Minutes of the April meeting were approved.

Promotion and Tenure Discussion

Drs. John Barnard and Robert Ruberg, co-chairs of the Promotion and Tenure Revision Committee, presented the draft proposal (committee composition and proposal attached). The process started last fall with a review of OSU’s basic requirements through the Office of Academic Affairs and the P&T documents of the US News top 10 medical schools.

The majority of their presentation is contained in the attached review of the major changes. In part 2 of that list, the national leadership role or international presence requirements come from the P&T documents of the other institutions. In part 3, while departments may keep “tracks” in their P&T documents, the specific tracks will be eliminated in the COM’s document. In part 7, auxiliary faculty can be evaluated for promotion based on just the part of the mission that they support (for example, just based on teaching if their role is teaching, rather than on teaching/research/pt care).

Major Points
Dr. Small asked that you please compare the document to your department’s P&T document and send me a list of major discrepancies. I will put it together to bring to the committee and back to the FC to discuss.

This would be a good time to share the attached documents with your department. Dr. Ruberg asked that we emphasize that the document is a draft.

NIH K-awards: In the previous document, a K award specifically qualified as funding counting toward promotion to associate professor. In the new document it is not mentioned. It will apparently be up to each department to decide whether it qualifies. There was concern that it takes 6-9 years to obtain and finish a K award and then possibly several more to obtain R-01 funding. However, only 30% get an R award after their K, and the associate professor promotion is supposed to be based on the promise of further prominent work in the field. It is also based on the overall body of work, so the K award may not really be the deciding factor. Also discussed was who has to approve the departmental P&T rules. Apparently the COM and Provost do. Dr. Pancholi asked about short-term concept grants that are becoming more popular. Dr. Barnard offered that these may count, depending on the person’s overall body of work.

Dr. Allen reported that at the College Assembly meeting there was concern about how clinical faculty can become nationally prominent working 4 ½ days a week with patients. Dr. Ruberg pointed out that surgeons generally are able to do so. This brought up the idea that different criteria are needed for clinical track faculty, although the goal should be to have still rigorous criteria, such that being promoted in any track means about the same thing. There is apparently a task force put together by Dr. Lucey to look at promotion criteria for clinical faculty. Their report is due soon and may affect this document. Dr. Miller offered that just practicing (as if one were in private practice) should not count toward promotion, as we want to promote people who are thoughtful and collaborative about their work. Titles from OSU should be nationally recognized as describing an individual with a high level of work.

Dr. Binkley was recently put in charge of faculty development, and Drs. Barnard and Ruberg will be presenting this to his group as well.

Dr. Rotter asked if bringing in patients from around the country counted as national presence. Dr. Barnard responded “no”, but that one is unlikely to do so without some published material. Web-based material might count toward that.

The rules about clinical faculty not being able to vote on P&T for tenure track faculty come from the university level, as does the overall outline of the document. The document does not mention whether clinical track faculty (eg, a division chief) can do the annual reviews for tenure track faculty.
Dr. Rotter asked about research faculty who are outstanding experts but not involved in national groups. International recognition may be sufficient without the “leadership” component. The departments will need to decide what counts as leadership at a national level (officership, committee chairs, appointed positions in national groups were mentioned as examples).

The timeline for adopting this is unclear.

The standard to which individuals already working toward promotion will be held (the old one or the new one) is unknown.

Drs. Barnard and Ruberg left, and the following discussion ensued:

What happens to people who meet the old “regional” criteria, especially if they had been specifically working toward that?

Should the P&T document really be changed every 2-5 years? The last one is not very old, and Dr. Ruberg mentioned hoping this one would last 5 years.

If the standard at the COM level is too broad, there may be too much of a difference between the standards for the same promotion between various departments. Dr. Vandre offered though that we probably want the COM document to be the more vague one, so that each department can define what constitutes the criteria for recognition in their field. (For example, what may doable in one discipline may be nationally unheard of in another.)

Should our basic science promotion timeline be stretched out? Apparently it is quite short compared to other institutions.

These minutes are highly paraphrased and condensed. Any misrepresentation or omission of an individual’s comments is unintentional and will gladly be corrected.

Respectfully submitted,

Alan E. Harzman, MD