

## **An Informal Guide to Academic Advancement for Clinician Researchers in the Radiology Department**

*Based on UCSD Appointment & Review Policies (PPM 230-20 and 230-28), with modifications for the Department of Radiology.*

These guidelines focus on the Clinician Researchers in the In-Residence and Ladder Rank series, whose Creative/Scholarly activities are primarily research accomplishments. This document is intended as an informal guide to accompany the specific Radiology Department guidelines detailed in a separate document: **Criteria for Promotion, Acceleration, and Merit Increase in the Department of Radiology**. That document includes some specific numbers, such as the expected number of papers published each year, although these are intended as practical guidelines rather than fixed criteria. The focus in the current document is on the types of activities you need to do to get promoted, and specifically on the key requirement to establish an independent research program. Also, it is important to know that as of 2017 the process of preparing and submitting your file for advancement has changed, as described in the last section of this document.

### **1. General criteria for advancement**

#### **A. Expected activities as a faculty member**

When you are considered for advancement you will be evaluated individually on your activities as a faculty member. In general, a model faculty member will be doing the following:

- 1) Engaging in productive, important research
- 2) Developing and maintaining independence in research
- 3) Establishing a good reputation in the field
- 4) Engaging in regular contact with students, residents and fellows in a teaching/mentoring role
- 5) Engaging in service activities.

One year before you are eligible for an advancement, the department will request that you provide information to support your work in each of these areas. A key component of this information is the Self-Assessment you provide that details your activities and accomplishments. Below are typical examples of these activities, but others may be appropriate for your individual advancement file.

**Productivity:** Published papers in good journals; other published works; and work done in grant-supported research.

**Independence:** First or senior authored papers; awarded grants on which you are the PI or Joint PI, with NIH grants being particularly strong; and strong external letters (for promotions) that directly address your independence and the importance of your work. In addition, second author papers can be useful here if it is clear that your role is that of an equal partner in the work that led to the paper.

**Reputation:** Participation at the national/international level in leadership roles in scientific societies; editor role for journals in your field; participation in scientific review panels; membership on advisory boards; and invited talks.

**Teaching:** Hours spent in contact with students/trainees; positive evaluations from students; responsibility for particular courses; regular participation in particular courses.

**Service:** Responsibility for managing resources that are available to the wider research community; participation in departmental and university committees; community outreach and engagement; leadership roles in scientific societies; editor role for journals in your field; participation in scientific review panels; membership on advisory boards; manuscript reviewer for journals in your field. Unless you are 100% funded, you are also expected to provide clinical radiology coverage in your Section/Division.

## **B. Advancement stages and terms**

- A *promotion* is an advancement in rank, and the two key promotions are from Assistant to Associate and from Associate to Full Professor.
- A *merit increase* is an advancement in salary step (e.g., Assistant Step 2 to Assistant Step 3). A faculty member is eligible for a normal merit increase every 2 years in the Assistant Professor and Associate Professor ranks and every 3 years in the Professor rank.
- A *4th year appraisal* is an evaluation of the faculty member's readiness for promotion from Assistant to Associate at the next review (in 2 years). A typical pattern is that the appraisal happens at the review for a merit increase from Assistant Step 3 to Assistant Step 4, with anticipation that the next step would be promotion to Associate Step 1.
- A *cross-over merit increase* is an increase in step within a lower rank instead of promotion to the higher rank. This can occur if the faculty member is deemed to be not ready for promotion, but is likely to be in 2 years. For example, advancement to Assistant Step 5 instead of Associate Step 1 is a cross-over merit. Because the salary scales are similar, the effect of this is to advance the salary step while delaying the promotion. When the promotion happens, it is usually to the second step of the new rank, so that the salary progression is maintained.
- An *acceleration* is skipping a Step, for example advancing directly from Professor Step 3 to Step 5.

- Advancement to *Professor Step 6* is a career review and often considered a promotion.
- Advancement from Professor Step 9 to *Off-Scale* is also a career review, and typically does not happen until the faculty member has four years at Step 9.

### **C. Advancement decisions**

In the UC system, the final decision about faculty advancement does not lie within the faculty member's department, but rather with the Committee on Academic Personnel (CAP), a committee composed of faculty members from across the University departments. When you are eligible for an advancement you will be asked to prepare a file supporting that advancement. Your file is first considered by the Radiology Advancement and Promotions Committee (RADAPC) to determine if the advancement is appropriate, based on the departmental guidelines. For promotions, external referee letters will be requested to evaluate your work. The full file, including outside letters and the departmental recommendation, is then submitted to CAP for a decision. It is important to note that CAP may not agree with the departmental recommendation. They may determine that teaching or service are not at a sufficient level, but their most common grounds for denying an advancement are a lack of independent scholarly productivity.

## **2. The guidelines in more detail**

### **A. Research**

The best way to advance successfully is to establish a focused body of independent work that is clearly yours and is considered to be important to your field. This must be documented, and the following are all key pieces of evidence: published papers, grants as PI, and external referee letters. Typically the papers are the most important, because they represent your scholarly contributions. In addition, though, there must be evidence that your scholarly contributions are important. Grants as PI and strong external reviewer letters are good evidence that your work is respected in your field. Remember that the papers are critical: without them it is hard to get grants and difficult for the external reviewers to recognize your contributions.

- *Published papers*: The goal is to demonstrate scholarly independence. This means that you need primary papers where your "ownership" is clear: corresponding author, first author, or senior author with a student or fellow as first author. At the Assistant level, first author papers often carry the most weight. Papers that are focused in one area are important because they demonstrate a coherent body of research. Many papers on which you are a co-author in a middle author position can be evidence that your skills

are important to a larger research program, but they do not demonstrate your scholarly independence.

- *Grants*: Although grants as PI are not strictly required, they are good evidence that your work has been critically evaluated and deemed important to your field. Grants are not in themselves a scholarly contribution, however, so they cannot substitute for published papers.
- *External reviewers*: Strong letters are critical, because these represent in a direct way how your work is perceived and valued in your field. Letters are obtained for all promotions, typically with half of the reviewers suggested by the candidate and half selected by the department.

## **B. Teaching**

In a Professor track you must teach. Teaching/mentoring comes in several forms, all of which must be documented on the Teaching forms you prepare for your file. Different categories of teaching are combined into a single “teaching credit” number. The minimum requirement, corresponding to one course per year, is a teaching credit of about 100. Think of this as a bare minimum—more credits are highly desirable. While teaching graduate students and postdocs within the lab may suffice, it is better to also do some teaching in established courses (with a UCSD course number). For all teaching activities, documented evidence in the form of teaching evaluations is critical. If you are teaching in a course, be sure to arrange with the instructor of record to get copies of your teaching evaluations. For one-on-one teaching or mentoring, letters are important. When you submit your file, include a list of individuals who could write testimonials to your teaching/mentoring abilities. When you are on clinical service, you will receive evaluations from the residents and fellows.

## **C. Clinical Service**

All clinical faculty participate in radiology coverage with appropriate clinical work for their section/division. Part of any radiologist's role is being a consultant to the clinical services and contributing to their clinical conferences.

## **D. Service**

This includes many activities in which you contribute your time and effort, including such things as managing a research facility, work on department or university committees, work for scientific organizations, organizing scientific meetings, serving as an editor on a journal, reviewing papers for journals in your field, serving on advisory boards, and service to the community.

### 3. Pitfalls to avoid

#### A. The independence of your research is unclear

The key requirement for promotion is *demonstrated scholarly independence*. Establishing your independence can be a particular problem if you work within a larger research group. CAP often considers the following as signs of a *lack* of scholarly independence, and your goal should be to avoid getting into this situation. If your work could be interpreted as lacking scholarly independence for any of the reasons below, you should carefully address the issue in the Self-Assessment you prepare for your file.

- *Lack of primary papers as first, senior or corresponding author.* Primary papers are the standard measure of independent scholarly work. If you have alternative scholarly work, you need to carefully justify why that work is equivalent to publishing scientific papers. Note that many papers as a collaborating author cannot substitute for primary papers, and may even heighten the sense of a lack of primary papers.
- *Lack of concentration of your primary papers.* If your primary papers are in several areas, it can be difficult to see a coherent research program that is important to your field. In addition, letters from external reviewers tend to be stronger when they can identify a clear body of work.
- *Previous mentors are a co-author on your primary papers.* If a senior scientist, particularly one who served in a mentoring capacity in the early stages of your career, is a co-author on your primary papers (particularly in the senior author position), CAP often questions whether there is real independence. In other words, CAP tends to want to see a sharp distinction between work you do in a mentored capacity (as a graduate student, postdoc, etc) and work you do as an independent faculty member.
- *Your funded work is not independent research.* It is not uncommon for an individual to be appointed as an Assistant Professor with their funding coming from grants on which a more senior scientist is PI, with the expectation that they will provide effort and expertise for that larger research program led by the more senior faculty member. This could lead you to be a co-author on many papers, but not as first or last author, and CAP does not consider these papers to be evidence of scholarly independence; CAP is looking for an independent research program. This scenario can create a tension between work that you must do in order to justify your funding, and work you need to do in order to establish your independent research program and earn promotion in a Professor series. It is important to recognize this potential tension early on, and discuss with the PI's on the grants that support you how you can establish your independence. Specifically, it is important to publish your own work without the more senior researchers as co-authors.

## **B. Weak external letters**

Outside letters are critically important for promotion. They provide key evidence for the independence of your work, the importance of your work, and for your role in your field. A weak letter often happens when an independent reviewer cannot distinguish your work from that of a more senior colleague. For example, if a more senior researcher, known to be the leader of a large and productive lab, is always the senior author on your papers, the reviewer may praise your work as a key supporting effort in the exceptional work being done in the senior researcher's lab. This will hurt your chances of promotion, because it reinforces the perception of a lack of independence in your own work. For this reason, it is important for you to establish a presence in your field based on work that is clearly your own independent research.

## **C. Use your Self-Assessment to address potential concerns in your file**

The Self-Assessment you submit is your best opportunity to present your work in a positive, coherent way. It forms the basis of the departmental review and of CAP's assessment. For this reason, it is important to take some care in preparing it. For example, beyond a simple list of your publications it is important to make clear which papers you consider to be your primary papers, the ones that contribute to your independent research program. These should be singled out and described, particularly emphasizing your role. If there could be any perception that these papers are not independent work on your part, it is important to address this concern in your Self-Assessment. For example, an area of concern would be any paper you consider a primary paper, but on which you are: 1) not the first author or last author; 2) first author, but with a more senior researcher as last author; or 3) not the corresponding author. All of these factors are potential reasons for CAP to not accept these papers as documented scholarly independence. The Self-Assessment is your chance to try to head off this interpretation at the beginning of the process. As another example, if you have papers in many areas, but no clear concentration in one area, in your Self-Assessment you should try to clarify the linking thread that makes your body of work a coherent research effort. Your Self-Assessment may not be enough to overcome these concerns, but it can potentially help strengthen your file and clarify what could be misperceptions. Note, though, that by far the best plan is to establish a body of work that is clearly independent, coherent and important, so that these issues don't have to be defended.

## **4. Change of series**

A change of series cannot be done in a simple way. In the past there were exceptions, for example when a Clinical Professor changed to the In-Residence series with a waiver of a full recruitment for the In-Residence Professor position. Waivers will be harder to obtain in the future. As of 2017, the normal procedure will be that the Department must first choose to create a position in one of the

Professor series (In Residence or Ladder rank) and then do an open recruitment. You may of course apply for that position once it is created. For example, this means that if as an In-Residence Professor, you are offered an FTE, there is not an automatic path to the Ladder rank position—the department must choose to create a position, and you would need to compete for that position.

## 5. Preparing your file

### A. New procedure as of 2017

For each advancement, either a merit or a promotion, you will be asked to submit a file one year before the advancement would go into effect. Your file will be compiled by the Academic Resource Center (ARC) based on the material you provide. *As of 2017, the process has changed substantially to reduce redundancy in the material included in your file. The key change is that your Self-Assessment takes on a more critical importance, and now must be done in a different style. It will be forwarded to CAP as part of your file in the form you submit it, and the report from the RADAPC and the Chair letter will be briefer.* The Self-Assessment is discussed further below.

### B. Typical timeline

- In the Spring before your file goes in, you will receive notice that the Department of Radiology is considering you for a merit increase or promotion, along with two documents, 1) Criteria for Promotion, Acceleration, and Merit Increase in the Department of Radiology and 2) Informal Guidelines for Advancement. You will also meet with a RADAPC member to review your qualifications for advancement. You will be asked to bring an updated CV or BioBib to the meeting. This is an opportunity to ask any questions you might have about the review process and to make your case for an acceleration or change of series.
- Also in the spring you will be contacted by ARC with instructions for the material you need to prepare. The required documents include your BioBib form, your Teaching forms, and your Self-Assessment. These materials are likely to be due in May for a promotion (because outside letters need to be requested) or June for a Merit increase.
- ARC will request a letter from your Division/Section Chief to comment on the quality and scope of your clinical work.
- ARC assembles your file and submits it to the Radiology Promotions Committee (RADAPC), where the file is evaluated to determine if you meet the criteria for advancement outlined in the document **Criteria for Promotion, Acceleration, and Merit Increase in the Department of Radiology**. The RADAPC will then prepare a very short report, focusing just on the question of whether or not you meet the Departmental requirements, without restating your accomplishments.

- In October a Radiology Faculty Promotions meeting is held, at which your file (if you are up for a promotion) will be presented to the faculty and discussed, and the faculty will then vote.
- The Chair's Letter will include a brief executive summary of your file, including the result of the vote.

## 6. Your Self-Assessment

This replaces the Narrative the department has used in the past, and differs in several ways:

- It should be written in the first person.
- It will be the only part of your file that goes to CAP in which your accomplishments are described in detail. RADAPC will not edit it or include it in their letter, although they may suggest that you change some things before you submit your final version to help clarify or emphasize key points.
- The required sections are:
  - A. Research and Scholarly Activities
  - B. Teaching Activities
  - C. Clinical Activities
  - D. University and Public Service

The official description of each of the four categories is in the document **Self-Assessment Instructions**. Note that in the past there was a fifth category, Professional Competence, that was often used to highlight activities that help establish your involvement and status in your field (e.g., awards, honors, invited talks, or other special recognition). With the new format, that information can be put in an introductory paragraph before the Research section.

For Section C, Clinical Activities, explain in detail your role and responsibilities in your Division/Section and the Department of Radiology. State the number of days per week on clinical service and your ER PM, week-end, and call responsibilities.