Guidelines for Appointment and Promotion of Adjunct Faculty
Department of Pediatrics
University of Minnesota Medical School

Introduction
Adjunct faculty are vital to fulfilling the educational mission of the Department of Pediatrics within the University of Minnesota Medical School. The overwhelming majority of adjunct faculty members are physician educators who teach medical students and residents while providing ambulatory care in their private practice settings to pediatric patients and/or in hospitals where teaching of inpatient and ambulatory pediatric care occurs. There are also research adjunct faculty who primarily are involved in research and whose roles are different than most adjunct faculty.

Adjunct Faculty Types
- **Type “A”:**
  - External research adjunct faculty in local industry, external adjunct faculty at other academic institutions who collaborate with Medical School faculty, or external adjunct faculty who work for local and state government agencies.

- **Type “B”:**
  - Internal adjunct faculty who hold an appointment at the University of Minnesota, but outside of the Medical School

For these two types of appointments (Types A and B), titles will be:
- Adjunct Assistant Professor
- Adjunct Associate Professor
- Adjunct Professor

Faculty members should use the full modified title on business cards, stationary, etc., and must always use the “Adjunct” modifier.

- **Type “U”:**
  - Clinical adjunct faculty, who are primarily educators in community private practice settings. Type “U” adjunct titles will have the “Clinical” modifier before the rank:
    - [Adjunct] Clinical Assistant Professor
    - [Adjunct] Clinical Associate Professor
    - [Adjunct] Clinical Professor

Faculty members may omit the term “Adjunct” on business cards, stationary, etc., but must always use the “Clinical Modifier.”
Adjunct Faculty Committee (Committee)
An Adjunct Faculty Committee has been established within the Department of Pediatrics. This Committee is under the supervision of and reports to the Department Head. Committee Co-chairs will be a faculty member (clinical scholar/teaching track or tenured/tenure track) in the Department of Pediatrics at the University of Minnesota Medical School and an adjunct faculty member practicing in a clinic and/or community hospital. Committee members will include faculty members practicing at the University Of Minnesota Amplatz Children’s Hospital (UMACH), representatives from various clinical practices, and representatives from hospitals within the Twin Cities. The responsibilities of the Committee include the following:

• Review all adjunct faculty applications for appointment and promotion with a recommendation forwarded to the Department Head for approval with subsequent submission to the Associate Dean for Faculty Affairs in the Medical School for approval.
• Maintain a database of adjunct faculty members with their contributions (usually educational) to the Department.
• Communicate with Adjunct Faculty (email will be the recognized form of communication) about Departmental information and adjunct faculty status.
• Notify adjunct faculty who have been appointed, renewed, promoted, or dismissed.
• Coordinate activities to recognize adjunct faculty for their teaching efforts.

Initial Appointments of Adjunct Faculty
• The initial request for appointment as an adjunct faculty member will be submitted to and reviewed by the Committee.
• Each provider (term used for purposes of this document) requesting appointment must possess an MD, DO, PhD, or equivalent degree from an accredited medical or graduate school. Each individual requesting an appointment will be board certified or is to be board certified in Pediatrics or involved in specific research or advocacy projects related to children.
  • A provider who is requesting appointment and is board certified or who is to be certified in another specialty (e.g. family medicine, pediatric surgery, or pediatric otolaryngology) will be reviewed by the Committee. In most instances, that provider will be asked to be appointed as an adjunct faculty member in his/her primary department.
    ▪ A joint appointment in Pediatrics as a secondary department will be encouraged by the Committee but the primary department will be responsible for performance reviews (with input from the secondary department as indicated) and costs.
• Each provider applying for appointment will demonstrate high ethical and uncompromised professional standing.
• Each provider applying for an appointment will complete the linked application form (Pending) documenting his/her interest/experience, clinical care responsibilities, and teaching/research/advocacy activities and will include a CV for review (see information for CV ). Specifically, each applicant must provide information about how he/she plans to be involved in the teaching of
pediatric care to medical students, residents, fellows and/or other health care professionals. If that person does not plan to be involved in teaching, the Committee will review the individual’s request with respect to involvement in the care of children through advocacy or research investigations.

- Most physician providers applying for an adjunct faculty appointment will be appointed at the adjunct/clinical assistant professor rank.
  - Consideration for initial appointment as an adjunct/clinical associate professor will require the following:
    - Superior achievement in at least one of the five General Education Focus Areas (see below)
    - Demonstrated evidence of a sustained commitment to the teaching mission of the Department of Pediatrics and evidence of a sustained commitment to the teaching mission of the Department of Pediatrics and evidence of high quality teaching through peer and learner evaluations.
    - Recognition locally and regionally in the practice of pediatrics and in educational and/or research/advocacy activities related to children.
    - Ongoing interest and ability in direct teaching, advising and mentoring, development of instructional materials, and/or learning assessment.
  - Consideration for initial appointment as an adjunct/clinical professor will include the following:
    - Superior achievement in at least two of the five General Education Focus Areas (see below)
    - Continued meeting of criteria outlined for adjunct/clinical associate professor including a sustained and significant contribution to the teaching mission of the Department of Pediatrics.
    - National recognition in the practice of pediatrics and in educational, and/or research/advocacy activities for children.
    - Leadership roles in clinical care, teaching, and/or research/advocacy nationally.
    - Identification as a role model/teacher in education by learners, colleagues, and peers.
  - Initial assignment of adjunct clinical associate professor or full professor rank will require approval by the Adjunct Faculty Committee that will then forward its recommendation with vote to a task force composed of the Chairs – Co-Chair of the Adjunct Faculty Committee, the Clinical Scholar/teaching track Committee and the Promotion Committee of the Department for review and approval. This task force will forward a recommendation to the Head of the Department of Pediatrics. A faculty vote is NOT required. Final approval remains with the Department Head and the Associate Dean of Faculty Affairs within the Medical School. Human Resources within the Department will be responsible for all adjunct faculty entries, updates and non-renewals within People Soft.
Adjunct/clinical faculty members may omit the term “adjunct” but **MUST** always use “clinical” as a modifier to rank status.

**Information that must be included in the CV for adjunct faculty appointments (link)**

**Personal Data:**
- Name
- Education
  - Year, school, and degree for each
- Postdoctoral/residency/fellowship training
  - Dates and institutions
- Academic appointments—if applicable
  - Dates, rank (title) of all academic appointments, and institution
- Certification and licensure—if applicable
  - Year and type of certification, recertification
  - Dates for medical licenses by state
- Teaching and/or research activities
  - Dates, institutions, and types of activities
- Bibliography—if applicable

**Format:**
- Number the pages
- Number items in any list (for example: papers, presentations, etc.)

**Adjunct Faculty Appointments—General Criteria/Requirements**
- Adjunct/clinical faculty appointments will be for a maximum of *three years* (may be shorter) and are renewable contingent upon performance.
- Each adjunct/clinical faculty member will be reviewed *every other year* for reappointment. Reappointment requires demonstration of teaching of pediatrics to medical students, residents and/or other health care professionals on an annual basis, progress in research project and/or documented advocacy involvement if appropriate, and support of other departmental academic activities as requested.
  - Each adjunct/clinical faculty member will be asked to submit an activity form (see link to activity form) for review by the Committee every other year.
- Renewal/Continuation of appointment (see Table)
  - An *annual average of 100 hours* in teaching of pediatrics to:
    - Medical students
      - Pediatric Primary Care Clinic Selective
      - RPAP
      - Pediatric elective courses
      - Hospital Rounds
    - Residents
      - Continuity Clinic
      - Pediatric Electives
• Rounding

And/or

- An annual average of 2 medical students in the Physician and Patient III (PAP III) or newly created Essentials of Clinical Medicine (ECM) course

And/or

- An annual average of 100 hours for contributions (preparation, presentation) to pediatric education and/or teaching of pediatrics to family medicine or other specialty residents and/or allied health professionals (e.g. nurse practitioners, physician assistants).
  - This must be well documented and approved by the Committee.

And for those involved in research/advocacy (in addition to the teaching requirements outlined above)

- Documented evidence of progress in a research project including submission of at least one article to a peer reviewed journal or a submission of a review article and/or advocacy activities related to children.

o Renewal/Continuation of adjunct faculty appointments practicing in greater Minnesota will be discussed individually by the Committee if the above criteria cannot be met. Time allotment may be extended if there is insufficient opportunity for precepting by these adjunct faculty members. However, many adjunct faculty in Greater Minnesota teach pediatric care to residents in other specialties or to non physician clinicians.

• Probation, Non Renewal Status

  o If an adjunct/clinical faculty member has NOT participated in an average of 100 hours of teaching per year of a medical student(s) and/or resident(s)/fellow(s) or has NOT met the other criteria outlined above, that member will be asked to submit why there was a lack of involvement.
    - If there is no response by the adjunct faculty member within a three month time period, the adjunct faculty member’s appointment will NOT be renewed and that provider will need to reapply for adjunct faculty status.
    - The Committee will review the provider’s response to inactivity within three months and could recommend probationary status or non renewal to the Department Head.
      - If probationary status is granted, failure to satisfy minimum teaching requirements for the following year would result in automatic non renewal of the appointment.
      - The adjunct/clinical faculty member will be notified in writing of probationary and of non renewal status by the Committee after approval of either status by the Department Head.
      - Recommendation for termination of an adjunct faculty member will be discussed with and approved by the Department Head. An appointment may be terminated by
the Department Head or designee at any time based on unsatisfactory faculty performance.

- Exceptions to the annual (on average) requirement of teaching hours or other criteria may be made for health reasons including a medical leave for a specified period of time or for an unusual circumstance(s) preventing such teaching activities. A written request to the Committee must be submitted for review. If approved, the recommendation will be forwarded to the Department Head for approval. Such providers would remain in PeopleSoft and costs would apply unless terminated.

**Adjunct Faculty Promotion- Minimum Requirements**

- **General**
  - All faculty in the Department of Pediatrics are expected to make substantial contributions to the teaching mission of the Department; this is a prerequisite for considerations for promotions. Superior achievement in one (Associate Professor) or two (Professor) of the five General Education Focus areas outlined below is necessary for promotions of adjunct faculty. Both the quality and quantity of the accomplishments will be considered. Faculty must demonstrate professionalism in working on a team to care for patients or when performing research/advocacy and consistently serve as a role model for medical students, residents and fellows.

**Description of Measures of Superior Achievement in the Five General Education Focus Areas:**

**A. Research**

Individuals who choose research as their primary area of focus are expected to demonstrate research scholarship excellence with authorship on peer-reviewed papers describing original research.

*Examples of criteria for demonstrating superior achievement in research include:*

- Peer reviewed papers in prominent journals (first or last author positions are not necessary, but a unique, substantial and indispensable role in the project needs to be documented) – at least one for Adjunct Associate Professor, five for Adjunct Professor
- Serving as investigators on peer-reviewed research grants (not necessarily in the principle investigator role)
- Evidence of a key role in facilitating the research activity of a department or a constituency
- Development of new technology or patented discoveries
- Involvement in major roles in regional research or laboratory activities.
- Peer-reviewed and/or invited presentations at national meetings or other institutions
B. **Teaching**

Teaching involves communication of knowledge, the ability to inspire or stimulate students and the ability to translate difficult concepts into easily understood principles. Teaching activities may occur in a variety of educational settings and formats, including didactic presentations, lectures, seminars, conferences, tutorials, case discussions, grand rounds, hospital and clinic rounds, patient/community education, or continuing medical education. Teaching should involve consistent application of the six characteristics of scholarship: clear goals, adequate preparation, appropriate methods, achievement of goals, effective presentation, and reflective critique.

Those who seek promotion based on superior achievement in teaching must demonstrate scholarly accomplishments in teaching beyond that expected for all faculty members, both in quantity and quality.

*Examples of Criteria for Demonstrating Superior Achievement in Teaching*

- Use of a teaching portfolio which documents philosophy of teaching, goals, preparation and ongoing development.
- Outstanding evaluations by learners
- Letters from former learners about the value of their educational experience
- Teaching awards
- Being invited to serve as a visiting professor at other institutions
- Success of previous trainees (must demonstrate a significant role in their training)
- Peer-reviewed and/or invited publications or presentations regionally or nationally
- Invitation to serve as a board examiner in a medical specialty

* most common for adjunct faculty

C. **Applied Medical Science and Clinical Scholarship (Clinical Care)**

In addition to being superb clinicians (including excellence in outcomes of clinical activity such as morbidity/mortality, efficiency, and patient satisfaction compared to reference standards and attracting patients from a regional or national area), individuals who chose this as their academic focus area are expected to demonstrate their excellence in clinical scholarship. Faculty members are encouraged to maintain journals or portfolios which identify scholarly activities in sufficient detail to be recognized and evaluated by peers.

*Examples of Criteria for demonstrating superior Achievement in clinical scholarship include:*

- Leadership in development of clinical programs
- Devising new methods or treatments for patient care
- Participation in quality services, such as quality improvement
- Election to membership or leadership in prestigious professional societies or other recognition awards*
- Publication of original articles, reviews, best clinical practices, or educational offerings in peer-reviewed journals, chapters, textbooks, syllabi, education web-based programs, or videotapes*
- Leadership role in regional or national pediatric service organizations, national meetings, professional societies and credentialing/board certification committees*
- Participation in translational or multi-disciplinary research
- Serving as editor for journals or textbooks
- Invited presentations at national meetings or at other institutions
*Most common for adjunct faculty

D. **Publicly Engaged Scholarship**

Professional service, based on one’s academic expertise, is that provided to the medical profession on in partnership and collaboration with the local, state, national, or international community. Candidates who choose this as their area of focus must document that their activities exceed what most faculty members to in their routine professional capacity. The service must make a measureable, significant, and visible contribution to the lives of people in the community or the professional organization, over and above the individual’s clinical activity. Community projects involve community stakeholders as co-creators and collaborators, not just recipients of outreach services or consultation. It must be closely integrated into the traditional academic mission of clinical activity, teaching and research.

*Examples of criteria for demonstrating superior scholarly achievement in publically engaged scholarship include:*
- Success in obtaining external funding for a community project*
- Evidence of substantial leadership role in professional practice organizations or government policy agencies with a documented impact on organizational policy or practices*
- Election to membership or leadership in prestigious professional societies or other recognition awards*
- Evidence of a substantial leadership role in legislative work or public policy development*
- Documenting important project observations and/or impact in prominent journals, electronic media, or public service media activities
- Invited speeches regionally or nationally
- Evidence of substantial leadership role in community project development and maintenance, with community engagement
*Most common for adjunct faculty

E. **Educational Leadership/Administration**
Educational administrative leaders achieve desired outcomes which transform the institution. The type and scale of the projects, their relation to the academic mission, and the changes initiated are considered. 

Examples of criteria for demonstrating superior scholarly achievement in educational leadership/administration include:

- Outstanding evaluations by peers and collaborators *
- Creation of medical student/resident electives, including establishing educational objectives, defining the components of the program, and methods of assessment of the learner and in the program *
- Leadership in making programmatic changes that transform the academic and clinical enterprise*
- Demonstration of programmatic evaluation process *
- Demonstration of faculty/staff development *
- Dissemination of results of program/project*
- Project/plans/proposals utilized and sustained*
- Supervise a successful academic training program
- Peer –reviewed and/or invited publication or presentations locally or nationally on educational leadership

*Most common for adjunct faculty

- Promotion to Adjunct/Clinical Associate Professor
  - Evidence of continued participation in educational activities for medical students, residents and/or fellows in ONE or more of the following areas:
    - Direct teaching
    - Advising/mentoring
    - Learner assessment
    - Creation of educational materials (instructional and/or learner assessment materials)
  - Superior achievement in at least one of the five General Education Focus Areas (see above)
  - Accumulation of at least 600 hours of teaching at the adjunct assistant professor level and/or teaching of at least 12 PAP III (or ECM) students (see link to Table at the end of the guidelines).
  - Demonstrated evidence of excellent performance in teaching as assessed through peer, learner, and/or other team members’ (for example nurses, respiratory therapists) evaluations.
  - Participation in at least one committee within the Department of Pediatrics at the University of Minnesota Medical School, the Medical School, the Medical Society, or other appropriate local, regional, or national organization
    - Examples include: Departmental CME Committee, Adjunct Faculty Committee, Residency Selection Committee, Resident Review Committee, Curriculum Committee of the Medical School, Education Council of the Medical School, specific Advocacy
Committee, specific Research Committee, Grand Rounds Committee

- Presentation of two Grand Rounds, 3M conferences, and/or other educational conferences in the Department, Medical School, and/or at an affiliated hospital (Children’s Hospitals and Clinics, Hennepin County Medical Center, Gillette Children’s).
- Recognition for care of pediatric patients locally and regionally by peers and patients.
- Recognition of research or advocacy (when applicable) with publication of two papers in peer reviewed journals (research) or regional advocacy leadership (advocacy only).

- Promotion to Adjunct/Clinical Professor
  - Demonstrated leadership roles in clinical care, teaching, and/or research.
  - Superior achievement in at least TWO of the Five General Education Focus Areas (see above)
  - Identification as a role model/teacher by learners, colleagues, and peers, and as a leader in educational practices.
  - Recognition of high quality teaching and excellence in educational activities in one or more of the following areas:
    - Direct teaching
    - Mentoring/advising
    - Learner Assessment
    - Creation of educational materials (instructional and/or learner assessment materials)
  - Consistent evaluations by learners, other faculty members (as appropriate), and team members (e.g. registered nurses, respiratory therapists) reflecting at least excellent performance.
  - Presentation of at least five Grand Rounds, 3M conferences, and/or other educational conferences in the Department, Medical School, and/or affiliated hospital.
  - Participation in teaching activities amounting to at least 1000 hours as an adjunct assistant and associate professor and/or teaching of at least 20 PAP III (or ECM) students (see table).
  - Participation in at least two committees in the Department, Medical School, Medical Society, state legislature, or regional/national committee as an adjunct associate professor (see above-Promotion to Adjunct Associate Professor).
  - Evidence of national leadership in clinical care, education, and/or research/advocacy. Research would include publication of at least five articles in peer reviewed journals and child advocacy requires national recognition for leadership in the area (see also appropriate General Education Focus Areas above).

**Promotion Process for Adjunct Faculty**
• Completed promotion packets will be forwarded by the provider to the Committee by July 1 of the year preceding request for promotion. Promotion packets will consist of the following:
  o An updated curriculum vitae (see link)
    ▪ Relevant documentation of participation in teaching and departmental activities to meet criteria for promotion to the desired rank outlined in this document. Examples include: number of advisees (medical students, residents) evaluations, lectures presented, papers published, and service on committees.
  o Three letters of recommendation
    ▪ At least two should be from faculty members in the Department of Pediatrics or the Medical School including one from the appropriate division director.
• The Committee will review the above material and forward a recommendation with vote (if indicated) for adjunct faculty promotions to the Clinical Scholar/Teaching Track Committee of the Department of Pediatrics by January 1 of the year proposed for promotion. Departmental faculty vote is not needed.
• The Departmental Clinical Scholar/Teaching Track Committee will review the submitted information and forward a recommendation with vote to the Department Head for approval. The Department Head will forward a recommendation to the Associate Dean for Faculty Affairs in the University of Minnesota Medical School for final approval. Departmental faculty vote is NOT needed. Once approved, Human Resources within the Department will be responsible for modifying the individual’s PeopleSoft entry.

Other
• Each adjunct/clinical faculty member will adhere to the rules and regulations for the University of Minnesota set forth by the Board of Regents.
• Each adjunct/clinical faculty member will be registered in PeopleSoft.
• Each adjunct/clinical faculty member will receive the appropriate University of Minnesota benefits in accord with University Policies.
• Official method of communication between adjunct/clinical faculty members and the Department will be via email.
• Each adjunct/clinical faculty member may omit the term “adjunct” on titles/business cards/stationary but MUST always use the “clinical” modifier before rank.
• Faculty appointment (adjunct, affiliate, regular) is required for teaching of medical students (LCME requirement).
• Faculty appointment is strongly encouraged but not required for teaching of residents (as outlined by the ACGME).
### Table: PROPOSED CREDITS FOR PRECEPTOR ACTIVITIES

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>DESCRIPTION</th>
<th>PROPOSED HOURS PER PERIOD</th>
</tr>
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<tbody>
<tr>
<td><strong>Medical Students</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physician and Patient III (PAP III), Essentials of Clinical Medicine (ECM)</td>
<td>In the Physician &amp; Practice III (PAP III) or Essentials of Clinical Medicine(CME) course in the new 2010 curriculum, <strong>first and second year medical students</strong> spend two full day sessions learning a focused history and physical examination. PAP III is a medical student's first clinical exposure to pediatrics; thus, students will require extensive supervision and instruction</td>
<td>8 hours/student/year x 3= 24 hours (12 sessions per year) and/or teaching of at least two students in PAP III on average per year</td>
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<tr>
<td>Pediatric Primary Care Selective</td>
<td>Pediatric Primary Care Clinic Selective course, <strong>third and fourth year medical students</strong> spend four days a week for four weeks focusing on the emerging challenges of medical practice in the primary care setting, with an emphasis upon the science and principles of primary care pediatrics.</td>
<td>32 hours/week x 4 weeks= 128 hours/student/rotation</td>
</tr>
<tr>
<td>Electives*</td>
<td>Students spend time in electives at various inpatient/outpatient sites</td>
<td>40 hours/student/week (3-4)= 120-160 hours/student/rotation</td>
</tr>
<tr>
<td>Patient Care Rounds*</td>
<td>Inpatient rounds with team</td>
<td>3 hours/student/day (5)= 15 hours/week, 60 hours/4 week rotation</td>
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<tr>
<td><strong>Residents</strong></td>
<td></td>
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<tr>
<td>Resident Continuity Clinic</td>
<td>The Resident Continuity Clinic represents a three year (four year- Med Peds resident) commitment to precepting an individual resident for one half-day per week over the course of their residency. Although the time spent precepting is greater than in PAP III and PCC, residents are expected to function on an independent basis, especially as their education progresses.</td>
<td>4 hours/resident/week (45)= 180 hours/resident/year</td>
</tr>
<tr>
<td>Electives*</td>
<td>Residents spend time in electives at various inpatient/outpatient sites.</td>
<td>32 hours/resident/week (4)= 128 hours/resident/rotation</td>
</tr>
<tr>
<td>Patient Care Rounds*</td>
<td>Inpatient rounds with team</td>
<td>3 hours/resident/day (5)= 15 hours/week, 60 hours/4 week rotation</td>
</tr>
<tr>
<td>Other</td>
<td>Discretionary credits may be awarded by the Adjunct Faculty Committee for either faculty development or outstanding contributions to Pediatric education (i.e. research, papers, presentations, lectures, grand rounds, 3M, advocacy, etc.). Adjunct faculty members may also be awarded credits for other documented teaching activities (e.g. family practice residents and other allied health professionals) after Committee approval. Committee’s discretion- dependent on number of hours preparing or performing</td>
<td></td>
</tr>
</tbody>
</table>

*Adjunct/clinical faculty member who is primarily responsible for oversight including evaluations of the student/resident receives credit for teaching.

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