

**UK Department of Neurology- Statements of Evidence**  
**Metrics for Appointment, Promotion, and Tenure and Evaluation Metrics**  
**Revised May 2020**

**Gregory Jicha, MD, PhD**  
**Vice Chair for Academic Affairs**

**Larry B. Goldstein, MD**  
**Chair**

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Each department at the UK College of Medicine sets “*Statements of Evidence*” for appointment, promotion, and tenure in accord with CoM and University of Kentucky policies. The “*Statements of Evidence*” reflected below address each area of faculty responsibilities and are based on past faculty performance within the department and criteria endorsed by the Dean of the College of Medicine and the Appointments, Promotions and Tenure Committee. Accomplishments in each domain should be documented in the faculty member’s CV and plans for continued activity and progress discussed and reflected in the Department’s twice annual Mentorship Committee meetings.

**Notes:**

1. Absence of DOE in any category does not preclude targets set for each category with the exception of Clinical service for faculty without clinical responsibilities.
  - a. Faculty may not meet all targets within a category; however, overall activities within each category should meet or exceed departmental milestones for appointment, promotion, or tenure.
  - b. Aside from the Research Title Series, it is expected that all faculty will serve in some administrative role, engage in some scholarly activity, and have some educational/Instructional activities.
    - i. Research Title Series faculty do not have regularly-scheduled teaching or service assignments. As such, the roles wherein Research Title series faculty can engage are limited; however, there is still an expectation that educational/instructional and administrative activities will be pursued to the extent possible and that such activities will be included in the faculty member’s activities and serve as categories for consideration for appointment and promotion.
  - c. It is expected that all faculty will advance their professional development (all faculty have at least 5% DOE these activities).
2. Criteria for each rank based on reputation and accomplishments are detailed in the relevant sections of this document.
3. Exceptions to these defined metrics may be made on a case-by-case basis by the Department Chair in consultation with the faculty and are ultimately subject to approval by the APT Committee and the Dean.
  - i. Exceptions recognize that faculty members may make unique contributions to the department’s missions or have other circumstances that may be considered.
4. Title series changes can occur with Departmental support by the faculty member, Chair and a majority vote of the Department’s tenured faculty if an appropriate non-tenured or tenured position is available.
5. Promotion in advance of the standard 7-year period can occur with support of the Chair and a majority vote of the Department’s tenured faculty.
6. Failure to achieve tenure within University timelines can result in a terminal appointment.
  - i. Terminal appointments can be extended annually by the Department Chair with the written opinion of the Department’s tenured faculty.
  - ii. This terminal appointment may be rescinded based on the recommendation of the Chair with approval by the Dean.

**\*NOTE:** These are general guidelines and individual requirements may vary by DOE and the discretion of the Chair on the basis of departmental, college, and university needs that could vary over time. Meeting or exceeding these criteria does not necessarily guarantee appointment, promotion, or tenure as approval is contingent upon University of Kentucky Administrative Regulations regarding appointment, promotion, and tenure including AR 2:1-1, AR 2:1-2, AR 2:2-1, AR 2:2-2, AR 2:3, AR 2:4, AR 2:5, AR 2:6; Governing Regulations.

## Summary of Procedures for Appointment, Promotion, and Tenure

### ***Criteria for Appointment, Promotion, and Tenure in the Department of Neurology***

#### **1. Appointment**

- a. The Chair will be directly responsible for identifying new faculty members for recruitment in accord with University, College of Medicine and UK HealthCare policies.
- b. The Chair will seek input from the Department's faculty for all candidates put forward for appointment as outlined in the Rules of Procedures, including a majority vote of the faculty.
- c. The candidate should meet the minimum requirements set for the title and position per University guidelines.
- d. The candidate is reviewed by the Dean and designated committees as appropriate and if approved the candidate is presented with a final offer letter.

#### **2. Promotion & Tenure**

- a. Progress towards promotion and tenure (if applicable) will be evaluated semi-annually with formal mentor evaluations that are mandatory for all faculty who have not achieved the rank of full professor.
  - i. Formal Mentoring Committees for academic progress will be designated by the Chair and Vice Chair for Academic Affairs with input from the faculty member and potential mentors.
  - ii. With the approval of the Chair, the faculty member's Mentoring Committee composition can change to meet their evolving needs to best support faculty member's career trajectory and path.
  - iii. The Mentoring Committee will be comprised of at least one full professor, with the secondary mentoring roles by either a full or associate professor in order to develop mentoring skills in those approaching the rank of full professor. Assistant professors will not serve a faculty mentoring role.
  - iv. Semi-annual career mentoring meetings will occur and forms will be completed by the faculty member and the Mentoring Committee twice annually to track academic progress and provide career guidance.
  - v. Academic mentors selected by the Department can and should be augmented by specialized mentors from other departments, colleges, or institutions as deemed appropriate by the Chair, Vice Chair for Academic Affairs, and the faculty member, although such mentors will not be considered to be part of the formal departmental Mentoring Committee. The recommendations and guidance of such external mentors should be considered by the formal departmental Mentoring Committee as part of the semi-annual evaluations if such mentors have been chosen, are reviewing the faculty member's progress, and have provided information to the Mentoring Committee.
- b. Formal advancement reviews will occur at 2 and 4 years following appointment and/or promotion to the level of Assistant or Associate Professor to ensure appropriate objective targets are being addressed, consistent with AR 3:10.
  - i. This process is intended to help the faculty member address areas that may need additional focus to successfully advance their career.
  - ii. Formal 2 and 4-year advancement reviews will be conducted by the Chair for all faculty, irrespective of title series.
  - iii. Advancement reviews are carried forward for review by the Dean for all tenure-track faculty (Regular and Special Title series) in accord with College of Medicine procedures.
- c. The University of Kentucky probationary period for promotion and tenure is set at 7-years following appointment and/or promotion to the level of Assistant or Associate Professor.

- i. Although this probationary period for promotion and tenure is set by the University for all tenure track positions, Departmental expectations are that this period is also appropriate for non-tenure track faculty (i.e., Clinical and Research Title Series).
  - ii. At the discretion of the Chair, non-tenure track faculty (Clinical and Research Title Series) may indefinitely extend time at any rank if they choose to not seek or have not achieved the criteria for promotion reflected in the Departmental statements of evidence.
- d. The Chair and Vice-Chair for Academic Affairs will be directly responsible for identifying promotion and tenure needs and readiness of faculty members for promotion at the 2, 4, and 6-year timepoints.
  - i. Faculty members being considered for a different title series or early promotion or tenure prior to the 5<sup>th</sup> year at their current rank should request such consideration from the Chair.
  - ii. If approved by the Chair, early consideration for promotion or tenure will follow the guidelines set forth for faculty following the standard 7-year clock.
- e. The Chair will seek input from the Department's tenured faculty.
- f. Departmental recommendations require letters of support from the Chair, available tenured faculty, and the majority of the Department's faculty at or above the proposed rank, in addition to outside recommendations as required by the College of Medicine and University.
- g. The candidate should generally meet the criteria for the title and position as reflected below and as reflected under page 1, note 1.
- h. Promotion and/or tenure requests are reviewed by the UKCoM APT Committee.
- i. Promotion and/or tenure requests are reviewed by the Dean, and if approved forwarded to the Area APT Committee.
- j. Promotion and/or tenure requests are reviewed by the Area APT Committee
- k. Promotion and/or tenure requests are reviewed by the Provost and if approved the application is successful.

## **UK Department of Neurology Statements of Evidence for Appointment, Promotion, and Tenure**

The following sections include:

1. Description and criteria for achievement and excellence in Instruction/Education, Service, Research/Scholarly Activity, and Reputation/Professional Development.
2. Objective target metrics for achievement in each area.
3. Faculty performance evaluation matrix and additional matrix for Research Intensive faculty.

### **Development of Metrics for Departmental Statements of Evidence**

These metrics are based on a thorough review and abstraction of data from departmental CVs from the year 2019 was performed. The techniques used were identical to those used by the APT committee in assessing candidacy for promotion. Standardization of time in the role of assistant professor was set at 7 years and at associate professor was set at an additional 7 years. Time in the rank of full professor was set equivalent to the number of years in that position. This strategy was used to standardize those that achieved early promotion versus those who may have been promoted during later years for an overall goal that is matched to the UK promotion time clock. Activities abstracted were divided by the number of adjusted faculty years to provide annual performance metrics which were then multiplied by 7 to estimate productivity for each tenure period.

## **INSTRUCTION/EDUCATION**

Instruction is defined as the act of teaching or providing education. The CoM recognizes that instruction may be provided through many mechanisms, including didactic instruction, bedside teaching while providing clinical care, laboratory or experiential instruction, and other methods such as online materials, podcasts, etc. Additionally, instruction may be provided to anyone including students, residents, fellows, graduate students, faculty peers, and learners outside of the University. The faculty member's CV should clearly include objective measures of the impact of their instruction/educational activities and effort consistent with the examples provided below. This should be summarized in the CV bullet-point form under the appropriate responsibilities for which the activities occurred. Refer to the section on Reputation/Professional Development for definitions of local, regional and national/international activities.

### **Examples of Instruction/Education Achievements**

- Peer review and the judgment of colleagues in the department. Anecdotal reports of outstanding ability in teaching will not by themselves suffice to establish this criterion.
- Number of students/residents/fellows directly taught by the candidate. Including approximate number of sessions, number of students per session, setting of session (e.g. classroom, small group, bedside, etc.).
- Lectures, proctorships, or preceptorships for professional colleagues. Objective measures of outcomes/evaluations are expected.
- Favorable formal and standardized teaching evaluations from learners.
- Teaching awards, whether national, regional, or local and whether awarded for objective, competitive measures should be weighed.
- Mentorship of trainees or junior faculty with higher weight given to those demonstrating objective measures of success. Examples may include outcomes such as successful development of new skills in the mentee, successful remediation of mentees, the mentee's development of a national reputation, etc.
- Academic recognition, award, or other evidence of excellence achieved by a mentee of the candidate that can be clearly tied to the mentor's influence.
- Requests to demonstrate or share curriculum.
- Presentations about teaching methods.
- Service in educational administration, planning, or analysis.
- Textbooks written, compiled, or edited by the faculty member and published by an established national or international publishing house. Additional factors to consider may include the adoption of the book beyond the local or regional market, overall sales, and whether it is being considered for further editions. Reference texts are weighted the same as classroom texts. Finally, book chapters and other written educational materials should be weighted less than a textbook but by the same criteria.
- Development of innovative techniques relevant to education as well as demonstrated outcomes of success.
- Podcasts, instructional videos, and other electronic or online educational materials. Departments should consider the number of uses and demonstrated use beyond the local area.
- Development of educational unit, course, or curriculum and should include demonstration of student evaluations, improved learning through standardized test scores, and adoption of the program beyond the local area.
- Writing, performing, or supervising written, oral, or simulation-based exams.
- Successful educational program leadership such as director, residency program director, etc.
- Mentorship of physicians/student/resident/fellow with abstracts, posters, presentations, publications, technique, etc.
- Positive fourth-year student evaluation of clinical clerkship.
- Successful medical student performance on that discipline's national shelf exam.

- Percentage of fourth-year medical students seeking a residency in the given specialty.
- Timeliness of grade submissions.
- ACGME survey reports on the residency program (i.e. accreditation without citations).
- Number of applicants per residency program position.
- Accreditation of a fellowship under the guidance of a faculty member.
- Outstanding direction of graduate research.
- Invitation to teach at a domestic or international institution of recognized excellence.
- Chair and/or member of doctoral research committees.
- Direction of graduate student thesis or dissertation research.
- Successful participation at teaching workshops and/or institutes.
- Development of new courses or major revision of existing courses.
- Member of graduate student advisory committees.
- Coordination of multi-section courses.
- Service as departmental undergraduate, graduate, resident, and/or junior faculty advisor.
- Participation in the University Honors Program and/or other programs for mentoring the professional development of students.
- Presentations at the local, regional, or national/international levels.
- Publication of widely adopted or acclaimed instructional materials.
- Publications with teaching focus in refereed journals.
- Receipt of peer-reviewed external funding for teaching.
- Receipt of awards for research or academic performance by the faculty member's students.
- Placement of graduate students or postdoctoral fellows into significant academic, scholarly, or professional positions.
- Evidence of high quality in class preparation and interaction.
- Significant self-development activities leading to enhanced teaching effectiveness.
- Receiving on a competitive basis internal funding for teaching.

**Historic (2020) Targets for *Instruction/Education***

Title series	Course leader	**UK Courses	Awards	Total	Faculty mentor	***Resident mentor	Grad student mentor	Med/undergrad mentor	Mentor-total	Local presentations	Regional presentations	Nat/Int presentations	Presentations-total
<b>Clinical</b>													
Associate	0	2	1	3	0	2	1	1	4	7	5	3	15
Professor	0	3	2	5	0	5	1	2	8	14	10	6	30
<b>Reg/Spec</b>													
Associate	0	2	1	3	0	1	4	1	6	9	6	6	17
Professor	0	3	2	5	0	3	8	2	13	18	11	12	34
<b>Research</b>													
Associate	0	0	0	0	0	0	2	1	3	8	5	3	15
Professor	0	0	1	1	0	0	4	2	6	14	10	6	30

\*Although it is anticipated that not all faculty will reach every target within a DOE category, overall activity within the category should generally meet or exceed departmental expectations for appointment, promotion, or tenure consideration.

\*\*Note that Research Title series faculty are precluded from engagement in regularly scheduled educational activities by AR 2:5.II; therefore, formal UK course engagement is not an expectation of faculty in this title series.

\*\*\*All faculty are encouraged to be involved in the mentoring of Residents and other trainees, but resident mentoring is not a formal requirement for faculty without clinical service obligations.



## **SERVICE**

Service can be defined as either Clinical Service or service to the institution, field, or society. The CoM recognizes that service may be provided through many mechanisms, including provision of high quality of care, provision of unique or highly desired services, or through service on departmental, college, university, or extramural local, regional, national or international committees. Service for any discrete activity will be evaluated on the basis of role (self-appointed/voluntary member<elected member< officer, chair), time spent in preparatory, meeting, or other activities directly related to the activity, and geographic reach/impact (local< departmental<college< university< national< international). The faculty member's CV should include objective measures of their service role's impact and effort consistent with the examples provided below. This should be summarized in the CV bullet-point form under the appropriate responsibilities for which the activities occurred. Refer to the section on Reputation/Professional Development for definitions of local, regional and national/international activities.

### **Examples of Service Achievements**

- Evidence of professional service to the local community, region, nation or beyond as a representative of the University of Kentucky.
- Service on University, College and Department committees and task forces (note whether member or chair).
- Service as an active member of the University Senate.
- Advisor to student organizations.
- Administrative role within Department.
- Administrative leadership role at the University of Kentucky.
- Service on local, regional, national or international patient advocacy organizations.
- Service on non-research-related professional (medical and or scientific) advisory boards and consensus panels.
- Service on ACGME, LCME, and subspecialty certification committees and boards.
- Grand Rounds attendance.
- Faculty meeting attendance.

### **Supportive Example of Service**

- Expert witness testimony.
- Outreach programs to schools.
- Participation in regional networks such as the Stroke Care Network or the Cancer Center Network (as part of assigned clinical duties).
- Interaction with community group (as speaker, etc.)

### **Supportive Examples of Clinical Service**

Clinicians may also provide evidence of accomplishments related to patient care activities as follows (should be included if DOE is high for clinical service):

- Recognition as a consultant through referrals of significant numbers of patients beyond the local level.

- Referral beyond the local level of the most complex and sickest patients as demonstrated by objective measures such as case mix index.
- Quality indicators, mortality metrics, complication rates, and patient satisfaction rates where performance measures can easily be internally and externally benchmarked for comparison.
- Successful direction of a clinical program or clinical laboratory. Examples may include financial measures such as contribution margin, relevant accreditation, program growth, or independent awards of excellence.
- Leading development of clinical protocols or pathways that objectively demonstrate a measurable positive impact on patient care beyond the local level, that have been adopted by other entities.
- Additional Clinical Criteria may include RVU/EPAT, Ambulatory Patient Volume, Access, LOS, HCAPS, CGCAPS, Press-Ganey

#### **ADDITIONAL METRICS FOR ADMINISTRATIVE ROLES**

These metrics are applied when the faculty member has administrative responsibility for the metrics, such as a service chief or medical director.

- Diversity in administered programs.
- Complete renovations in a particular area.
- Complete business plan for expansion (ex. new office site/new line of business).
- Faculty retention rate.
- Residency accreditation.
- Collaborative endeavors with other departments/schools.

#### **Historic (2020) Targets for Service**

<b>Title Series</b>	<b>Department</b>	<b>Special project</b>	<b>COM**</b>	<b>University**</b>	<b>Total</b>
<b>Clinical</b>					
Associate	2	1	1	0	3
Professor	3	1	2	0	6
<b>Reg/Spec</b>					
Associate	1	1	1	0	3
Professor	1	1	3	1	5
<b>Research</b>					
Associate	1	1	1	0	3
Professor	1	1	2		4

\*Although it is anticipated that not all faculty will reach every target within a DOE category, overall activity within the category should generally meet or exceed departmental expectations for appointment, promotion, or tenure consideration.

\*\*Note that Research Title series faculty are precluded from engagement in regularly scheduled administrative activities by AR 2:5.II; therefore, formal engagement in regularly scheduled departmental, CoM, and University committees is not an expectation for faculty in this title series. Multiple opportunities, however, exist within the Department, the CoM, and the University for engagement in non-regularly scheduled administrative activities including grant reviews

and other special assignments that are available to faculty in the Research Title series as an expectation for appointment and promotion.

## **RESEARCH/SCHOLARLY ACTIVITY**

Scholarship must have a clear societal impact. According to Boyer's model of scholarship, these activities should include: 1) work involving faculty expertise, peer review, and or impact; and 2) scholarship of application, integration, and or teaching. Scholarship must be public, amenable to critical appraisal, measurable, and in a form that enables its use by other members of the scholarly community. This definition extends traditional metrics of scholarship to include a broad diversity of activities that may include service to research or other scholarly organizations (these should be distinct from the service organizations described previously under the term "Service") and or direct involvement in research/scholarly activities. Research service for any discrete activity will be evaluated on the basis of role (self-appointed/voluntary member< elected member< officer, chair), time spent in preparatory, meeting, or other activities directly related to the activity, and geographic reach/impact (local< departmental< regional< college< university< national< international). The faculty member's CV should clearly include objective measures of the research/scholarly activity impact and effort consistent with the examples provided below. This should be summarized in the CV bullet-point form under the appropriate responsibilities for which the activities occurred.

### **Examples of Research/Scholarly Activity**

- Number of publications (given the traditional importance of this measure of productivity, these evidences include a more detailed subsection below describing such contributions).
- Cumulative impact factor of all peer-reviewed publications.
- Number of peer-reviewed and selected podium sessions at annual national meeting.
- Number of peer-reviewed and selected posters presented at annual national meeting.
- Contributing member of a successful research team (i.e., team science) in clinical, translational, or foundational science.
- Participation on other regional or national panels or committees that review research and/or set research policy or guidelines.
- Participation as a "team" expert for regional and national reputation (ex. college Alliances, guidelines/talks/webcasts based on expertise).
- Study section participation (chair>member>invited).
- Indirects realized.
- Total extramural support and grants received (NIH, other peer reviewed, industry, philanthropy, etc.).
- Grants submitted (NIH, other peer reviewed, industry, philanthropy, etc.).
- FDA panel participation.
- Clinical trial recruitment and adherence to budgets.
- Engagement on research steering committees, protocol evaluation/development committees, DSMBs, etc.

**Supportive Examples of Research/Scholarly Activity**

- Receiving significant internal peer-reviewed research funding.
- Presentation of invited papers at international and national meetings.
- Applied for or received patent.
- Assistance with recruitment of subjects for UK investigators (unrelated to roles as a co- or sub-investigator that should be listed separately)
- IRB approvals for unfunded research activities (i.e. projects developing preliminary data or in support of student/resident research projects)

**Publications**

Publications in high-quality venues supports the reputation of the UK College of Medicine and UK HealthCare. Therefore, faculty will be recognized for the publication of first and senior author original research, chapters, reviews, and/or textbooks related to area of clinical expertise that are recognized as authoritative and are widely cited. Publication as the first or senior author supports the impact of the candidate’s work on quality of care, clinical outcomes, and/or access to care. The highest weight will be given to original clinical research that impacts clinical care at the national or international level. Additional weight will be given for being institutional PI as opposed to associate investigator (it is not sufficient to merely to participate in clinical trials).

Those publications involving group authorship will be weighted relative to the quality of the journal, new knowledge generated and the faculty member’s role. Participation in meaningful clinical research is recognized as significant. The faculty member’s CV should clearly include bullet point descriptions of their research/scholarly contributions for all publications where substantial contributions may not be apparent (the CoM recognizes that engagement in team science is extremely important, but there can only be one first and or last author).

**Historic (2020) Targets for Research/Scholarly Activity**

Title Series	Res-Book chapters	Res-All papers	Res-F/L author	Abstracts	Total Pubs (abstr+papers+ books)	Unfunded projects	Grants-small PI/Co-I	Grants (R01, prog proj ), PI/Co-I	Industry trials & support	Funded Research projects-total
<b>Clinical</b>										
Associate	2	6	3	14	25	0	1	1	6	8
Professor	4	13	6	27	50	0	2	1	13	16
<b>Reg/Spec/Research</b>										
Associate	2	18	6	13	38	0	2	2	1	5
Professor	3	35	12	26	77	0	4	4	2	10

\*Although it is anticipated that not all faculty will reach every target within a DOE category, overall activity within the category should generally meet or exceed departmental expectations for appointment, promotion, or tenure consideration.

## **REPUTATION/PROFESSIONAL DEVELOPMENT**

Reputation is one of the primary criteria for appointment, promotion, and tenure, as criteria for each faculty rank are grounded in assessment of growth from local to regional to national/international renown. It is understood that many faculty accomplishments in the above categories may fulfill these criteria or may need to be augmented by additional activities. Maintenance of licensure, medical board certification or other relevant professional certification (as applicable) is a pre-requisite for employment and is considered the minimum criteria for care providers. This may include maintenance of annual CME credits, professional meeting attendance, paid memberships in professional societies. The criteria for accomplishments in this area beyond minimum criteria expectations are provided below.

*The College of Medicine APT committee may define local reputation as within one's own department and regional reputation as beyond one's own department. National/International reputation should include efforts that are system-wide, statewide, or beyond.*

As an academic medical center, the UK College of Medicine and UK HealthCare focus on patients and the expert care they are provided by our clinicians. For this document, a clinical expert is defined as having “strong regional (for Associate Professor), and or national/international (for Full Professor) recognition as a clinical expert as evidenced by regional and/or national leadership roles and reputation related to the clinical field.

Faculty (including Regular, Special, and Research Title Series faculty) with significant DOE in the area of Research/Scholarly activity also support the prestige and impact of the University and College through the establishment of regional, national and international reputation in their particular areas of study. In terms of this document, a research expert is defined as having strong regional (for Associate Professor), and or national/international (for Full Professor) recognition as a research expert as evidenced by regional and/or national leadership roles and reputation related to the specific research area of study engaged.

### **Examples of Reputation/Professional Development**

- Service as a member for extramural local, regional, or national/international organization not covered above under INSTRUCTION/EDUCATION, SERVICE, or RESEARCH/SCHOLARLY activities (i.e. medical organization and specialty organization memberships are considered less important than service on committees or other leadership roles).
- Editor or member of editorial board of a medical/scientific journal. Weight will be given to the impact factor and prestige of the journal within one's field as well as the extent of the role (i.e. special section editor<associate editor<editor).
- Member of review panel [or critic] for departmental, college, university, regional, national or international research organization.
- Service as a reviewer for major refereed journals or as an ad hoc reviewer for national research organizations.
- Media presentations or recognition attesting to reputation and professional qualifications.
- Web-based or social media contributions with significant impact on the science or clinical care of neurologic disease, meeting Boyer's criteria of 1) must be public, 2) must be amenable to critical appraisal, 3) must be measurable, and 4) must be in a form that enables its use by other members of the scholarly community.

**Supportive Examples of Reputation/Professional Development**

- Recognition as a consultant through sustained referrals of patients beyond the local level.
- Referral beyond the local level of the most complex and sickest patients as demonstrated by objective measures such as case mix index.
- Regional or national awards for contributions or innovation in the area of clinical expertise Influencing clinical practice.
- Letters or other documented measures of patient and referring physician satisfaction that demonstrate excellence above general expectations recognizing that reputation carries a significant weight to regional. National or international esteem.
- Letters of reference from division chief, colleagues in the faculty member’s department, referring physicians, and colleagues in other departments. If necessary, explanation by the department chairman of specific assignments or practice restraints that may purposely or situationally localize the practice.
- Leading development of clinical protocols or pathways that objectively demonstrate a measurable positive impact on patient care beyond the local level, that are usable.
- Serving as a consultant on a research grant or proposal
- Requests for external review of appointment, promotion, tenure activities (as departmental staff are required to provide for departmental colleagues, these are only considered if beyond our department or extramural).

**Historic (2020) Targets for Professional Development/Reputation**

Title Series	Regional positions held	National positions held	International positions held	Editorial board member	Paper/book reviewer	Grant reviewer	Prof positions-Total	Prof-Media
<b>Clinical</b>								
Associate	0	1	0	0	1	0	3	1
Professor	1	2	0	0	2	0	5	1
<b>Reg/Spec/Research</b>								
Associate	1	1	0	0	3	2	7	6
Professor	1	2	0	1	7	3	14	12

\*Although it is anticipated that not all faculty will reach every target within a DOE category, overall activity within the category should generally meet or exceed departmental expectations for appointment, promotion, or tenure consideration.

### **Additional Metrics that May be Considered for Clinical Faculty**

- Exceeds RVU targets or EPAT>1.0
- Access above enterprise targets
- LOS below enterprise targets
- HCAPS above enterprise targets
- CGCAPS above enterprise targets
- Provision of unique or critical need clinical services
- Demonstration of referral base beyond KY

Annual faculty performance evaluations are based, in part, on the above criteria. This dependence is reciprocal as annual faculty evaluations are an important part of the dossier prepared for promotion and tenure considerations. Annual faculty evaluations may also be used for determination of academic and performance bonuses which are part of the total salary compensation for each faculty member of the Department of Neurology