructor includes:
• M.D. or equivalent degree, and equivalent clinical training to meet Board Certification requirements or, if trained outside the United States of America, completion of a comparable training program is expected
• Excellent clinical competence, documented from residency, fellowship or a practice setting
• Faculty from outside of the University of Washington may not have all the documentation suggested for clinical competence and teaching excellence and the guidelines for the initial appointment of such faculty will need to be more flexible
• It is expected that appointees will contribute to department clinical patient care and should participate in teaching and training programs. Promotion beyond clinical instructor will depend on meeting the criteria for clinical assistant professor

Full-time Clinical Assistant Professor (Salaried): Qualification for appointment to the rank of clinical assistant professor includes
• M.D. or equivalent degree, and equivalent clinical training to meet Board Certification requirements or, if trained outside the United States of America, completion of a comparable training program is expected
• In general, current Board certifications will be required for appointment or promotion to the rank of clinical assistant professor or above. In rare circumstances, because of unusual qualifications or experience, the requirement for current Board certification may be waived
• Excellent clinical competence, documented from residency, fellowship or a practice setting, beyond that required for initial appointment to the rank of clinical instructor
• Faculty from outside of the University of Washington may not have all the documentation suggested for clinical competence and teaching excellence and the guidelines for the initial appointment of such faculty will need to be more flexible
• It is expected that appointees will contribute to department clinical patient care and should participate in teaching and training programs. Promotion beyond clinical instructor will depend on meeting the criteria for clinical assistant professor
• If being appointed directly to clinical assistant professor, time in rank, prior rank at another institution, evidence of outstanding patient care, patient-related service excellence, professionalism and contribution to medical education will be considered.
• If being promoted from Clinical Instructor, a candidate must have demonstrated excellence in professionalism, clinical competence and clinical productivity
• While not a requirement, professional service and scholarship will be considered.

Full-time Clinical Associate Professor (Salaried): Qualification for the rank of full-time clinical associate professor shall be distinguished by a recognized local and regional reputation for excellence in clinical care and productivity which has matured over time and success in teaching. Criteria include:
• Participation in local and regional meetings centered on patient care, clinical skills, and teaching
• Local and regional invitations to give presentations on patient care, clinical skills, and teaching
• Success in patient care will be measured by student, resident, fellow, and peer evaluation. Areas of evaluation of clinical care include clinical skills, efficiency in providing clinical care, general medical knowledge, knowledge specific to the individual’s area of expertise, interpersonal skills, and professional behavior and attitudes
• Excellence in professionalism
• Administrative leadership
• While not a requirement, professional service and scholarship will be considered.
• Time in rank is not adequate for promotion to clinical associate professor
• In general, current Board certifications will be required for appointment or promotion to the rank of clinical associate professor or above. In rare circumstances, because of unusual qualifications or experience, the requirement for current Board certification may be waived

Full-time Clinical Professor (Salaried): Qualification for the rank of full-time clinical professor shall be distinguished by a recognized national or international reputation for excellence in clinical care and productivity which has matured over time and success in teaching. Criteria include:
• While scholarship is not a requirement for the FTCF track, for promotion to the level of clinical professor, the faculty must demonstrate a regional or national reputation through a consistent record of lectures and presentations
• Curriculum development or program development
• Significant administrative contributions,
• National/international professional society leadership, or by having other leadership roles (i.e., Committee or Task Force Chair within the hospital or School of Medicine)
• Dedication to the programs of the division, department and school will be considered.
• Excellence in professionalism

Emeritus: Emeritus status will be considered for a FTCF member who has retired from clinical activities and whose scholarly teaching and clinical service record has been highly meritorious. Emeritus appointments will be reserved for those FTCF who have made substantial and sustained contributions to the mission of the division, department and school. Emeritus appointments generally require at least ten years of prior service and achievement of the rank of clinical associate professor or clinical professor.