COLLEGE OF HEALTH AND HUMAN SERVICES
GUIDELINES FOR PROMOTION OF CLINICAL FACULTY
May 13, 2008

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OVERVIEW

The purpose of this document is to delineate the guidelines for promotion of clinical faculty in the College of Health and Human Services. We believe that promotion of clinical faculty provides a mechanism to recognize outstanding clinical faculty for excellence in fulfilling their unique roles in the College of Health and Human Services and for leadership in their profession at the college, university, state, and national levels. Although specific examples of evaluative criteria are provided, it is not our intent to suggest candidates must achieve all such indices. To the contrary, this document should be used as a starting point for all considerations of clinical faculty promotion. The specific criteria used for any particular candidate should be sensitive to the scope of the clinical faculty member’s prescribed role within his/her department. These will be delineated at the department level by the candidate, department promotion committee and the department chair.

While the individual roles of clinical faculty in the college vary considerably, the standards for promotion should be consistent. The promotion decision should be based on two elements. First is the clinical faculty member’s performance in his or her prescribed role within the department. The second element is leadership which is represented by the capacity to effect changes that improve professional education and practice.

ELIGIBILITY FOR PROMOTION

Full time clinical faculty (88% FTE and above) are eligible for consideration by the CHHS promotion committee upon the joint recommendations of their department’s promotion committee and chair. While there is no fixed timetable for review, candidates should remain in rank for a period of time sufficient to demonstrate a sustained pattern of excellence and leadership. Clinical faculty members may remain at the rank of clinical assistant professor throughout their tenure at the university.

A minimum of a master’s degree is required for promotion from assistant clinical professor to associate clinical professor, and from associate to clinical professor.

Role of Doctoral Work in the Promotion Process

Clinical faculty are not required nor expected to complete a doctoral degree for promotion; however, some clinical faculty members may choose to do so. Doctoral work (either in process or completed) may be used to contribute to the promotion document. The candidate, committee, and department chair must describe how this work has contributed to the enhancement of the candidate’s role and leadership in the department and/or field.

CRITERIA FOR PROMOTION

University Criteria for Promotion
Quoting from the University guidelines on Appointment of Clinical Faculty Policies and Procedures

A clinical associate professor shall have attained a terminal degree, have had several years of successful teaching or other relevant experience, and shall have shown evidence of professional leadership and scholarly activity. A clinical associate professor will hold current licensure/certification as appropriate to the field.

A clinical professor shall have a background of successful teaching, marked by the perspective of maturity and experience, and some outstanding creative attribute recognizable in the professional and academic world as a special asset to the University. A clinical professor will hold current licensure/certification as appropriate to the field.

The review of clinical faculty for promotion to the rank of clinical professor will assess the body of work for that individual with particular emphasis on the work accomplished since promotion to clinical associate professor.

The University Promotion of Clinical Faculty Document includes three categories: clinical activities, teaching, and service. Due to the diverse responsibilities of clinical faculty in the college, evaluation for promotion may be based on any combination of these categories depending on the candidate’s assigned responsibilities in the department. These categories will be further elaborated later in this document.

Description of the Clinical Faculty Role

Because clinical faculty roles vary considerably, a clear description of the candidate’s role is essential. Ideally this description should be part of the hiring process and should be included in the promotion document. The grid below is provided to assist in this process. Clinical teaching should be listed in the clinical activities category whereas more typical classroom teaching and advising should be listed in the teaching category. There is no expectation that the candidate must meet the criteria in ALL of these categories, only those that apply to his or her particular work responsibilities.

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<tr>
<th>Category</th>
<th>Percent Effort</th>
<th>Delineation of Responsibilities</th>
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<td>Clinical Activities</td>
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<td>Teaching</td>
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Scholarship

Promotion of clinical faculty will be based upon the evaluation of clinical activities, teaching, and service. While scholarship is not designated as a separate category in the UNH promotion guidelines, clinical faculty are expected to integrate scholarship with their clinical activities, teaching and service as described in these respective sections of the document. The status of UNH as a Carnegie Research I Institution implies that all faculty, clinical as well as tenure-track, are expected to contribute to a scholarly atmosphere and, by their actions, reflect the importance
the University places on scholarly endeavors. Because scholarly endeavors are an integral part of the role of clinical faculty, evaluation of their scholarly work will be integrated into these sections of the promotion document.

Scholarly endeavors contribute to the capacity of a clinical faculty member to be a leader in his or her field. For the purpose of this document Boyer’s classification of scholarship is a useful model (1990). Boyer describes four types of scholarship. The scholarship of discovery and integration are most appropriate for tenure track faculty, while the scholarship of application and teaching pertain especially to clinical faculty. This does not preclude clinical faculty from engaging in the scholarship of discovery and integration should that be the individual faculty members’ goal.

The following is a description of the Boyer categories with examples of how the various forms of scholarship can be demonstrated.

*The Scholarship of Discovery* refers to investigative studies that produce new information to understand a particular phenomenon. Clinical faculty may conduct field trials or other clinically based research either independently or collaboratively with other clinical or tenure-track faculty in this type of research. Empirical and conceptual articles in peer-reviewed journals are evidence of the scholarship of discovery.

*The Scholarship of Integration* refers to synthesizing knowledge from a variety of sources both within and beyond a specific discipline and providing new insights and interpretations that help others understand the meaning and utility of knowledge. Systematic literature reviews and meta-analyses are examples of the scholarship of integration.

*The Scholarship of Application* addresses the use of scholarship to solve critical problems which will serve the larger community. Through application of clinical expertise, clinical faculty members are positioned to extend this knowledge as well as develop new understandings that emerge through the application process. Examples include creating and piloting innovative clinical programs and implementing state-of-the-art treatment and assessment procedures. Publication or presentations of the outcomes of these projects provide mechanisms to extend this understanding to others in the profession or the community.

*The Scholarship of Teaching* involves the mastery of knowledge and methods of presentation so that others may learn more effectively, most especially through strategies that support active learning and critical thinking. Examples include the development and dissemination of clinical education resources such as simulated cases and supervisory manuals through publication and professional presentations.

**CLINICAL ACTIVITIES**

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Clinical activities may vary considerably from one clinical faculty member to another. In some cases, specific clinical activities may not be part of a clinical faculty member’s prescribed role. The candidate, department committee and department chair should describe the clinical activities of the clinical faculty member in sufficient detail so that this role is clear to the college promotion committee.

Clinical activities may include delivery of clinical services to clients, direct supervision of students providing services in on- or off-campus settings, indirect supervision of students, faculty professional practice and/or administration of clinical programs. These roles may entail the following:

- Supervising students by observation of student performance; supervisory meetings with students; review and approval of documentation, treatment/intervention plans, group protocols; evaluation of student performance using criteria developed specifically by the supervisor, setting, department or profession.
- Overseeing students providing services to clients/patients/consumers in off-campus settings which may include meeting with students; supporting and mentoring students and supervisors during the placement, and; consulting with student supervisors in the evaluation of student performance using criteria developed specifically by the supervisor, setting, department or profession.
- Establishing and nurturing relationships with the setting including development of learning objectives for the student experience, contracts, articulating the responsibilities of UNH clinical faculty to the setting, supervisor, and student; placing students in the setting; facilitating preceptor/supervisor/mentor development.
- Providing professional services to clients/patients/consumers in on-campus or off-campus programs including evaluation, intervention, and documentation appropriate to the program and professional standards
- Maintaining professional competency/continued certification required for teaching/supervision included in workload. Note: activities may not be an explicit part of the person’s workload.

Scholarship related to clinical activities may include presentations and published articles that are related to clinical innovations, assessment instruments, intervention or evaluation methods, clinical teaching/supervisory innovations, and descriptions of new programs to meet client or student needs.

Promotion to the rank of clinical associate professor will be based upon demonstrated leadership and scholarship in the area of clinical expertise. Promotion to the rank of clinical professor will be based upon the candidate’s sustained record of excellence in clinical activities since promotion to the rank of clinical associate professor with demonstrated leadership and expertise in the profession. This may be characterized by recognition of the individual as having advanced clinical expertise, leadership, and effectiveness across the professional community. A clinical professor’s record of scholarship demonstrates a capacity to shape current clinical practice and influence future practice.

**Documentation of Clinical Activities**
Documentation of clinical activities should be based on the clinical faculty members’ prescribed role within their department. This documentation should be carefully selected and presented to demonstrate the scope and effectiveness of the faculty member’s performance in fulfilling his or her clinical role. Statements about the effectiveness of clinical activities should be supported by quantitative and/or qualitative evidence whenever possible. Documentation of the effectiveness of clinical activities should begin with the candidate’s statement describing his or her clinical activities including main fields of clinical interest, clinical teaching, and competence.

1. The candidate’s own opinion of the effectiveness of his/her clinical activities.
2. Documented evaluations of clinical activities.
3. Documented clinical intervention and outcomes such as developing innovations, special assessment, intervention, evaluation methods, and new programs to meet client needs.
4. List of the candidate’s published scholarly work and work contracted or soon to be published. This may include journal articles, white papers, reports, simulations, and video/DVD materials. These should be cited in the standard entry form used in the faculty member’s field.
5. List of oral presentations before professional groups.
6. Grants, contracts or fellowships for which the candidate has applied.
7. Prizes or other honors won by the candidate.
8. Professional organizations to which the candidate has provided leadership, clinical expertise, or served as a consultant.

Include additional documentation as appropriate to the clinical faculty member’s role:
- Description of clinical courses taught by the faculty member including student evaluation data and selected syllabi.
- Documents or data that describe clinical or professional leadership activities including but not limited to public health initiatives, brochures, health education materials, data to support health care, public policy or clinical initiatives, and book or journal reviews.

TEACHING

This section applies to those for whom academic teaching and/or advising are requirements of their positions as clinical faculty. It is understood that while some clinical faculty may teach and advise, others may do neither. In cases of the latter this section does not need to be addressed. Candidates engaged in clinical teaching, including supervision, are instructed to describe these activities in the “clinical activities” section of the document.

The dissemination of knowledge is a core value across the university community. As such considerations for promotion to the rank of clinical associate professor will require candidates’ demonstration of teaching excellence as opposed to merely satisfactory teaching. Furthermore scholarship related to teaching may include presentations and/or publications regarding innovations in curricular development, teaching methods, teaching effectiveness, and/or pedagogical innovations.

In addition to increased leadership and scholarship in teaching, promotion to clinical associate professor will be based on demonstrated excellence in teaching over several years in addition to
increased leadership and scholarship in teaching. Promotion to clinical professor will be based upon the candidate’s sustained record of excellence in teaching since promotion to the rank of clinical associate professor with increased maturity and demonstrated leadership, scholarship, and expertise in the profession. Scholarship may be demonstrated through presentations and/or publications utilizing the scholarship of discovery, integration, application, or teaching.

**Documentation of Teaching**

This section pertains to those clinical faculty for whom academic teaching and advising are part of their assigned role. Candidates engaged in clinical teaching, including supervision, should describe these activities in the “clinical activities” section of the document.

Teaching effectiveness can and should be documented through various means. Statements about teaching effectiveness should be supported by quantitative and/or qualitative evidence whenever possible.

Documentation of teaching effectiveness begins with the candidate’s statement describing his or her teaching activities. The statement should include information as it applies to the individual clinical faculty member about:

1. The candidate’s own opinion of the effectiveness of his/her teaching.
2. The candidate’s main fields of teaching interest and competence.
3. Courses taught by the faculty member. List the courses by number and indicate how frequently the faculty member has taught them. Include the scores from student evaluations.
4. Advising of undergraduate majors and/or undeclared students; the candidate’s own opinion of the effectiveness of his/her advising.
5. Advising of master’s and PhD candidates.
6. Innovations or special methods used by the candidate in his/her teaching.

Additional documentation as appropriate to the candidate’s teaching role may be included such as:

- Role in curriculum and program development.
- Description of steps taken to improve teaching effectiveness.
- Documentation and description of departmental and interdepartmental activities involving curriculum and program development.
- Evidence of effectiveness in mentoring junior faculty on their teaching.
- Description of curricular revisions, or revisions in other forms of teaching. This may include new course projects, materials, class assignments, or other activities.
- Evidence that teaching methods and course content are peer-reviewed periodically. Peer review may be conducted by CHHS senior faculty and/or outside experts, including faculty or staff associated with the UNH Teaching Excellence Program. Peer review may include summaries of classroom visitations, written reviews of course syllabi and other course materials, and evaluation of the candidate’s analysis and responsiveness to students’ evaluations of teaching.
• Publications (refereed articles, monographs, textbooks, and/or chapters in books), presentations, and/or other means by which the candidate has disseminated information related to teaching effectiveness and the pedagogy of teaching.
• Contributions to or editing for a professional journal on teaching in the candidate’s discipline.
• Grants to support instructional activities, including pre-service and in-service personnel preparation grants.
• Documentation of awards and other forms of special recognition for excellence in teaching.

SERVICE
This section applies to clinical faculty for whom service is an aspect of his or her position. Service includes: contributions to the university (including college and department), to one's profession, and to the community at large through public service and outreach. *Service to the university* refers to positions assumed by the clinical faculty member in the department (and/or program option), college, university, or the University System of New Hampshire. *Service to the profession* refers to activities such as holding leadership positions in professional organizations, serving on editorial boards or as journal reviewers, serving on state, national, or international boards, commissions, review panels, etc. As rank increases, there should be commensurate changes in the quantity and quality of service to the profession. For example, candidates for clinical professor may serve as members of professional committees or they may assume leadership positions in state, regional, national, or international chapters of their professional organizations. *Public service and outreach* refer to serving the community at large in a professional capacity, enhancing the stature of the college and university while making contributions to the work of agencies and organizations. Activities may involve working with national, state, or local communities, and may require the candidate’s expertise in assessing problems, assuring the delivery of services, developing policies, and planning, implementing, or evaluating the effectiveness of programs. Scholarship related to service may include presentations and publications related to service activities that extend the knowledge gained to others in the profession or the community.

Promotion to clinical associate professor will be based on demonstrated excellence in service reflecting increased leadership in the department, college, university, profession, and community. Promotion to the rank of clinical professor will be based upon the candidate’s sustained record of excellence in service since promotion to the rank of clinical associate professor with demonstration of increased influence through scholarship and/or leadership across these domains.

DOCUMENTATION OF SERVICE
The College of Health and Human Services values service to the university, profession, and community. As stated earlier in this document, service expectations may vary depending upon the clinical faculty member’s prescribed role. To the extent that service is a role expectation, as rank increases, the quantity, quality, and scope of service are expected to increase. Service activities should be documented as follows:
1. The candidate’s own opinion of the significance and success of his/her service activities.
2. Activities in support of the University’s land-grand and sea-grant, space-grant and other public service missions.
3. Departmental committees on which the candidate has served.
4. University, school, or college and other committees on which the candidate has served.
5. Other departmental responsibilities assumed by the faculty member.
6. The candidate’s contribution to scholarly and professional organizations.

Additional documentation may be provided as appropriate to the clinical faculty member’s role such as:

- Documents or data that describe clinical or professional leadership activities including but not limited to public health initiatives; brochures; health education materials; data to support health care, public policy, or clinical initiatives; and book or journal reviews.
- List of professional organizations to which the candidate has provided leadership, clinical expertise, or served as a consultant.
- Evidence the activities involved or resulted in the creation or development of new health and human service systems.
- Evidence the activities have contributed to the teaching or clinical activities of the faculty member and/or department. For instance, teaching may be directed at practice issues such as assessing health and human service problems, assuring the delivery of services, or developing health and human service policies.
- Evidence of teaching contributions linking classroom activities with health and human services agencies or needs. For example, a classroom assignment resulting in social benefit.
- Evidence of new knowledge, methods, or policies derived from the candidate’s service has diffused to other communities or health and human services agencies.
- Evidence of new practice ideas, policies, programs, or methods having been disseminated through publications. In addition to journal articles, publication can mean producing technical reports used by health and human service agencies and/or communities to help them assess problems, assure the delivery of services, or develop related policies.
- List of honors or awards in recognition of outstanding contributions to health and human service practices.
- List of invitations from other institutions or health agencies to help plan, organize, or review health and human service practice activities.
- List of appointments to national commissions, committees, and boards that are related to health and human service practices.
- List and description of grants and contracts received to fund health and human service practice activities.
Appendix A
Sample Letter: Teaching and Clinical Activities (Student)

Dear UNH Student and Alumnus:

I am writing to ask your assistance in an important matter. The University of New Hampshire is currently considering the promotion of Professor X to the rank of clinical associate professor. As you may know, decisions about promotion are among the most significant in the life of a university and its faculty.

During your education at UNH, Professor X was an instructor in one or more of your courses or was involved in one or more of your clinical experiences. In order to give her candidacy the fullest consideration, we would appreciate your comments about her teaching ability, particularly her ability to present course material effectively and help you attain course objectives. If you were involved with Professor X in any clinically-related activities such as planning of internships or practica, supervision of work in a practice setting, etc. please comment on the skill with which Professor X fulfilled this role. If you have graduated from UNH, we would also appreciate your comments on how Professor X’s teaching and/or clinical activities helped in your professional preparation. Finally, if Professor X has served as your academic advisor or thesis advisor, please comment on her effectiveness in these capacities.

I hope that you will be able to assist us by sending a letter to me at the address listed below. We will need to receive your letter as soon as possible, but please respond before November 1.

Under normal circumstances, your evaluation will not be shared with the candidate. Your letter will be forwarded as part of the candidate’s materials for review by the College Promotion Committee. If the candidate initiates a legal challenge, then it is possible that your evaluation will be made available to the candidate and this person’s attorney.

Your candid and detailed opinion is most important to us and to Professor X. Thank you in advance for your consideration of this request.

Sincerely,
Appendix B
Evaluation of Clinical Activities (External)

Dr. ______
Address

Dear Dr. ____________

Professor X is seeking promotion to the rank of clinical associate professor. In accordance with department and university policy, we are now evaluating his clinical activities. Because he listed you as someone who worked with him in a clinical capacity either via direct service, supervision of students, or clinically-based research, I am writing to ask if you would send a letter evaluating his work in your setting.

If you agree, please address only the strengths and weaknesses of the candidate’s involvement in your setting. We ask you not to comment on whether or not he deserves promotion. Under normal circumstances, your evaluation will not be shared with the candidate. Your letter will be forwarded as part of the candidate’s materials for review by the College Committee for Promotion of Clinical Faculty. If the candidate initiates a legal challenge, then it is possible that your evaluation will be made available to the candidate and this person’s attorney.

I hope that you will be able to assist us by sending a letter to me at the address listed below. We will need to receive your letter as soon as possible, but please respond before November 1. Thank you for your help in this important process.

Sincerely,

Dr. X
Title and Address
Appendix C
Sample Letter: Evaluation of Service

Dr. ______
Address

Dear Dr. ____________

Professor xxx is seeking promotion to the rank of clinical associate professor. In accordance with department and university policy, we are now evaluating his clinical activities, teaching, and service. Because he listed you as someone who worked with him on a committee or project, I am writing to ask if you would send a letter addressing his work on the ________ Committee.

If you agree, please address only the strengths and weaknesses of the candidate’s involvement or leadership. We ask you not to comment on whether or not he deserves promotion. Under normal circumstances, your evaluation will not be shared with the candidate. Your letter will be forwarded as part of the candidate’s materials for review by the school and university promotion and tenure committees. If the candidate initiates a legal challenge, then it is possible that your evaluation will be made available to the candidate and this person’s attorney.

I hope that you will be able to assist us by sending a letter to me at the address listed below. We will need to receive your letter as soon as possible, but please respond before November 1. Thank you for your help in this important process.

Sincerely,

Dr. X,
Title and Address
Appendix D
Sample Letter: Evaluation of Scholarship (Clinical Activities, Teaching and/or Service)

NOTE: This is a generic letter that should be customized by the Promotion Committee to evaluate the particular scholarly contributions of the candidate. The letter should be sent to individuals (internal or external) who are familiar with the candidate’s scholarly contributions to the field. In regard to presentations, if PowerPoint documents or handouts are available, these should be sent to the reviewers. Publications should be sent for review. The Promotion Committee should develop a process for selection of reviewers that includes suggestions made by the candidate and by the committee. This process should be explained in the document. Reviewers may include the following: collaborators, professional colleagues familiar with the candidate’s work (internal or external), and/or people who have attended the candidate’s presentations.

Dear:

Thank you for agreeing to serve as a reviewer for the Department of X’s Promotion, Committee in its consideration of Assistant Professor X for promotion to the rank of clinical associate professor.

I have enclosed a copy of X’s vita, publications, and other papers that represent his/her scholarship related to [insert appropriate area: clinical practice, teaching and/or service]. The Committee would appreciate your assessment of X’s scholarship and its contribution to the field of X in relation to the advancement of knowledge in [insert clinical practice or teaching]. In addition, we would welcome your comments on other aspects of the candidate's work with which you have first-hand knowledge, such as teaching or professional service.

It is our intention to keep your response confidential which means only those with direct responsibility for the promotion process will see your letter. However, you should understand that the University policies allow candidates to know whose evaluations were solicited during the promotion and tenure process. Additionally, under recent legal precedents we, like any other college or university, may be required to disclose your evaluation along with other peer evaluation materials in the course of certain legal proceedings.

We will need your letter by no later than X. If for any reason you are unable to meet this deadline, please notify us to that effect. Thank you for your willingness to serve as a reviewer. Please do not hesitate to call or e-mail me if you have any questions.

Sincerely,

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Appendix E
Timeline

It is the responsibility of the department chairperson to inform the faculty member of the time
deadlines associated with the promotion and tenure process. The department chairperson and the
faculty member under review will determine their own schedule to meet the following deadlines:

December 15: The chairperson transmits to the dean an independent recommendation, along
with the recommendation of the department Promotion and Tenure committee. The chairperson
also informs the candidate of these recommendations in writing.

January 15: The CHHS Promotion of Clinical Faculty Committee submits its report and
recommendations to the Dean. The Dean’s Office sends this recommendation, along with the
corresponding promotion documents, to the Graduate School Dean if the candidate is, or will be,
a member of the Graduate Faculty.

February 10: The CHHS Dean transmits a recommendation, as well as that of the CHHS
Committee on Promotion of Clinical Faculty and the Graduate School Dean (if required) to the
Provost and Vice President for Academic Affairs. The candidate, department chairperson,
department promotion, and tenure committee, and the CHHS Promotion of Clinical Faculty
Committee will be informed of these recommendations in writing. If the dean’s recommendation
is negative, the statement will outline the basis for that recommendation.

March/April: The provost makes a recommendation and informs the candidate’s dean. At this
point, the dean is responsible for assuring that each faculty member who is denied is made aware
of his or her right to request a review.

May/June: The president’s recommendations are forwarded to the Academic Affairs Committee
of the USNH Board of Trustees.