

## Medical School Clinical Track Faculty (CTF)

### A. Definition

1. Clinical faculty hold positions through which they contribute to advancing best teaching practices, educational leadership, and clinical scholarship of the Medical School. They hold faculty ranks as Clinical Instructor, Clinical Assistant Professor, Clinical Associate Professor, or Clinical Professor.
2. Clinical faculty members engage in teaching, service, and scholarship.
3. Clinical faculty members participate in the faculty governance process as defined by the Medical School, receive usual faculty benefits with the exception of sabbaticals, and undergo periodic reviews of their performance. They are not eligible for tenure.

### B. Clinical Track Ranks

**The Clinical Track includes four ranks: Clinical Instructor, Clinical Assistant Professor, Clinical Associate Professor, and Clinical Professor.** The working title (Assistant Professor, Clinical Track) is used on all appointment and promotional correspondence and the curriculum vitae. Routine correspondence (e.g., patient correspondence, scholarly work, etc.) can use shorter working titles, e.g. Assistant Professor without identifying track. The official title (Clinical Assistant Professor) will be reflected in university human resources databases.

Time in rank alone is NOT sufficient for advancement in rank. To obtain a faculty position in the clinical track for persons without a Medical Degree, a terminal degree in their field is expected.

For initial ranking, the minimum years of clinical service (after the award of MD or equivalent) are:

1. Zero years (Clinical Instructor)
2. Five years (Clinical Assistant Professor)
3. Ten years (Clinical Associate Professor)
4. Fifteen years (Clinical Professor)

For promotions (in addition to minimum years of clinical service), the minimum years on the previous rank before promotion are:

1. Three years in the previous rank (Clinical Assistant Professor)
2. Four years in the previous rank (Clinical Associate Professor)
3. Four years in the previous rank (Clinical Professor)

#### **(a) Clinical Instructor**

A Clinical Instructor is fully trained to provide clinical care and is qualified to participate in educational programs at the University of Nicosia Medical School. Appointment to this rank requires evidence that the individual has received an appropriate medical and graduate medical education and documentation of full clinical competence. Certification by the relevant professional board must be pending or completed, recognizing that exceptions for some internationally trained physicians may be granted by the Medical School. Evidence of competence in clinical and didactic teaching is expected. Letters from individuals with firsthand knowledge of the candidate are helpful in documenting the candidate's clinical competency, suitability for an academic medical environment, potential as a teacher and clinical role model, and potential for growth in clinical and scholarly areas. Publications in a candidate's professional field are encouraged but not required. Instructor appointments are made by the department chair or unit head, within the constraints of University appointment procedures, and must be approved by the Clinical Dean.

#### **(b) Clinical Assistant Professor**

A Clinical Assistant Professor has excelled in clinical care and teaching, and these are the primary requirements for appointment or promotion to this rank.

##### *1. Clinical work*

Clinical excellence is documented by letters, which may be from local sources and must attest to the quality of clinical service. Certification by a relevant professional board or the equivalent is a usual expectation at this rank, although this qualification may be in progress at the time of appointment according to the requirements of the relevant professional board; exceptions for some internationally trained physicians may be granted by the Medical School.

##### *2. Teaching*

Quality of teaching is usually documented by objective teaching evaluations from the learner groups that are being taught (medical students, residents, fellows, undergraduate and graduate

students as well as peer education), letters, and awards. If the candidate comes from an outside institution, letters describing the teaching efforts and quality are required.

### *3. Scholarship*

An Assistant Professor should show progress toward becoming scholarly engaged in their field. On the Clinical Track, invited presentations as well as publication of articles in professional journals, chapters, reviews, abstracts, textbooks, videotapes, or other educational materials are evidence of scholarly contributions and are usual features of faculty at this rank.

### *4. Service*

The candidate's organizational service, if present, to his or her department should be documented. For faculty members with predominantly clinical effort, several years of postgraduate clinical experience (post residency or post fellowship) combined with excellent teaching evaluations may qualify for promotion or appointment at this level, although some evidence of scholarly contribution is generally expected as noted above. New faculty members with evidence of distinct clinical expertise may also be appointed at this level.

### **(c) Clinical Associate Professor**

A Clinical Associate Professor has excelled in teaching and clinical work and has achieved a regional or national reputation in his or her area of expertise. Peer-reviewed published scholarship and service to the institution, regional or national organizations is expected. The associate professor signals the passage into medical academia's senior rank. Individuals at this rank are expected to be role models of collegiality, integrity, scholarship, and excellence in their professions. Typically, a reputation of this sort is documented by letters from impartial external sources.

#### *1 Clinical work*

As an Associate Professor on the clinical track, development as a clinician has progressed to the point of establishing broad interdepartmental and regional recognition by professional colleagues for clinical expertise. This is usually documented in letters from colleagues and peers who attest to the clinical excellence. Appointment or promotion to this rank requires board certification or the equivalent (although occasional exceptions for some internationally trained physicians may be granted by the Medical School).

#### *2. Teaching*

Evidence of continued valuable contribution to medical education is expected. This may be through customary teaching situations (lectures, clinical instruction of students and residents, mentorship pairing, or scholarly work with trainees including formal evaluations to assess quality) or through the preparation of educational materials, including educational brochures and learning aids, textbook chapters, reviews, videotapes, web based learning, and other instructional interfaces. Teaching evaluations from all learner groups should be available. Administration and organization of teaching programs are also valued activities, and creativity in their execution can be documented by letters from appropriate knowledgeable faculty, students, and peers.

### *3. Scholarship*

The candidate should have produced scholarship that influences knowledge and/or clinical care. Scholarship should include peer – reviewed papers, but may also include books, book or web-based chapters, or some other mode of communicating results and ideas.

### *4. Service*

Administration or leadership at the school level or at local, regional, or national organizations are a typical feature of this rank.

### **(d) Clinical Professor**

Appointment and promotion to this highest rank in the Clinical Track requires continued outstanding teaching, mentoring and clinical service. A national/international reputation is expected in scholarship, research or teaching.

A Clinical Professor has many products of their scholarly activity and will have a substantial record of first author and/or senior-author publications in peer-reviewed journals that have resulted in broad peer recognition in their area of expertise. Service in regional or national specialty societies or boards is the norm. Institutional citizenship is expected of a Senior Clinical Faculty.

### **C. Criteria for Appointment and Promotion in the Clinical Track**

The criteria for appointment and promotion in the Clinical Track will be applied with an emphasis on the impact of the nominee on his or her professional environment. This impact may be in the teaching arena, in professional activity usually manifested by clinical care, in institutional citizenship (organizational, administrative, community, or volunteerism for example), or in scholarship and research.

#### *1. Clinical Work*

A clinical faculty member has usually significant clinical responsibilities and a high level of clinical competency is expected in all ranks. Clinical excellence may be documented by letters from faculty and current or former colleagues as well as former trainees. Letters typically attest that the nominee is considered by the medical community as a clinical resource, is sought out for clinical expertise, and has a strong referral base. By their nature these letters will often come from sources that have personal knowledge of the individual's clinical skills and character. A clinician is a role model for medical students and must demonstrate outstanding compassionate patient care, collegiality, integrity, professional excellence, respect for diversity, engagement in community, and commitment to individual learning and scholarship.

#### *2. Teaching*

Successful teaching of medical students and residents is an important component of the Clinical Track. In the senior ranks, sophisticated and broad-based educational achievement is expected with the creation/ integration of new (clinical) knowledge and the teaching of other teachers.

Educational excellence may be demonstrated in a variety of settings. Some faculty will have assigned responsibility for teaching individual medical students and house officers one-on-one in the course of delivering clinical care or for organizing and leading clinical educational programs.

The educational roles of other clinical faculty may involve a broad range of educational activities targeted at diverse audiences such as organizing or participating in local or regional CME activities or developing patient education tools, health profession education modules, or public health education programs. Objective evaluation of teaching from all learner groups should be available. In addition to the usual peer sources, letters from former trainees or from colleagues may document educational impact in special circumstances.

In the Adjunct Clinical Track, sufficient involvement in the educational program of the department is defined as a minimum of *30 hours of direct participation* in clinical education per year or an *equivalent contribution* to the academic mission of the Medical School, as documented by the department chair or unit leader.

### 3. *Scholarship*

Promotion to the senior levels of the Clinical Track requires scholarly engagement and productivity. Excellence in scholarship or academic achievement is evidenced by published peer-reviewed and other creative work, participation in grant-funded research, success in training graduate and professional students in scholarly methods, participation and leadership in professional associations, and in editing of professional journals. The ideal clinical professor is a scholar, engaged in life-long professional learning related to some clinical aspect of the human condition. Written evidence of scholarship may also include chapters, review articles and other creative ways to education. Individual scholarship is an essential part of the clinical professoriate, as it professes its work through instruction and role modeling for the next generation of physicians.

### 4. *Service*

Many organizational service activities are expected of more senior faculty in the Clinical Track, such as participation in committee work, IRB, administrative tasks, counseling, and special training programs.

Medical staff activities (such as leadership of or service on a quality assurance, risk management, or review committees) also pertain to this type of service. In addition, the University expects many of its staff to render extramural services to relevant professional organizations other schools, industry, governmental agencies, and the public at large.

Examples include:

- Memberships and offices held in professional societies.
- Continuing participation and leadership roles in medical service organizations (e.g., Cancer Society, Planned Parenthood, Cyprus Red Cross).
- Public service activities that relate to the health of the general public.

Usually a promotion is based on a balance between all 4 areas discussed above. In exceptional circumstances a faculty member may have had a profound effect on his or her environment in the role of clinician, educator and/or with extensive administrative responsibilities. This may qualify the candidate for appointment or promotion to a senior level, with such extraordinary service offsetting to some degree the usual expectation of scholarly activity. In this case, letters of support must explain the individual's impact with great detail and specificity.