Non-tenure track faculty require evaluation in their designated area of excellence and a strong record of accomplishment in one additional area of review.

In the following sections, the examples of evidence of achievement provided for promotion to given ranks are neither comprehensive nor prescriptive but are meant to serve as examples of the levels of some common achievements. Candidates may report other achievements not specified in the guidelines. See also the Regular Faculty Promotion and Tenure Policy.

**EDUCATIONAL LEADERSHIP**

**Appointment/Promotion to Assistant Professor:** Typically, a non-tenure track assistant professor on the educator track has completed a doctoral or professional degree or equivalent and exhibits commitment to teaching, academics and scholarly or professional work of high caliber. Most will have just completed their residency/fellowship training or just received their terminal degree and completed a post-doctoral fellowship. They should have evidence of peer recognition reflected by a local reputation for success in teaching.

<table>
<thead>
<tr>
<th>Teaching Domains</th>
<th>Examples of Evidence of Achievement</th>
</tr>
</thead>
</table>
| **Didactic Teaching:**  
(e.g., lectures or small group teaching to house staff and students) | • Teaching/lecturing  
• Evaluations from learners and peers rated > 3 of 4 or > 4 of 5                                      |
| **Mentorship:**  
(e.g., mentor medical students and / or graduate students) | • Feedback from mentees demonstrated by letters of support  
• Simply listing learners to whom the applicant has been exposed does not constitute mentorship  
• Evidence of mentorship of more junior colleagues at this level is not required but is desirable |
| **Clinical Teaching:**  
(e.g., teaching in the clinic or hospital including bedside teaching, or teaching in the operating room) | • Evaluations from learners and peers rated > 3 of 4 or > 4 of 5 |

Revised April 2021
**Promotion to Associate Professor:** In general, promotion to Associate Professor requires 7 years in rank as Assistant Professor or outstanding achievement with extraordinary reasons for early promotion before 7 years. Developing peer recognition reflected by an emerging state-wide / regional reputation as a major contributor in education is expected.

<table>
<thead>
<tr>
<th>Teaching Domains</th>
<th>Examples of Evidence of Achievement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Didactic Teaching:</strong> (e.g., lectures, continuing medical education courses, grand rounds, professional development programs, seminars, tutorials)</td>
<td>• Teaching/lecturing state-wide or regionally about issues related to education&lt;br&gt;• Evaluations from learners and peers consistently rated high (i.e. &gt; 3 of 4 or &gt; 4 of 5)&lt;br&gt;• Participating in Peer Observation of Teaching to continuously improve teaching skills</td>
</tr>
<tr>
<td><strong>Mentorship:</strong> (e.g., mentor for medical student, graduate student, resident, clinical or postdoctoral research fellow or junior faculty projects; service as graduate student thesis advisor or committee member)</td>
<td>• Number of mentees upon whom the candidate had a major influence and the nature of that influence&lt;br&gt;• Publications and presentations with mentees while in rank&lt;br&gt;• Feedback from mentees demonstrated by letters of support&lt;br&gt;• Simply listing learners to whom the applicant has been exposed does not constitute mentorship</td>
</tr>
<tr>
<td><strong>Clinical Teaching:</strong> (e.g., teaching in the clinic or hospital including bedside teaching, teaching in the operating room, preceptor in clinic)</td>
<td>• Evaluations from learners and peers consistently rated high (i.e. &gt; 3 of 4 or &gt; 4 of 5)&lt;br&gt;• Participating in Peer Observation of Teaching to continuously improve teaching skills</td>
</tr>
<tr>
<td><strong>Administrative Leadership:</strong> (e.g., clerkship, residency or fellowship director or associate director, educational experience leads, course or seminar co-director or director)</td>
<td>• Evaluations and success of course(s) or program(s) for which candidate was a leader with consistently high ratings (i.e. &gt; 3 of 4 or &gt; 4 of 5)&lt;br&gt;• Service on educational committees&lt;br&gt;• Maintenance of accreditation (if applicable)&lt;br&gt;• Board certification pass rates (for residents and fellows, where available)</td>
</tr>
</tbody>
</table>
| Recognition as an Expert in Teaching: | • Invitations to speak state-wide or regionally about education  
• Leadership role in state-wide or regional courses or workshops related to education  
• Local leadership role in education  
• Service on state-wide or regional committees developing guidelines and policies for education/training programs  
• Awards for teaching or mentoring from sources other than the candidate’s department |
| Scholarship:  
(e.g., contributes to the development, dissemination, and translation of health professions education knowledge and practices) | • Publication or dissemination of educational material in print or other media with regional adoption; includes syllabi, curricula, videos, web-based training modules or courses, and/or technologies (e.g., simulation); may also include development of educational methods, policy statements, and/or assessment tools as well as state-wide or regional presentations  
• Publications are encouraged and often serve as strong objective evidence of substantive contribution, but are not required. May have 1 to 3 publications in peer-reviewed journals, usually within their clinical specialty, but a key to their value is an assessment of their scholarly impact, based on various objective measures  
• Service as peer reviewer and editorial board member for relevant journals or publications  
• Development of new or substantially revised courses and curricula  
• Innovative teaching materials/strategies  
• Projects funded by external or internal grants to support instructional activities  
• Technical, procedural or practical innovations made clinically or professionally  
• Publication of textbooks or teaching materials |
**Promotion to Professor:** In general, promotion to Professor requires 7 years in rank as Associate Professor or outstanding achievement with extraordinary reasons for early promotion before 7 years. Established peer recognition derived from an emerging national / international reputation as a leader in education is expected.

<table>
<thead>
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<th>Teaching Domains</th>
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</table>
| **Didactic Teaching:**  
(e.g., lectures, continuing medical education courses, grand rounds, professional development programs, seminars, tutorials) | - Innovation in classroom teaching methods with adoption locally, regionally and nationally  
- Recognition for teaching/lecturing (e.g., invited lectures, keynote addresses, awards from national organizations dedicated to medical education).  
- Evaluations from learners and peers consistently high (i.e. > 3.4 of 4 or > 4.5 of 5)  
- Participating in Peer Observation of Teaching to continuously improve teaching skills (peers rate their teaching > 4 on a 5-point scale) |
| **Mentorship:**  
(e.g., mentor for medical student, graduate student, resident, clinical or postdoctoral research fellow or junior faculty projects; service as graduate student thesis advisor or committee member) | - Increasing number and stature of mentees upon whom the candidate had a major influence; stature may be assessed by mentees’ academic rank, publications, funding, awards, and academic institution  
- Publications with mentees  
- Feedback from mentees demonstrated by letter(s) of support  
- Documentation of mentees’ current roles  
- Simply listing learners to whom the applicant has been exposed does not constitute mentorship |
| **Clinical Teaching:**  
(e.g., teaching in the clinic or hospital including bedside teaching, teaching in the operating room, preceptor in clinic) | - Clinical teaching evaluations consistently rated high (i.e. > 3.4 of 4 or > 4.5 of 5)  
- Regional and national awards for teaching  
- Participating in Peer Observation of Teaching to continuously improve teaching skills (peers rate their teaching > 4 on a 5-point scale) |
| Administrative Leadership Role: (e.g., clerkship, residency or fellowship co-director or director, course or seminar co-director or director) | • Evaluations and success of course(s) and or program(s) for which candidate was a leader with consistently high ratings (i.e. > 3.4 of 4 or > 4.5 of 5)  
• Maintenance of program accreditation (if applicable)  
• Board certification pass rates (for residents and fellows, where available)  
• Leadership role in a professional society focused on education |
| --- | --- |
| Recognition as an Expert in Teaching: | • Invitations to speak nationally and, in some cases, internationally about education  
• Leadership role in national and, in some cases, international courses related to education  
• Regional and national leadership roles in education  
• Service on regional and national committees developing guidelines and policies for education/training programs  
• Service on regional and national committees evaluating education/training programs or reviewing grant proposals related to education  
• Extramural funding to conduct educational research or to develop educational materials, methods, assessment tools or programs  
• Awards for teaching or mentoring from sources other than the candidate’s department or school |
**Scholarship:**

- Contributes to the development, dissemination, and translation of health professions education knowledge and practices
- Publication or dissemination of educational material in print or other media with national and, in some cases, international adoption; includes syllabi, curricula, videos, web-based training modules or courses, and/or technologies (e.g., simulation); may also include development of educational methods, policy statements, and/or assessment tools as well as national presentations
- Publications are encouraged and often serve as strong objective evidence of substantive contribution but are not required. Typically has 5 to 10 publications in peer-reviewed journals, usually within their clinical specialty, but a key to their value is an assessment of their scholarly impact, based on various objective measures; this is not a firm requirement
- Development of new or substantially revised courses and curricula
- Sustained track record for collaborating with colleagues to design and deliver courses and workshops
- Ongoing creation of innovative teaching materials/strategies
- Educational research projects resulting in findings disseminated at professional conferences and/or in peer-reviewed publications
- A record of projects funded by external or internal grants to support instructional activities
- Publication of textbooks or teaching materials.
**CLINICAL EXPERTISE**

**Appointment/Promotion to Assistant Professor:** Typically, a non-tenure track assistant professor on the clinical track is an MD, DO or other healthcare provider with a terminal degree who has distinguished themselves clinically with their primary responsibility delivering high quality patient care. Most will have just completed their residency/fellowship training or just received their terminal degree and completed a post-doctoral fellowship. In addition to providing clinical care, they are engaged in clinical settings with students. The teaching, supervising, and mentoring provided by clinical faculty is directly related to the practicum of the students’ programs.

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<tr>
<th>Clinical Domains</th>
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<tbody>
<tr>
<td><strong>Clinical:</strong></td>
<td>- Demonstrates evidence of clinical excellence through quality metrics</td>
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<td>(e.g., emerging recognition as a gifted clinician)</td>
<td>- Collaboration across medical disciplines during their residency training</td>
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<td></td>
<td>- Attestation by peers as to the quality of contributions to clinical practice</td>
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<tr>
<td><strong>Educator:</strong></td>
<td>- Recognized as an excellent bedside teacher and clinician as provided by learner and peer feedback</td>
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<tr>
<td><strong>Mentorship:</strong></td>
<td>- Demonstrates ability in mentoring trainees (medical students, residents, and fellows)</td>
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<td></td>
<td>- Mentorship of clinical learners</td>
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<td>- Letters of support from mentees or references will be solicited from mentees</td>
</tr>
<tr>
<td></td>
<td>- Simply listing learners to whom the applicant has been exposed does not constitute mentorship</td>
</tr>
</tbody>
</table>
Promotion to Associate Professor: In general, promotion to Associate Professor requires 7 years in rank as Assistant Professor or outstanding achievement with extraordinary reasons for early promotion before 7 years. Developing peer recognition reflected by an emerging state-wide / regional reputation as a major contributor in the field is expected, with evidence as well as recognition as an expert and demonstration of scholarship related to an area of clinical expertise. Must have evidence of contributions to clinical practice and/or policies that measurably improved the quality and value of patient outcomes.

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<tbody>
<tr>
<td><strong>Clinical:</strong></td>
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</table>
| (e.g., state-wide and/or regional recognition as a clinical expert as evidenced by reputation, quality metrics and referrals.) | • Demonstrates evidence of clinical excellence through quality metrics  
• Evidence of referrals, if a sub-specialist, from a wide region as appropriate for specialty.  
• Collaboration across medical disciplines  
• Development of new clinical approaches and innovation in specialty that peers have recognized  
• Leadership in developing local, state-wide or regional symposia related to their area of clinical expertise  
• Recognition for sustained Involvement in hospital or clinic committees/task forces related to clinical care in area of expertise  
• Attestation by peers as to the quality of contributions to clinical practice  
• Documentation of outcome measurement and attainment compared with peers, incorporation of outcomes into clinical care improvement in areas of clinical expertise |
| **Educator:**    |                                     |
|                  | • Recognized as an excellent bedside teacher and clinician as provided by learner and peer feedback  
• Supports the development, implementation or administration of curricular/instructional materials and activities  
• Participates in and leads department educational activities |
| Mentorship:                                                     | • Demonstrates excellence in mentoring trainees (junior faculty, medical students, residents, and fellows)  
|                                                             | • Involvement in local, state-wide or regional mentoring programs  
|                                                             | • Stature of mentees upon whom the candidate had a major influence; stature may be assessed by mentees’ academic rank, publications, funding and awards  
|                                                             | • Mentorship of clinical learners  
|                                                             | • Letters of support from mentees or references will be solicited from mentees  
|                                                             | • Simply listing learners to whom the applicant has been exposed does not constitute mentorship  
| Scholarship:                                                  | • Disseminates knowledge through invited presentations, state of the art reviews, authorship/editorship of textbooks, chapters in standard texts, original research or case reports, etc. Typically, faculty at this rank may have one to 3 publications generally with their mentees, but a key to their value is an assessment of their scholarly impact based on various objective measures; scholarship is required but peer reviewed manuscripts are not  
|                                                             | • Creates and launches effective clinical quality improvement with state-wide or regional adoption including protocols for clinical care  
|                                                             | • Some may have established excellence in teaching through educational scholarship; examples may include teaching portfolio scores, teaching awards, book chapters, web-based teaching materials, educational innovations, etc.  
| Service/Leadership:                                          | • Participates in and leads local, institutional, state-wide and regional organizations, programs and committees  
|                                                             | • Assumes leadership roles in professional organizations  
|                                                             | • Demonstrates significant contributions and service to the department, institution and/or community that contributes to the greater good of Dell Med or UT Health Austin  |
**Promotion to Professor:** In general, promotion to Professor requires 7 years in rank as Associate Professor or outstanding achievement with extraordinary reasons for early promotion before 7 years. Established peer recognition derived from an emerging national / international reputation as a leader in the field is expected, with evidence as well as recognition as an expert with leadership roles and scholarship related to an area of clinical expertise.

<table>
<thead>
<tr>
<th>Clinical Domains</th>
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</table>
| **Clinical:**    | • Demonstrates evidence of status as pre-eminent clinician  
                   • Demonstrates clinical excellence through outside references, quality metrics, peer review, outcome measures, patient satisfaction indices, etc.  
                   • Service as a consultant to outside entities on issues related to area of clinical expertise  
                   • Shows evidence of referrals from a multi-state region and national sources as appropriate for specialty  
                   • Demonstrates other evidence and measures, which may include service on national guideline setting panels  
                   • Demonstrates leadership across medical disciplines  
                   • Develops and disseminates new approaches in innovation and adaptation of clinical methods  
                   • Serves as outstanding role model for students, residents, fellows and other faculty  
                   • Record of invitations from national and, in some cases, international entities to present topics related to and in recognition of the candidate’s clinical expertise |
| **Educator:**    | • Establishes a record of accomplishment for developing new educational instruments to be delivered in clinical settings  
                   • Establishes and demonstrates leadership in the implementation or administration of curricular/instructional materials and activities in clinical settings  
                   • Provides effective leadership in department educational activities |
| **Mentorship:**  | • Demonstrates excellence in mentoring trainees (junior and mid-career faculty, medical students, residents, and fellows) |
- Stature of mentees upon whom the candidate had a major influence; stature may be assessed by mentees’ academic rank, publications, funding and awards
- References will be solicited from mentees
- Simply listing learners to whom the applicant has been exposed does not constitute mentorship

**Scholarship:**

- Disseminates knowledge through lectureships, invited state of the art reviews, authorship/editorship of textbooks, chapters in standard texts, original research or case reports, etc.
- Creates and launches effective clinical quality improvement with regional, national and sometimes international adoption including protocols for clinical care
- Shows a record of scholarship that increases throughout career. Faculty at this rank may have 5 to 10 publications, or other evidence of scholarly productivity as outlined above; a key to their value is an assessment of their scholarly impact, based on various objective measures

**Service/Leadership:**

- Demonstrates clear recognition as a leader in the institution
- Assumes leadership roles in professional organizations
- Demonstrates leadership and participation in national and international organizations, programs and committees
- Demonstrates major contributions to administrative department, institution and/or community that contribute to the greater good of Dell Med or UT Health Austin, i.e. development of internal practice guidelines, quality and/or safety activities and compliance and/or resource utilization that peers outside of the institution have recognized for their value
INVESTIGATION AND INQUIRY

**Appointment/Promotion to Assistant Professor:** Typically, a non-tenure assistant professor on the investigation and inquiry track is entering the Dell Med faculty with the vast majority of their time devoted to research. Research includes any of the following: Basic research; Clinical research and/or laboratory or clinically based translational research; Qualitative, quantitative or social science research such as epidemiology, outcomes and health services research, and biostatistics as well as research in social sciences, ethics, bioinformatics and health economics, among others; or Development of new methods/technologies and/or novel applications of existing methods/technologies. Most commonly, these faculty will have PhD degrees and recently completed a post-doctoral research program, but MDs, MD-PhDs, and others with terminal degrees may be considered. They should have some preliminary evidence of research success.

<table>
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<tr>
<th>Research Domains</th>
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</thead>
</table>
| **Research:**     | • Demonstrated experience in a research environment  
|                   | • Evidence of additional training in research techniques  
|                   | • Evidence of collaboration in research labs/projects  |
| **Publications:** | • 1-3 publications or presentations of research work at local, regional, or national meetings; first or last authorship is not required  |
| **Grants:**       | • Experience with soliciting extramural funding is desirable but not required  |
| **Educational Activities:** | • Evidence for teaching learners during the candidate’s graduate training  |

**Promotion to Associate Professor:** In general, promotion to Associate Professor requires 7 years in rank as Assistant Professor or outstanding achievement with extraordinary reasons for early promotion before 7 years. Developing peer recognition reflected by an emerging regional / national reputation as a major contributor in the field is expected.
<table>
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<tr>
<th>Research Domains</th>
<th>Examples of Evidence of Achievement</th>
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</thead>
</table>
| **Research:**    | • Significant progress towards a national reputation as a researcher and collaborator especially as demonstrated by scholarship and publications  
|                   | • Invitations to speak regionally and nationally about research topics related to their field  
|                   | • Service on editorial boards of recognized scientific journals or as a regular peer reviewer to journals in area of expertise  
|                   | • Membership on institution research-related committees such as the human or animal subjects committee  
|                   | • Service on national committees related to research including grant review panels such as NIH study sections, FDA and other expert panels, and data and safety monitoring boards for clinical trials  
|                   | • Role in planning sessions for scientific societies regionally or nationally  
|                   | • Faculty oversight role in an institutional research core  
|                   | • National awards for research and/or innovation  
<p>| <strong>Publications:</strong>| • Faculty at this rank frequently have a minimum of 15 publications in peer-reviewed journals or peer-reviewed conference proceedings that are publicly available. At least five of these publications should be first or senior author publications in the candidate’s discipline, or should be publications where the role and creative contributions of the faculty member were demonstrably critical. A key to their value is an assessment of their scholarly impact, based on various objective measures. As appropriate, the development and dissemination of intellectual properties may also be considered. |</p>
<table>
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<tr>
<th>Grants:</th>
<th>• Demonstrated success obtaining external funding to support the research as either PI, CO-PI, or coinvestigator to support the research effort in their specific research area, and a strong likelihood of sustained funding at that level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational Activities:</td>
<td>• Effective mentoring of graduate and medical students, postdoctoral fellows, house staff, and clinical fellows is viewed positively, as will invitations to present topic workshops at regional and national professional meetings; local and national recognition for teaching through awards is also considered</td>
</tr>
</tbody>
</table>
| Mentorship: | • Demonstrates excellence in mentoring trainees (junior and mid-career faculty, medical students, residents, and fellows)  
• Stature of mentees upon whom the candidate had a major influence; stature may be assessed by mentees’ academic rank, publications, funding and awards  
• References will be solicited from mentees  
• Simply listing learners to whom the applicant has been exposed does not constitute mentorship |

**Promotion to Professor:** In general, promotion to Professor requires 7 years in rank as Associate Professor or outstanding achievement with extraordinary reasons for early promotion before 7 years. Established peer recognition derived from a national / emerging international reputation as an influential scientist in the field is expected. Team science is valued by the University, and in addition to principal investigator, non-tenure track Professor research examples may include seminal contributions to teams conducting high impact investigation. Successful candidates for promotion to Professor need to meet most all of the examples described below.
<table>
<thead>
<tr>
<th>Research Domains</th>
<th>Examples of Evidence of Achievement</th>
</tr>
</thead>
</table>
| Research:       | • Established a national reputation as a researcher and collaborator especially as demonstrated by scholarship and publications  
                  • Invitations to speak nationally and internationally about research topics related to their field  
                  • Leadership on editorial boards of recognized scientific journals or as a regular peer reviewer to journals in area of expertise  
                  • Leadership of institution research-related committees such as the human or animal subjects committee  
                  • Leadership on national committees related to research including grant review panels such as NIH study sections, FDA or other expert panels, or data and safety monitoring boards for clinical trials  
                  • Leadership role in planning sessions for scientific societies nationally or internationally  
                  • Leadership of oversight in an institutional research core  
                  • National awards for research and/or innovation |
<p>| Publications:   | • Faculty at this rank frequently have a minimum of 30 publications in peer-reviewed journals or peer-reviewed conference proceedings that are publicly available, but a key to their value is an assessment of their scholarly impact, based on various objective measures. At least 10 of these publications should be first or senior author publications in the candidate’s discipline, or should be publications where the role and creative contributions of the faculty member were demonstrably critical. As appropriate, the development and dissemination of intellectual properties may also be considered. Candidates should provide evidence for the impact of their published scholarly work by including reference to the NIH Relative Citation Ratio or the h-index. |</p>
<table>
<thead>
<tr>
<th>Grants:</th>
<th>• Track record for extramural funding to support their research as either PI, CO-PI, or coinvestigator that supports the research effort in their specific research area</th>
</tr>
</thead>
</table>
| Educational Activities: | • Effective mentoring of undergraduate, graduate and medical students, postdoctoral fellows, house staff, and clinical fellows  
  • Invitations to present topic workshops at national or international professional meetings  
  • National recognition for teaching through awards |
| Mentorship: | • Stature of trainees upon whom the candidate had a major influence; stature may be assessed by trainees’ academic rank, publications, funding and awards  
  • References will be solicited from mentees  
  • Simply listing learners to whom the applicant has been exposed does not constitute mentorship |

**COMMUNITY ENGAGEMENT / HEALTHSCAPE**

An important measure of impactful community-based and community-engaged work is recognition of the work outside of the community in which a faculty member is working. Community includes organizations within Travis County, our healthcare community partners, and Dell Medical School / UT Austin. Dell Med has a goal to be recognized as a national leader in developing, implementing, and evaluating evidence-based community-level interventions/programs. To this end, Dell Med provides an area of academic excellence to enable promotion of its faculty based on exemplary scholarly contributions to service and community engagement related to creating a vital healthy ecosystem. Scholarship is emphasized because the application of systematic inquiry and/or innovation paired with dissemination of the work is expected to result in measurable health benefits for the community. In this way, the community is engaged as a part of the scholarship and is also served through the faculty’s scholarly endeavors.

**Appointment/Promotion to Assistant Professor:** Typically, a non-tenure track assistant professor on the community engagement track has a doctoral or professional degree or equivalent with a major commitment to scholarship around community service and a plan for funding. Most will have just completed their residency/fellowship training or just received their terminal degree and some period of post graduate education.
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<tbody>
<tr>
<td><strong>Service:</strong></td>
<td>• An expressed interest for providing innovative service while in training programs, previous or current department, school, university, physician practice plans, affiliate medical organizations (as appropriate), community, government, or one’s profession</td>
</tr>
</tbody>
</table>
| **Community Engagement/Healthscape Expert:** | • Active participation in community organizations, local schools, or other not for profits, devoted to community improvement  
• Quality and quantity of community engagement activities as evidenced by (a) duration (not a single meeting but ongoing collaboration), (b) activities initiated (not just talk, but action), (c) activities/initiatives that are sustained over time, and (d) impact on some process or outcome measure of community health   
• Engagement with community or public health leaders as determined by outside reviewers |
| **Scholarship:**                           | • Documentation of participation in community projects, organizations, programs with generation of new knowledge |
**Promotion to Associate Professor:** In general, promotion to Associate Professor requires 7 years in rank as Assistant Professor or outstanding achievement with extraordinary reasons for early promotion before 7 years. Developing peer recognition reflected by an emerging state-wide / regional reputation as a major contributor in the field is expected.

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</table>
| **Service:**                   | • Service, at the levels of department, school, university, physician practice plans, affiliate medical organizations (as appropriate), community, schools, government, or one's profession, that is recognized by external reviewers for its excellence  
                               | • Achievement of a state-wide / regional reputation of excellence is required, as reflected by service on invited or elected regional community organizations, committees, boards, NGOs, professional organizations, and governing bodies |
| **Community Engagement/Healthscape Expert:** | • External recognition locally and regionally by community groups, professional societies or other non-traditional organizations devoted to improving community or public health, advisory committees, etc.  
                               | • Quality and quantity of community engagement activities as evidenced by (a) duration (not a single meeting but ongoing collaboration), (b) activities initiated and executed over time, or (c) impact on some process or outcome measure of community health  
                               | • Creative actions, programs, policy initiatives or other innovative activities that measurably improve health in a community (i.e. contributions to practice and/or policies etc.)  
                               | • Engagement with community or public health leaders as determined by outside reviewers |
**Scholarship:**

- Scholarship in community-based program development and policy (i.e. invitations to speak state-wide or regionally, publications in lay or professional media, peer reviewed journals, press releases, other media, etc.)
- Peer reviewed methods for developing, implementing, and evaluating evidence-based community-level interventions/programs; may include methods of community engagement and methods of program evaluation that move beyond pre-post evaluation
- Funding from extramural sources for community programs, policy development or other community or service projects

**Promotion to Professor:** In general, promotion to Professor requires 7 years in rank as Associate Professor or outstanding achievement with extraordinary reasons for early promotion before 7 years. Established peer recognition derived from an emerging national / international reputation as a leader in the field is expected.

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<td><strong>Service:</strong></td>
<td>• Consistent national service, preferably in leadership positions, for organizations related to community, government or one's profession is required</td>
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<tr>
<td></td>
<td>• Achievement of a national and, in some cases, international reputation of excellence is required, as reflected by leadership on invited or elected national and/or international committees, boards, and governing bodies</td>
</tr>
</tbody>
</table>
| Community Engagement/Healthscape Expert: | • External recognition nationally (i.e. awards and invited talks at national forums, national community advocacy groups, NGOs, policy development, or advisory committees, etc.)  
• Lasting evidence of innovative or creative programs, innovative changes, or other activities that measurably improve health in a community (i.e. contributions to practice and/or policies etc.)  
• Engagement and leadership with community and national public health leaders as determined by outside reviewers |
| Scholarship: | • Scholarship in community-based program development (i.e. publications in lay or professional media, peer reviewed journals, documented policy development, legislation, etc.)  
• Typically, faculty at this rank will have 30 or more publications about the methods for developing, implementing, and evaluating evidence-based community-level interventions/programs. Many of these publications should be peer reviewed. May include invited media posts, lay press reports, position papers, policy/legislative successes, methods of community engagement and methods of program evaluation that move beyond pre-post evaluation. |
| Funding: | • Sustained track record for extramural funding to support community projects, policy development or other community or service-oriented work |
ACADEMIC AND PROFESSIONAL SERVICE

In addition to a designated area of excellence in clinical expertise, educational leadership, investigation and inquiry, or community engagement/healthscape, faculty may choose academic and professional service as an additional area of review (but not as their primary area of excellence).

Appointment/Promotion to Assistant Professor: Typically, a non-tenure track assistant professor has a doctoral or professional degree or equivalent. Most will have just completed their residency/fellowship training or just received their terminal degree and some period of post graduate education.

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<th>Service Domains</th>
<th>Examples of Evidence of Achievement</th>
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<tbody>
<tr>
<td><strong>Academic:</strong></td>
<td>• An expressed interest for providing service to the medical school or university, e.g., on academic, educational, or research-related committees&lt;br&gt;• Evidence of such service during previous training programs</td>
</tr>
<tr>
<td><strong>Professional:</strong></td>
<td>• Membership in professional organizations related to the field or discipline</td>
</tr>
<tr>
<td><strong>Administrative:</strong></td>
<td>• An expressed interest for providing service on departmental and hospital committees</td>
</tr>
<tr>
<td><strong>Community:</strong></td>
<td>• Participation in community organizations, local schools, or other not for profits</td>
</tr>
</tbody>
</table>
**Promotion to Associate Professor:** In general, promotion to Associate Professor requires 7 years in rank as Assistant Professor or outstanding achievement with extraordinary reasons for early promotion before 7 years. Developing peer recognition reflected by an emerging state-wide / regional reputation as a major contributor in the field is expected.

<table>
<thead>
<tr>
<th>Service Domains</th>
<th>Examples of Evidence of Achievement</th>
</tr>
</thead>
</table>
| **Academic:**   | ▪ Invitation, election, and/or participation in academic, educational, or research-related committees institutionally, state-wide, or regionally related to the field or discipline  
▪ Leadership role in state-wide or regional courses, workshops, or symposia related to the field or discipline  
▪ Service as peer reviewer and editorial board member for relevant and recognized journals or publications |
| **Professional:** | ▪ Service on state-wide or regional committees and organizations developing guidelines and policies related to the field or discipline  
▪ Invitation or election to leadership roles in professional organizations  
▪ Service on national committees such as NIH study sections, FDA and other expert panels, safety monitoring boards, related to clinical, educational, or research expertise |
### Administrative:
- Recognition for sustained involvement in hospital, clinic, and departmental committees
- Demonstration of significant service to the hospital, department, or institution that contributes to the greater good of the medical school or UT Health Austin
- Awards for administrative leadership from other than the candidate’s department

### Community:
- Quality and quantity of engagement evidenced by duration and impact
- External recognition locally, state-wide, or regionally by community groups

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**Promotion to Professor**: In general, promotion to Professor requires 7 years in rank as Associate Professor or outstanding achievement with extraordinary reasons for early promotion before 7 years. Established peer recognition derived from an emerging national / international reputation as a leader in the field is expected.

<table>
<thead>
<tr>
<th>Service Domains</th>
<th>Examples of Evidence of Achievement</th>
</tr>
</thead>
</table>
| **Academic:**   | - Invitation, election, and/or participation in academic, educational, or research-related committees at a national and, in some cases, international level related to the field or discipline  
                  - Leadership role in planning and organizing national or international conferences, courses, workshops, or symposia related to the field or discipline  
                  - Service as peer reviewer, editorial board member, or editor for relevant and recognized journals |
| Professional:                      | • Leadership of national and, in some cases, international committees related to the field or discipline  
|                                  | • Election to leadership roles in national and, in some cases, international professional organizations  
|                                  | • Service to national or international governmental or other bodies evaluating guidelines, programs, or grant proposals  |
| Administrative:                  | • Recognition as a leader in the institution  
|                                  | • Demonstration of major and innovative contributions to the hospital, department, or institution that contribute to the greater good of the medical school or UT Health Austin  
|                                  | • Development of guidelines, compliance, quality and safety activities, and/or resource utilization with national recognition or adoption  |
| Community:                       | • Quality and quantity of engagement evidenced by duration and impact  
|                                  | • External recognition locally, state-wide, regionally, or nationally by community groups  |