UNIVERSITY OF MINNESOTA
MEDICAL SCHOOL

TEACHING TRACK STATEMENT
Promotion Criteria and Standards

PART 1: MEDICAL SCHOOL PREAMBLE

I. INTRODUCTORY STATEMENT

This document describes the specific criteria and standards that will be used to evaluate whether
faculty meet the general criteria for promotion on the Teaching Track. Teaching Track
appointments are annually renewable and are not in the tenure stream.

This document contains Criteria and Standards pertaining to:
  A. Definitions of educational domains, a scholarly approach to educational work, and
     educational scholarship. These definitions are key to understanding the criteria and
     standards for the Teaching Track.
  B. Appointment to the Teaching Track as an Assistant Professor.
  C. Promotion from Assistant Professor to Associate Professor and from Associate Professor
     to Professor.
  D. The process for annual appraisal of Teaching Track faculty and post-promotion review.

The criteria, standards, and procedures are applied without regard to race, color, creed, religion,
national origin, gender, age, marital status, disability, public assistance status, veteran status,
sexual orientation, gender identity, or gender expression. Teaching Track Statements are
reviewed and approved by the Dean of the Medical School.

II. MISSION STATEMENT

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

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

III. KEY DEFINITIONS: EDUCATIONAL DOMAINS, SCHOLARLY APPROACH,
AND EDUCATIONAL SCHOLARSHIP

Educational Domains: Teaching Track faculty participate in educational activities that fall into
five domains: (1) teaching, (2) curriculum, (3) mentoring/advising, (4) learner assessment,
and/or (5) educational leadership/administration. Brief descriptions of these domains are
provided in section V. While individual faculty members on the Teaching Track are not expected
to excel in all five domains, a well-rounded portfolio that would include growing accomplishment in multiple areas is expected.

Scholarly Approach: Teaching Track faculty must take a “scholarly approach” to their educational activities. Faculty take a scholarly approach when they systematically design, implement, assess, and redesign an educational activity in the field. A scholarly approach requires that the educational activity be informed by the literature and “best practices” with regard to content and educational practices. This approach ensures that educational activities are informed by the knowledge and resources of the academic educational community. Implementation of educational activities using a scholarly approach requires documentation of quantity and quality of the work product.

Educational Scholarship: For promotion on the Teaching Track, faculty must go beyond a scholarly approach and demonstrate engagement in educational scholarship in at least one of the five domains (teaching, curriculum, mentoring/advising, learner assessment, and educational leadership/administration). Educational scholarship requires not only drawing upon resources and best practices in the field (scholarly approach), but additionally contributing to the resources in the field by publicly disseminating educational products or approaches so that the educational products are peer-reviewed.

Educational scholarship can take a variety of forms, all of which have value in assessing the performance and accomplishments of faculty in the Teaching Track. Examples of educational scholarship for each of the five domains are provided in Section V. and in the departmental addendums. The quantity of scholarship may vary considerably for faculty in this track and should be evaluated commensurate with their time allocation for such endeavors.

IV. APPOINTMENT AND ANNUAL APPRAISALS OF FACULTY

A. Appointment of Faculty

Teaching Track appointments may be made on all of the University of Minnesota Medical School campuses and affiliated sites, following the processes described in the Medical School Policy on Faculty Appointments. Each department may add specialty-specific criteria for appointment in Part 2. Departmental Addendum.

1. To Assistant Professor
   In the Medical School, the entry level rank for faculty is at the Assistant Professor level. The minimal, general criteria for initial appointment at this rank include but are not limited to:
   a. Possession of a terminal degree (M.D. or equivalent and/or Ph.D.)
   b. Board eligibility or certification (in applicable clinical specialties)
   c. Demonstrated ability in teaching
   d. Demonstrated involvement in high quality educational scholarship or research
   e. Demonstrated competence in the skills of communication, including effective communication with students, colleagues, and patients (if applicable)

2. To Associate Professor and Professor

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The criteria for appointment as an Associate Professor or Professor are the same as the criteria for promotion to the rank and can be found in sections VI.B. and VI.C.

B. Annual Appraisal of Faculty

1. Process
The process for this review is described in the Medical School Faculty Review Policy: Annual Review. The head of each Department, or his/her designee, annually reviews the progress of each faculty member. The Department Head prepares a written summary of that review and discusses the faculty member’s progress with the faculty member, giving him/her a copy of the report. In considering proposals for promotion in rank, the Medical School and its Departments comply with the procedures described in this Statement (section VIII).

The Academic Unit head and (if applicable) departmental faculty will meet annually to review and discuss the performance of Teaching Track Assistant Professor faculty, relative to the Teaching Statement. The annual review of Teaching Track Assistant Professor faculty will be recorded on the Medical School Form 12a and will reflect the faculty member’s performance relative to the Departmental Teaching Track Statement. A record of the vote will be included on the Form 12a, if a vote was taken (optional). The Academic Unit head and faculty member will sign the completed Form 12a. The Form 12a is forwarded to the Associate Dean of Faculty Affairs for review, comment, and signature. The original will be sent back to the home department and will become a part of the faculty member’s dossier. A copy of the signed form will be kept in the Medical School’s Office of Faculty Affairs in the faculty member’s personnel file.

2. Criteria
The criteria for satisfactory performance to be used for the annual review are the same as those for the appropriate rank, as defined in this Teaching Track Statement.

Criteria for scholarly activities and educational scholarship in teaching, curriculum, mentoring/advising, learner assessment, and educational leadership/administration are broadly defined below, and more specifically defined by the department in Part 2. Departmental Addendum. Additionally, each department defines specific examples of activities, quality measures, assessment, and scholarly output, which are discipline specific.

V. BROAD DESCRIPTIONS OF THE FIVE EDUCATIONAL DOMAINS, WITH ILLUSTRATIVE EXAMPLES OF EDUCATIONAL SCHOLARSHIP

A. Teaching includes both direct teaching and the creation and use of instructional materials. Examples of direct teaching include lecturing, leading workshops, facilitating small groups, role modeling in any setting (e.g., as ward attending), precepting, leading faculty development workshops, and teaching procedure skills. Examples of developed instructional materials include teaching handouts, slides, computer-assisted instructional
materials, interactive distance-learning modules, and other audiovisual learning materials.

*Educational scholarship in the teaching domain* requires that the activities or products be publicly available for peer review so they can be evaluated and applied by the educational community. Peer review and dissemination methods for teaching activities are highly diverse. They may include, but are not limited to, the following:

- Peer review by local experts, the institution’s curriculum committee, the department’s education committee, or internal (Graduate Medical Education Committee) or external (ACGME, LCME) accreditation reviewers
- Peer-reviewed or invited presentations – including workshops, abstracts, or posters – at local, regional, national, or international meetings (including but not limited to clinical and basic science professional organizations)
- List of other institutions where the lectures, workshops, or teaching methods have been adopted
- Invitations for teaching consultation from other departments or schools and results of the consultation
- Number of citations in other instructors’ curricula
- Publishing in a peer-reviewed print venue (journal article) or book, or acceptance of instructional materials in a peer-reviewed repository, for example:
  - MedEd Portal
  - Higher Education Assets Library
  - Family Medicine Digital Resource Library

### B. Curriculum

Curriculum is defined as a longitudinal set of designed educational activities and an evaluation of the effectiveness of the materials. The activities may occur at any level of training (e.g., medical student, resident, graduate student, continuing medical education, inter-professional education, faculty development, community programs) and may be delivered face-to-face or through distance-learning media.

*Educational scholarship in the curriculum domain* requires that the activities or products be publicly available for peer review so they can be evaluated and applied by the educational community. Peer review and dissemination methods for curriculum activities are highly diverse. They may include, but are not limited to, the following:

- Peer review by local experts, the institution’s curriculum committee, the department’s education committee, or internal (Graduate Medical Education Committee) or external (ACGME, LCME) accreditation reviewers
- Peer-reviewed or invited presentations – including workshops, abstracts, or posters – at local, regional, national, or international meetings (including but not limited to clinical and basic science professional organizations)
- List of other institutions where the curriculum has been adopted
- Invitations for curriculum consultation from other departments or schools and results of the consultation
- Number of citations in other instructors’ curricula
- Publishing in a peer-reviewed print venue (journal article) or book, or acceptance of curricular materials in a peer-reviewed repository, for example:
C. **Mentoring/Advising** are developmental relationships encompassing a spectrum of activities in which educators help learners or colleagues (i.e., other faculty) accomplish their goals. Mentoring implies a sustained relationship from which the mentor and mentee obtain reciprocal benefits. Advising occurs over a more limited period of time, with the advisor serving as a guide or source of expertise to help the advisee achieve her or his goals.

*Educational scholarship in the mentoring/advising domain* is highly diverse and may be demonstrated by methods including, but not limited to, the following:

- Invitations to critically review a mentoring program and documentation of the results of the appraisal’s impact
- Acquisition of competitive program development funding (i.e., grants) through a peer-reviewed process for development of a mentoring/advising program
- Conducting mentoring and advising training sessions
- Invitations for consultation from other departments or schools and results of the consultation
- Peer-reviewed or invited presentations (e.g., on a mentoring program, evaluation methods, other innovation) – including workshops, abstracts, or posters – at a local, regional, national, or international meeting (including but not limited to clinical and basic science professional organizations)
- List of other institutions where the mentoring or advising program/evaluation methods/other innovation has been adopted
- Publishing (e.g., on a mentoring program, evaluation methods, other innovation) in a peer-reviewed print venue (journal article) or book, or acceptance of mentoring materials in a peer-reviewed repository such as:
  - MedEd Portal
  - Higher Education Assets Library
  - Family Medicine Digital Resource Library

D. **Learner Assessment** encompasses measuring the learner’s knowledge, skills and attitudes by using instructional objectives and/or standards. Scholarly activities include the development of assessment processes and tools, implementation of an evaluation, and the analysis and synthesis of data.

*Educational scholarship in the learner assessment domain* requires that the activities or products be publicly available for peer review so they can be evaluated and applied by the educational community. Peer review and dissemination methods for learner assessment activities are highly diverse. They may include, but are not limited to, the following:

- Presentation of the assessment process or outcomes to local audiences such as departmental or Medical School curriculum committees, or internal review in preparation for an Residency Review Committee visit
• Peer-reviewed or invited presentations – including workshops, abstracts, and posters – at local, regional, national, or international meetings (including but not limited to clinical and basic science professional organizations)
• List of other institutions where the assessment process or tool has been adopted
• Publishing in a peer-reviewed print venue (journal article) or book, or acceptance of the assessment tool in a peer-reviewed repository, for example:
  - MedEd Portal
  - Higher Education Assets Library
  - Family Medicine Digital Resource Library

E. **Educational Leadership/Administration** is the achievement of desired educational outcomes through administrative and leadership efforts. Educational leadership also includes major course, clerkship, and program development for students, residents, faculty, interprofessional colleagues, and community members.

*Educational leadership excellence in this area* may be demonstrated by methods including, but not limited to, the following:

• Course, clerkship, or educational program leadership through a major curriculum change, as approved and peer reviewed by the curriculum committee of the medical school or department
• Evaluations by learners of course, clerkship, or program based on defined objectives or goals
• Replication or borrowing of course, clerkship, or program components or best practices by other faculty or learners

*Educational scholarship in this area* is highly diverse and may be demonstrated by methods including, but not limited to, the following:

• Documentation of the leader’s effectiveness using 360-degree evaluation with peer comparisons, benchmarking, or external peer-review
• Peer review of innovations/programs/curricula by local experts, the institution’s curriculum committee, the department’s education committee, or internal (Graduate Medical Education Committee) or external (ACGME, LCME) accreditation reviewers
• Peer-reviewed or invited presentations of innovations/programs/curricula – including workshops, abstracts, or posters – at regional, national, or international meetings (including but not limited to clinical and basic science professional organizations)
• List of institutions that have adopted innovations/programs/curricula created by the faculty leader
• Grants or internal awards to support innovations as evidence that others have judged the innovation to be worthy of investment
• Invitations or nominations to serve on education committees or taskforces, editorial boards, study sections, other relevant review committees, etc.

VI. CRITERIA FOR PROMOTION

A. **To Assistant Professor**
Not applicable in the Medical School (entry level rank is Assistant Professor).

B. To Associate Professor
A recommendation for promotion to associate professor is made when an eligible faculty member has fulfilled the specific standards for promotion to Associate Professor as stated by this Teaching Track Statement. Promotion is based on performance and service, independent of time in previous rank.

1. **Continuing engagement in high-quality educational work (including the application of a scholarly approach) across any combination of the five educational domains.**
   Quality can be assessed in a variety of ways, depending upon the domain and the specific activity or product. Candidates should continue to participate in relevant educator development workshops, meetings, and conferences in order to acquire skills/knowledge for application in their educational practice.

2. **Outstanding educational scholarship in at least one of the five educational domains.**
   Educational scholarship can take a variety of forms, all of which have value in assessing the performance and accomplishments of faculty in the Teaching Track. Examples of scholarship for each of the five educational domains are provided in section V. and in the departmental addendums.

3. **Service, particularly on education-related committees, task forces, or boards.**
   Although not a primary criterion for advancement, service will be taken into consideration in making decisions on promotion. Performance of service, however exemplary, cannot substitute for the primary criteria of teaching and/or work in the other domains (curricula, mentoring/advising, learner assessment, educational leadership/administration) and educational scholarship. Examples of service contributions include:
   a. Service to the department, school, or university on governance-related or policy making committees
   b. Roles in discipline-specific regional and national organizations
   c. Service to the community, state, and public engagement

4. **An excellent local and regional reputation in any combination of the five educational domains** (teaching, curriculum, mentoring/advising, learner assessment, and/or educational leadership/administration) as demonstrated by invited presentations, program development, receipt of awards, and nomination by faculty peers.

Concordant with the Medical School’s mission, value should be given to educational activities and scholarship that involve collaboration, interdisciplinary or interprofessional teams, and public engagement.

C. To Professor
A recommendation for promotion to professor is made when an eligible faculty member is recognized as a national leader for excellence in at least one of the five educational domains. The eligible faculty member must also have demonstrated high quality work in
other domains such as education and educational development with evidence of effective mentoring and has made additional academic, scientific, scholarly, and/or professional achievements outlined, but not limited to, the list below. Promotion is based on performance and service, independent of time in previous rank.

1. **Nationally recognized for engagement in high-quality educational work (including the application of a scholarly approach) across any combination of the five educational domains.** Quality can be assessed in a variety of ways, depending upon the domain and the specific activity or product. Candidates should continue to participate in relevant educator development workshops, meetings, and conferences in order to acquire skills/knowledge for application in their educational practice.

2. **Nationally recognized for educational scholarship in at least one of the five educational domains.** Educational scholarship can take a variety of forms, all of which have value in assessing the performance and accomplishments of faculty in the Teaching Track. Examples of scholarship for each of the five educational domains are provided in section V. and in the departmental addendums.

3. **Service, particularly on education-related committees, task forces, or boards.** Although not a primary criterion for advancement, service will be taken into consideration in making decisions on promotion. Performance of service, however exemplary, cannot substitute for the primary criteria of teaching and/or work in the other domains (curricula, mentoring/advising, learner assessment, educational leadership/administration) and educational scholarship. Examples of service contributions include:
   a. Service to the department, school, or university on governance-related or policy making committees.
   b. Roles in discipline-specific regional and national organizations,
   c. Service to the community, state, and public engagement

4. **Holds educational leadership positions** either locally within the Medical School or in national societies.

5. **Contributions to the development of other faculty educators or medical residents.**

6. **An excellent national reputation in any combination of the five educational domains** (teaching, curriculum, mentoring/advising, learner assessment, and/or educational leadership/administration) as demonstrated by invited presentations, program development, receipt of nationally recognized awards, and nomination by faculty peers.

**VII. ANNUAL REVIEW**

Each Medical School department will conduct an annual review of all Teaching Track faculty members during the first six years on the track. The process and review criteria are described in the departmental Teaching Track Statement.
Further, all Teaching Track faculty will be eligible for a periodic career review (a minimum of every four years), providing an in-depth assessment of their career at that particular stage.

The specific criteria for performance evaluation on the Teaching Track are outlined in the individual Departmental Teaching Track Statements. In general, a faculty member should continue as an active participant in the intellectual life and mission of the Department. Specific goals and expectations should be established with the Division or Department to allow flexibility for changes in a faculty member’s career patterns.

VIII. PROCEDURES

Promotion in the Medical School requires a positive vote by two-thirds of all faculty members at the department level who are eligible to vote on the question to affirmatively recommend for promotion. All full time faculty holding appropriate appointment and rank, including those at affiliated sites, are eligible to vote on recommendations for promotion of candidates in the Teaching Track. The process for promotion will be the same for all tracks in the Medical School.

The promotion dossier will follow the standardized format required by the University.

IX. PROCESS FOR UPDATING THIS STATEMENT

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

History of Revisions:

Original Document: April 30, 2008
Revision Approved by Teaching Track Faculty: December 18, 2012
PART 2: DEPARTMENTAL ADDENDUM

I. INTRODUCTORY STATEMENT

This statement describes the specific criteria and standards which will be used to hire faculty on the teaching track at the University of Minnesota Medical School Duluth campus and to evaluate whether faculty on this track meet criteria for promotion. The definitions and examples of educational scholarship discussed in this document were derived from *Advancing Educators and Education: Defining the Components and Evidence of Educational Scholarship*. Association of American Medical Colleges, 2007.

This document describes the University of Minnesota Medical School Duluth campus’s criteria and standards pertaining to:
A. Hiring at the level of Assistant Professor
B. Promotion from Assistant Professor to Associate Professor, and from Associate Professor to Professor
C. Annual performance review
D. Periodic career review

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

II. MISSION STATEMENT

A. Mission, and Goals of the University of Minnesota Medical School Duluth campus

Mission: The mission of the Medical School Duluth Campus within the broad mission of the University of Minnesota Medical School is to educate students who will practice family medicine and other primary care specialties in rural Minnesota and American Indian communities, to provide high quality academic and clinical education programs for professional, graduate, post-graduate and undergraduate students, and to create distinguished research programs that advance knowledge in the health sciences, including rural and American Indian health issues.

Goals: In carrying out these missions and goals, University of Minnesota Medical School Duluth campus teaching track faculty should have a focus on educational scholarship, which is defined here as the generation and dissemination of educational materials under one or more of the five educational domains described below using a peer-reviewed product, with the goal that these work products will be made available to, used and adopted by others. The five educational domains are:
   1. Scholarly teaching
   2. Curriculum
   3. Mentoring/advising
   4. Learner assessment
III. APPOINTMENT AND ANNUAL PERFORMANCE REVIEW OF FACULTY

A. Criteria for Appointment of Faculty
The University of Minnesota Medical School Duluth campus accepts and subscribes to the statement on criteria and standards for appointment of faculty in the University of Minnesota Medical School. Faculty are expected to support and foster all aspects of the mission of the University of Minnesota Medical School Duluth campus, including scholarly research, education, administration, and service. Teaching track faculty must possess a doctoral degree (MD, PhD, PsyD, EdD, PharmD, or equivalent), and a significant portion of their time should be spent in education, scholarly research and service. The following standards are specific to the University of Minnesota Medical School Duluth campus.

1. **Assistant Professor**
   Individuals being appointed at the rank of Assistant Professor in the teaching track should have internal or local recognition in educational or other scholarship activities and should have experience with, and commitment to, one or more of the following domains in accordance with their work assignments: a) scholarly teaching, b) curriculum, c) mentoring/advising, d) learner assessment, and e) leadership and administration.

2. **Associate Professor or Professor**
   The specific criteria for appointment to the rank of Associate Professor and Professor will be the same as for promotion to the rank, as described in Section V of this document.

B. Annual Performance Review of Faculty

1. **Process**
   Annual reviews will serve to evaluate the contributions of the faculty member to the mission of the department and the Medical School.

   The University of Minnesota Medical School Duluth campus will annually review the performance of each teaching track faculty member in light of the goals and expectations established in this statement. This review will serve to evaluate the contributions of the faculty member to the mission of the University of Minnesota Medical School Duluth campus and the Medical School. The annual performance review will also serve as an instrument for individual faculty development.

   As part of this process, the faculty member will prepare an updated curriculum vitae, and an appropriate form(s) describing their time-contributions, goals and a self-evaluation. Also, the faculty member will be asked to meet individually with their supervisor, to discuss his/her accomplishments of the preceding year, and goals for the upcoming year. A Medical School Form 12a will be completed and submitted to the Medical School Dean. This annual review covers all components of the department’s mission, as they apply to the individual’s assigned responsibilities.
2. Criteria
The criteria for satisfactory annual performance review will be consistent with the criteria and domains of competency described for the appropriate rank or the next rank if promotion is anticipated. These include:

a. Scholarship: ongoing and consistent use of educational theory and research in all educational practices and dissemination of such scholarly products through peer-reviewed means.

b. Education: continued contributions to the teaching mission of University of Minnesota Medical School Duluth campus and Medical School, through activities such as undergraduate, graduate, and post-graduate teaching, advising and/or mentoring, and learner assessment.

c. Administration: documentation of service to the department, school and/or University on committees and task forces, and through other educational/clinical programs and activities approved by the department head.

d. Service: continued participation in activities that relate to the teaching, research, and health service missions of University of Minnesota Medical School Duluth, as determined by the department head and/or Senior Associate Dean (Regional Campus Dean).

IV. DOMAIN COMPETENCIES
A. SCHOLARLY TEACHING

Definition: Scholarly Teaching is any activity that both uses and creates accepted medical education models to foster learning. Scholarly teaching includes both direct teaching and the creation and publication of peer-reviewed instructional materials.

Examples of direct teaching and the creation of peer-reviewed instructional materials include:

- Preparing and giving lectures and other presentations, including research presentations, teaching cases, journal clubs, etc.
- Facilitating small groups
- Leading workshops
- Role modeling in any setting
- Facilitation of on-line courses
- Working one-on-one with learners
- Assisting in evaluations of learners
- Preparing and conducting laboratory sessions
- Creating and publically disseminating teaching handouts, slides, computer-based instructional materials, interactive distance learning modules, and other audio-visual learning materials
Evidence of educational excellence in teaching must document the quantity and quality of the educational activities.

**Quantity**: descriptive information regarding the types and frequencies of educational activities, including number of hours/years spent teaching, number of courses taught, number of learners, learner types and levels, and instructional materials developed.

**Quality**: evidence that activities achieve excellence using comparative measures, such as learner evaluations, letters from former learner/trainees, course and course director ratings, CME ratings, peer evaluation, outcome indicators (e.g., learner performance, standardized test results, OSCE scores, career progress), enrollment figures, teaching awards, other local or national recognition, and invitations to teach in other departments or institutions.

Scholarship in teaching requires that the teaching be made public (disseminated) in a form that others can use, and that it be peer reviewed.

Examples of Scholarship in Teaching include:

- Peer-reviewed or invited presentations at regional, national, or international meetings.
- Development of course curricula or on-line courses with peer and learner review.
- Systematic assessment and modification of an educational program or curriculum with learner and peer review.
- Educational peer-reviewed publications in discipline-related or medical educational journals.
- Peer review of other academicians’ publications, presentations, workshops, learner assessments, teaching sessions or course materials.

B. Curriculum

**Definition**: Longitudinal series of educational activities designed for professional, graduate, or post-graduate trainees to advance their understanding of the scientific foundations of human medicine, and which includes assessments tools that can be used for both student and peer evaluation. Such curricula may be delivered in real-time face-to-face or via print or electronic media and disseminated locally, regionally, nationally, or globally.

Scholarly activity in curriculum requires that the work product be peer-reviewed and widely accepted. Examples of activities that comply with curricular scholarship are varied and include, but are not limited to, the following examples:

- Peer review by recognized authorities, the institution’s curriculum committee, or internal (Graduate Medical Education Committee) or external (AAMC, ACGME, LCME) accreditation reviewers.
- Peer-reviewed or invited presentations – including workshops, abstracts, or posters – at local, regional, national, or international meetings (including but not limited to clinical and basic science professional organizations).
- List of other institutions where the curriculum has been adopted.
C. MENTORING/ADVISING

**Definition:** Mentoring and advising include activities that involve a developmental relationship in which an educator provides guidance or counsel to a learner or colleague to facilitate accomplishment of the learner’s or colleague’s goals. Mentoring implies a sustained, committed relationship from which the mentor and protégée obtain reciprocal benefits. Advising occurs over a very limited period of time with the advisor serving as a guide or source of expertise to help the advisee achieve her or his goals. Student mentees include professional students, graduate students, postdoctoral trainees, residents and clinical preceptors. Documentation of mentoring and advising activities must clearly describe the nature of the relationships and their effectiveness in helping advisees meet their goals.

**Examples of mentoring activities include:**
- Mentoring learners through their professional development in basic or applied medical sciences.
- Mentoring learners on projects in basic or applied medical sciences
- Counseling learners or colleagues to facilitate their goals
- Advising students
- Advocating for the professional development of learners

Evidence of excellence in mentoring/advising must document the quantity and quality of the activities.

**Quantity:** number of learners and colleagues mentored or advised together with their names and position or status, estimate of time invested in each relationship (e.g., duration, frequency of contact, and total hours), and description of process for helping advisees reach their goals.

**Quality:** evidenced by advisees’/mentees’ evaluations (using standardized forms with comparative ratings), lists of advisees’ significant accomplishments (publications, presentations, educational products, recognitions, awards, career progress), narrative comments from advisees, awards for mentoring/advising, and selection as a leader in a mentoring organization.

Examples of scholarship in Mentoring/Advising include:
- Presenting peer-reviewed or invited lectures or workshops on mentoring/advising at regional or national meetings
C. LEARNER ASSESSMENT

**Definition:** Learner assessment encompasses the processes of measuring the learner’s knowledge, skills and attitudes against pre-defined instructional objectives and/or standards. Assessment instruments or tools refer to the methods of gathering data about learner performance and understanding.

**Learner assessment activities include:**
- Authoring test questions for national medical testing organizations (e.g., NBME)
- Developing and validating original assessment tools including medical case vignettes, essay tests, simulations etc.
- Authoring and disseminating reports on learner assessment in preparation for internal and external reviews
- Developing and validating innovative assessment methodology
- Collaborating in assessment development across disciplines

Evidence of excellence in learner assessment must document the quantity and quality of these activities.

**Quantity:** numbers and types of learners; number, types, and sizes of assessment tools; frequency with which tools are used; intended uses of the information.

**Quality:** reliability and validity of assessment tools; application of current literature, models and test theory; development of skills in the areas of assessment or evaluation.

Examples of Scholarship in Learner Assessment include:
- Presenting peer-reviewed or invited lectures or workshops on learner assessment at regional or national meetings
- Publishing peer-reviewed materials on learner assessment in print or electronic formats (e.g., quizzes; essay questions; reflection questions; case based vignettes; etc.)
- Adaptation or implementation of learner assessment tools by other institutions or professionals and peer-review of the adaptation
D. EDUCATIONAL LEADERSHIP/ADMINISTRATION

**Definition:** An educational administrator and/or leader that achieves desired outcomes and transforms the institution through their administrative and leadership efforts.

**Educational leadership or administration activities include:**
- Leadership or administrative responsibility of a medical educational program, committee or task force. Examples include course director for the medical school curriculum or director of graduate studies for a Masters or Ph.D. degree granting program in the biomedical sciences.
- Significant contribution to the development of a large scale medical educational initiative
- Medical course leadership
- Development of funding/infrastructure for medical educational initiatives

Evidence of excellence in medical educational leadership or administration must document the quantity and quality of these activities

**Quantity:** nature, duration, and quantity of leadership or administrative projects; numbers and types of personnel supervised, learners impacted; size of budget/financial resources

**Quality:** determined by program evaluations, peers’ and collaborators’ evaluations of leader, collaborative relationships, programs that are sustained and adopted by other institutions (evidence should include a list of such institutions).

Examples of Scholarship in Educational Leadership/Administration include:
- Invited and peer-reviewed presentations on educational leadership or administration at regional, national, and international meetings
- Peer-reviewed publications (particularly within given area of leadership), taking into account the quantity and quality of publications
- Awards in medical education, with annotations regarding selection criteria and process
- Documentation of leadership on a grant focused on medical education
- Committee work in an accreditation process
- Associate course or program director
- Participation in competitive educational leadership program

V. CRITERIA FOR PROMOTION

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

B. To Associate Professor
   Associate Professors are expected to have increasing achievements (both quantity and quality)
in the areas listed below, with local or regional recognition in one or more of these areas:

1. **Research/scholarship:** demonstrate consistent use of educational theory and research in all educational practices (i.e., consistent application of six characteristics of scholarship of education: clear goals, adequate preparation, appropriate methods, achievement goals, effective presentation, and reflective critique).

2. Peer-reviewed publication and acceptance of teaching materials/educational products by peer-reviewed process (e.g., web-based repository).

3. **Educational competence** in continued educational activities, with increased quantity, quality, and impact in THREE of these areas (*teaching, development of instructional materials, mentoring/advising, learner assessment, and educational leadership/administration*): There should be evidence of scholarship, through dissemination and peer review, in at least one of the educational activities. The candidate should continue to participate in educator development workshops, meetings, and conferences.

4. **Service:** sustained service on University/other local, regional, or national committees or organizations; continued participation in faculty development relating to educator and leadership skills.

5. Excellent reputation inside and outside of the University community as a medical educator, as demonstrated by invited presentations, program development, and nomination by faculty peers.

6. Excellent reputation inside and outside the Medical School as an authority in a basic biomedical science specialty (if applicable), as demonstrated by invited visiting lectureships, participation in professional scientific societies, attendance at National meetings, and peer reviewed publications.

7. Excellent reputation inside and outside the local area as an authority in a clinical specialty (if applicable), as demonstrated by patient referrals from outside the area, invited visiting lectureships, and memberships in professional societies. For clinically active faculty, it is expected that they will have achieved appropriate Board certification in the specific field in which they are practicing.

### C. To Professor

The criteria for promotion to the rank of Associate Professor will continue to be applicable for promotion to Professor. However, promotion to full Professor requires demonstration of national recognition in at least one of the 5 competency domains (scholarly teaching, curriculum, mentoring/advising, learner assessment, and leadership and administration) with
increased quantity and quality (e.g., developed, mature) of scholarly achievement and leadership roles that may include, but are not limited to the following examples:

1. **Research/scholarship**: demonstrate consistent use of state-of-the-art educational theory and research in all educational practices, with demonstrated consistent application of the six characteristics of scholarship: clear goals, adequate preparation, appropriate methods, achievement goals, effective presentation, and reflective critique; seen as a model/teacher of these behaviors to colleagues and peers; involved in the development of original teaching/mentoring/assessment materials used locally and published and recognized nationally by peers.

2. Continued dissemination and acceptance of teaching materials/educational products nationally by peer-reviewed processes (e.g., web-based repository)

3. **Education: national** recognition of excellence and leadership in educational activities in THREE of the following areas:
   - Direct teaching
   - Mentoring-advising
   - Learner assessment
   - Creation of educational materials

4. Receipt of teaching or mentoring awards (local or external).

5. Participation in advanced educational skills workshops and leadership in educator development workshops, meetings, and conferences nationally.

6. Leadership role on national education committees or taskforces, courses or other educational programs, including faculty development programs and accreditations activities.

7. Leader in medical education and national reputation for educational accomplishments.

8. Service and leadership on University, local, national organization committees and University/national professional organizations.

**VI. PERIODIC CAREER REVIEW**

All senior University of Minnesota Medical School Duluth campus Teaching Track faculty (Associate Professor and Professor) will be eligible for a Periodic Career Review, providing an in depth assessment at a minimum of every four years of their career at that particular stage. The process for this review is described in section VII. Annual Review of the Part 1. Medical School Teaching Track Preamble.

The criteria for the Periodic Career Review are the same as defined in Section III.B.2. of this statement (Annual Performance Review).
The department head may initiate this review process following the annual faculty review at any time of the year if it is deemed that it may help to enhance a faculty member’s role in the department.

**Determination of below-standard performance**

If evaluation results indicate that a faculty member’s performance is substantially below the goals and expectations adopted by the unit, the faculty member shall be advised of this in writing, with detailed plans for improving performance, and a time period shall be established (of at least one year) within which improvement shall be demonstrated.

If, at the end of the performance improvement period, the faculty member’s performance is determined to be acceptable, the faculty member will be informed of this in writing by his/her immediate supervisor.

If, however, at the end of this time period, the faculty member’s performance continues to be below the goals and expectations of the unit and there has not been a sufficient improvement of performance, the Regional Campus Dean at UMMSD may elect to terminate the faculty member’s contract following due process.

**VII. PROCEDURES**

The normal procedures defined in Part 1: MEDICAL SCHOOL PREAMBLE will apply.

**VIII. PROCESS FOR UPDATING THIS STATEMENT**

The University of Minnesota Medical School Duluth campus will update its teaching track statement every five years or more frequently as needed. Revisions will be made by an appointed or elected University of Minnesota Medical School Duluth campus Faculty Advisory Committee. All faculty will be invited to review and give input on the statement, and approval will be obtained through a vote by faculty with the approval date noted on the document.

**History of Revisions:**

*Original Document: January 2011*

*Revision: Voted on and approved by the Medical School Duluth Campus faculty: June 6, 2013*

1 Some of the text used in this statement was taken from Advancing Educators and Education: Defining the Components and Evidence of Educational Scholarship. Association of American Medical Colleges, 2007.