POLICIES FOR
APPOINTMENT, PROMOTION
AND TENURE

UNIVERSITY OF MICHIGAN
SCHOOL OF DENTISTRY

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I. REGULAR INSTRUCTIONAL TRACK

A. Definition of Regular Instructional Track

Members of the regular instructional track (often referred to as the tenure track) are expected to make contributions to the School of Dentistry in the areas of research, teaching, service, and clinical care if it pertains to their professional field. Full time regular instructional track faculty have no significant employment outside of the University of Michigan. Tenure may be granted by the Board of Regents to regular instructional track faculty at the ranks of associate professor and professor.

B. Ranks in the Regular Instructional Track

Regular instructional track faculty are appointed in the School of Dentistry at ranks of assistant professor, associate professor and professor. These titles are to be used for appointments of .5 fulltime equivalent (FTE) or greater within the School of Dentistry.

Assistant Professor: Appointment to this rank requires the DDS or equivalent degree and graduate training in dentistry or a health-related field; or the bachelor’s or equivalent degree in dental hygiene and graduate training in dentistry or a health-related field; or the PhD degree. This individual has yet to achieve exceptional status as a teacher or regional/national recognition in their professional field. Persons who have begun to publish scholarly work and/or who may have had teaching responsibilities, e.g., seminars, chairside instruction, small group interactions, and/or didactic activities before their initial faculty appointment may begin their faculty careers at the rank of assistant professor. Some others achieve this rank by being appointed from the rank of lecturer/clinical lecturer.

An appointment as an assistant professor at .8 FTE or greater starts the tenure clock. Initial appointment is for three years. Subsequent appointments are from one to four years. The maximum number of consecutive years one can be appointed fulltime at this rank is eight. There is no set minimum time between appointment to assistant professor and promotion to associate professor.

An appointment, reappointment, or promotion to assistant professor requires recommendation by the department chair, review by the School of Dentistry Appointment, Promotion, and Tenure (APT) Committee and approval by the School of Dentistry Executive Committee and the Dean.

Associate Professor: Appointment to associate professor is made only to individuals of well-established professional position and demonstrated scholarly ability that impacts their field. Those promoted or appointed to this rank must have achieved national recognition for scholarly accomplishment of significance as evidenced by: evaluations from independent national leaders in their field, national lectureships, memberships on editorial boards and peer review committees, significant involvement in peer organizations beyond membership, and scholarship. Scholarly independence is typical for associate professors. Usually this is evidenced by peer-reviewed publications published over the previous five
years. For those with a predominant expectation of clinical or laboratory research, a sustained level of external research funding is the norm. An associate professor must have demonstrated a significant contribution to the educational missions of this school or another institution. If it pertains to their professional field, high quality clinical care or clinical service is expected. Unless otherwise specified, appointments and promotions to associate professor are with tenure, although persons may be appointed as associate professor without tenure.

In summary, this rank is appropriate for someone who has met the requirements and qualifications for assistant professor and who also has established:

- a record of excellence in teaching
- a distinguished record of independent, scholarly contribution in a field, and a national reputation for significant contributions in this field
- a record of significant contributions in academic, professional, and University service

An appointment or promotion to associate professor requires recommendation by the department chair, review by the School of Dentistry Appointment, Promotion, and Tenure (APT) Committee, approval by the School of Dentistry Executive Committee and Dean, and, the Provost and Executive Vice President for Academic Affairs, and the Board of Regents. Only the reappointments of untenured associate professors need to be reviewed by the APT Committee. Tenured associate professor reappointments can be recommended by the department chair for review and approval by the School of Dentistry Executive Committee and Dean.

Appointment as an associate professor, without tenure, at a fraction of .8 FTE or greater starts the tenure clock. Initial appointment is for three years. Subsequent appointments are from one to four years. The maximum number of consecutive years one can be appointed .8 FTE or greater at this rank, without tenure, is eight. There is no set minimum time between appointment to associate professor with tenure and promotion to professor.

Professor: Appointment to professor is made only to persons of nationally and internationally established professional reputation and demonstrated scholarly ability. All of the expectations for the associate professor rank pertain in equivalent or greater measure for the professor. The difference between the ranks of professor and associate professor is primarily one of ongoing achievement usually over a period of five to ten years; promotion to professor is not automatic after a certain time in rank as associate professor. A person appointed to the rank of professor must have demonstrated continued scholarship, productive research, contributions to the teaching mission, organizational service, and clinical care if it pertains to their professional field. This ongoing achievement is roughly equivalent in quantity to the accomplishments that gained the previous promotional step. National and international impact must pertain to this person’s work. Continued and consistent publication that contributes significantly to an area of knowledge is essential. It is expected that the case for promotion to the professorial rank may reference the work done to achieve the rank of associate professor, but will be based on new work accomplished since the last promotional review. For those involved in clinical, educational, or laboratory research, sustained external funding is the norm.
Unless otherwise specified, appointments and promotions to professor are with tenure; persons may be appointed as professors without tenure.

In summary, this rank is appropriate for someone who has met the requirements and qualifications for appointment as associate professor and who also has established:

- a sustained record of excellence in teaching, usually including training of advanced students
- a sustained and growing record of scholarly eminence in a field, and a national reputation for leadership and outstanding contributions in this field
- a sustained record of substantive contributions in academic, professional, and University service.

An appointment or promotion to professor requires recommendation by the department chair, review by the School of Dentistry Appointment, Promotion, and Tenure (APT) Committee and approval by the School of Dentistry Executive Committee and the Dean, the Provost and Executive Vice President for Academic Affairs, and the Board of Regents.

C. Criteria for Appointment and Promotion in the Regular Instructional Track

Teaching, scholarship/research, and service are three areas examined in all appointment and promotion considerations. As we are a dental school, contributions to patient care and human welfare are also a substantial area of consideration for many of the faculty. All decisions on promotion and the awarding of tenure are predicated on programmatic goals and needs of the institution. Some individuals of great value to our institution have truly outstanding performance and contributions in one area when compared with the norm of faculty performance in that area, yet the performance in other areas may be satisfactory only. A recommendation for appointment, promotion, or the award of tenure to a nominee with such an asymmetrical mix of qualifications must be justified by the department chair. In all cases, the minimum requirements must be met. Longevity in a rank or position is not sufficient evidence of accomplishment or merit for promotion.

1. Teaching

Teaching is one of the primary functions of the University. All regular instructional track faculty must make a substantial time commitment to teaching. The criteria for teaching effectiveness that will be considered in evaluation are quality, innovation, impact upon students, and level of responsibility. Evaluation will be made in all areas of the faculty member’s assignments including classroom teaching, laboratory and clinical teaching, course coordination, seminar leadership, supervision of individual student projects, supervision of thesis or dissertation research, service on thesis or dissertation committees, and development of instructional materials. Input into the evaluation of teaching from peers, department chairs, students, and other sources may be used. Inclusion of a teaching portfolio that documents the development and improvement of teaching quality is required for all appointments and promotions of regular instructional track faculty.
a. Quality

The foundation of excellent teaching is mastery of the subject, including an in-depth knowledge of the current literature in one’s discipline. Essential components of the teaching effort are use of appropriate methods of instruction, effective planning and organization, appropriate methods of evaluation, and adequate feedback to students. Teaching of superior quality may be characterized by:

- utilization of highly effective oral, visual, and written communication techniques
- stimulation of critical thinking and problem solving
- encouragement of conceptual comprehension as well as factual recall
- encouragement of students to raise questions and express ideas
- performance of duties with enthusiasm and energy

b. Innovation

Teaching excellence includes some degree of innovative effort on the part of a faculty member. Innovations in teaching must accomplish more than mere change. Rather, new methods should show measurable advantages over those previously used. Examples of innovations in teaching are:

- use of new technology to improve teaching effectiveness
- development of new courses and programs or unique learning experiences
- use of educational research -- development of methods to evaluate individual teaching, courses, or curriculum

c. Impact Upon Students

Teaching should have a positive effect on students. The qualities of teaching that have positive influences on the student are numerous and may be difficult to measure. Some information regarding the qualities of teaching that are exhibited by a particular faculty member can be gained through informal observation, but a more complete appraisal may be obtained through formal evaluation of teaching. Examples of favorable student-faculty interaction are:

- student pursues independent study as a result of interaction with the faculty member
- students provide unsolicited favorable evaluation of faculty
Desirable characteristics of teachers include, but are not limited to:

- presents a balanced point of view
- treats students with respect
- extends teaching effort beyond the class, clinic, or laboratory assignments
- respects diversity of thought, culture, gender and race
- is fair, reasonable, and timely, in evaluation of students
- monitors student progress in a timely fashion; guides and provides supportive activities when appropriate
- compliments students for appropriate contributions or performance
- continually evaluates his/her own teaching
- promotes academic integrity and professional development

Student input in faculty evaluation is essential, but is only a portion of the information considered. Such input must be considered with the other measures of the quality of teaching.

*d. Level of Responsibility*

The level of responsibility assigned to the faculty member is a consideration in the promotion process. The extent to which the faculty member's responsibilities contribute to the teaching programs of the School is of importance, e.g., directing a course or having primary responsibilities for a teaching program.

2. *Scholarly Activity*

All regular instructional track faculty must be individuals of scholarly ability and achievement. Scholarship may be categorized in terms of the scholarship of discovery (basic research), scholarship of integration, scholarship of application, and scholarship of education. The University of Michigan is a research university committed to extending and generating knowledge. Accomplishment in scholarship is typically demonstrated by the quality and quantity of published work. Interdisciplinary work, success in training graduate and professional students (as attested to by academic/research positions obtained), participation and leadership in professional associations, and editing of professional journals are measures of success and stature in scholarship. Peer reviewed papers and grant funding are strong evidence of scholarship with high impact. Independent and peer-reviewed and/or industry sponsored funding is the norm in research-based careers. The value of industrial based funding which may not be subject to the same rigorous peer review standards is also recognized. There should be a strong prediction of continued excellence throughout the faculty member’s professional career.
a. Compilation, Synthesis, and Transferal of Current Knowledge

All scholarly activity supports teaching and professional service. The compilation, synthesis, and transferal of current knowledge are aspects of this activity that contribute to and advance scholarship. Such scholarly work may include:

- publication of textbooks
- publication of book chapters
- publication of review articles
- publication of case reports
- development of clinical procedures that are widely recognized and acknowledged as a valued contribution to the profession
- development of instructional materials (if published in peer-reviewed publication)
- publication of innovative teaching and learning
- documentation of standards of care or evidence-based practice

b. Research and Publication

Research is the generation of new knowledge, through use of the scientific method. Such research may be basic, clinical or applied. It culminates as manuscript publication in refereed scientific journals.

A reasonable and consistent level of research productivity is required; however, it is the quality of the investigative activity that is of primary importance in evaluation. The quality of research can be most readily measured through two peer-review mechanisms: publication in refereed journals of outstanding quality and the acquisition of grant funds from sources that evaluate proposals using a peer-review system. It is recognized that significant research can be conducted without the support of peer-reviewed grant awards. A research profile should have focus and continuity to be recognized as outstanding. Additional demonstrations of the research record may include:

- publication of original research in journal articles
- invitations to present one’s research at other universities or major scientific meetings
- receipt of awards or other special recognition for outstanding scholarly activity
- record of being a productive independent investigator or collaborator
- a record of primary or senior author status on a significant number of publications and co-authorship on others; Specific numbers of publications in each case are not as important as the quality and significance of the work.
3. Service

Service may consist of service in the School of Dentistry and the University, in the public sector, or in the national organizations of a faculty member’s peer group. Service may include participation in committee work and other administrative tasks, counseling, internal review boards, and special training programs within the School of Dentistry and the University. The University also anticipates that many of its instructional faculty will render extramural services to other schools, industry, relevant professional organizations, governmental agencies, and the public at large. These services may be paid (in compliance with University guidelines), advisory, or volunteered. Organizational and volunteer services are of importance, although given less weight in promotion and appointment decisions than are teaching, scholarship, and clinical activities.

Many faculty have a professional role related to health care, generally in terms of clinical responsibility, teaching, or research. Competence is expected at entry levels in the faculty ladder and excellence is expected at the higher levels. Excellence is demonstrated by documentation from independent authorities in the relevant field, regional reputation, and published work of clinical successes, innovations, or insights.

a. Service to the University and the Profession

All faculty members must share in the work necessary to maintain the operation of the institution. Furthermore, faculty are expected to contribute to the growth of the School and University through efforts that are aimed at developing, evaluating, reviewing and improving programs and facilities. Also, the faculty should contribute to the maintenance and growth of their profession. Examples of other service activities related to the University and the profession are:

- continuing education
- membership on boards and committees or other assignments within the School of Dentistry, University, or profession
- leadership role in curriculum development and implementation, clinical activity, curricular research programs
- mentoring and advising
- contribution to faculty governance
- membership in and contribution to professional organizations
- appointment as a section or symposium chairperson
- consultant to professional journals as a manuscript referee, reviewer, etc.
- consultant to accrediting and other educational review boards
- membership on boards and committees in the community-at-large in a professional capacity
- service on NIH study sections
- editorships
b. Clinical Activity

Clinical activities and accomplishments may include:

- certification by specialty board or achievement of Diplomate status
- awards that recognize clinical expertise
- consultation as requested by other faculty members
- membership on a specialty examining board
- service as a consultant on patient care, e.g., third-party payment groups, courts, health care organizations
- innovations to make clinical care more efficient and effective
- volunteer patient care and service during community service related events
II. CLINICAL INSTRUCTIONAL TRACK

A. Definition of Clinical Instructional Track

The clinical instructional track (often referred to as the clinical track) in the School of Dentistry actively contributes to the clinical and teaching missions of the School of Dentistry, as well as to scholarship and administration. Although there is no mandated ascension in rank, ascent to senior level titles requires scholarly engagement and productivity as well as excellence in health care and teaching. Full time clinical instructional track faculty have no significant employment outside of the University of Michigan. Clinical instructional track faculty are not eligible for tenure.

B. Ranks in the Clinical Instructional Track

Clinical instructional track faculty are appointed in the School of Dentistry at the ranks of clinical lecturer, clinical assistant professor, clinical associate professor and clinical professor. These titles are to be used for appointments of .5 FTE or greater within the School of Dentistry.

Clinical Lecturer: A clinical lecturer is fully trained to provide clinical care and is qualified to participate in educational programs at the School of Dentistry. Appointment to this rank requires evidence that the individual has received an appropriate dental or dental hygiene education, graduate education where appropriate, and documentation of clinical competence and licensure. Certification by the relevant professional board must be pending or completed recognizing that exceptions for some internationally trained dentists/dental hygienists may be granted by the School of Dentistry. 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 dental environment, potential as a teacher and clinical role model, and potential for growth in clinical and scholarly areas. Scholarly activities such as publication in a candidate’s professional field are encouraged but not required.

An appointment, reappointment, or promotion to clinical lecturer requires recommendation by the department chair, review by the School of Dentistry Appointment, Promotion, and Tenure (APT) Committee and approval by the School of Dentistry Executive Committee and the Dean.

Clinical Assistant Professor: A clinical assistant professor has demonstrated ability in teaching and clinical practice. Ability and accomplishment in dental education are expected. Appointment or promotion to this rank requires evidence of clinical competence. 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. Letters, which may be from local sources, must attest to the quality of clinical practice. The candidate’s teaching and organizational service to his or her department (here or at another institution) in areas related to clinical care and education should be documented. Invited presentations as well
as publication of articles in professional journals, chapters, reviews, abstracts, textbooks, videotapes, and other educational materials are evidence of scholarly engagement and are typical expectations of faculty at this rank. At times, documentation of exceptional teaching and service, e.g., awards, citations, speaking invitations, may support an appointment at this rank for an individual who may not yet have produced any scholarly works.

An appointment, reappointment, or promotion to clinical assistant professor requires recommendation by the department chair, review by the School of Dentistry Appointment, Promotion, and Tenure (APT) Committee and approval by the School of Dentistry Executive Committee and the Dean.

An initial three year appointment is usual, with an appointment review completed by the end of the third year. If non-reappointment is suggested after the first review period, the Chair will send a letter of non-reappointment no later than the first quarter of the fourth year, a minimum nine month notice. Clinical instructional track reappointments at the level of assistant professor will be for additional terms of no more than four years each. Individuals at the clinical assistant professor rank are strongly encouraged to seek promotion before or during the seventh year after appointment.

It is expected that clinical assistant professors will progress to clinical associate professors in 7 years. However, in circumstances where an individual offers a unique contribution to teaching and service in the School, a reappointment at clinical assistant professor may be renewed up to a 4 year period on the recommendation of the chair and approval of the Executive Committee and the Dean.

Clinical Associate Professor: A clinical associate professor has demonstrated excellence in teaching and clinical service. Typically, the candidate should have produced scholarship that influences knowledge and/or clinical care. Appointment or promotion to this rank requires evidence that development as a clinician has progressed to the point of establishing broad interdepartmental and regional recognition by professional colleagues. Typically, a reputation of this sort is documented by letters from impartial external sources; administration or leadership in local, regional, or national organizations; presentations on clinical topics at local, regional, or national meetings; and articles in professional publications. Although years in rank alone neither compels nor precludes advancement to clinical associate professor, promotion after less than five years in rank is based on extraordinary accomplishment produced during those years in rank.

Clinical associate professors are expected to be role models of collegiality, integrity, scholarship, and excellence in their professions. A person promoted to this level is likely to have achieved an ongoing influence on quality of dental service. Examples include leadership in organization of clinical services, improvements in quality of care, measurements of outcomes of patient satisfaction, and involvement in utilization management activities. Contributions in these areas are documented by relevant peers.

Evidence of continued contribution to dental education is expected. This may be through customary teaching situations (lectures, clinical instruction of students and residents, mentorship pairing, or scholarly work with trainees) or through the preparation of
educational materials, including educational brochures and learning aids, textbook chapters, reviews, videotapes, Web based learning, and other instructional interfaces. 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.

Evidence of excellence in clinical service or teaching may include favorable departmental evaluation, formal awards for performance, or invitations to speak at professional meetings or other institutions. In general, scholarship should be judged with the principle of peer evaluation and recognition, whether the products of the scholarly activity are papers, books or chapters, invited lectures, or some other mode of communicating results and ideas.

An appointment, or promotion to clinical associate professor requires recommendation by the department chair, review by the School of Dentistry Appointment, Promotion, and Tenure (APT) Committee and approval by the School of Dentistry Executive Committee and the Dean and the Provost and Executive Vice President for Academic Affairs.

An initial three year appointment is usual, with an appointment review completed by the end of the third year. If non-reappointment is suggested after the first three year period, the Chair will send a letter of non-reappointment no later than the first quarter of the fourth year (minimum nine-month notice). Clinical instructional track re-appointments at the level of the associate professor will be for additional terms ranging from one to seven years in duration, with five years or seven years reappointment being the norm. Reappointments in the associate professor rank are made by the department chair and are approved by the Executive Committee.

Although there is no requirement for ascension in rank, individuals at the clinical associate professor rank are strongly encouraged to seek promotion by the seventh year following initial appointment to that rank.

Clinical Professor: A clinical professor performs teaching and clinical service as described for clinical associate professor, usually over an additional period of five-to ten-years and has attained further regional or national recognition for teaching and clinical expertise. Typically, the same qualitative criteria used for the clinical associate professor apply with expected quantitative differences in the number and impact of achievements. Service in regional or national dental societies, associations or boards is typical. Faculty at this level often have substantial products of their scholarly activity that have been subjected to peer review and that have resulted in broad peer recognition in the area of clinical dentistry or dental education. Scholarship should be judged on the basis of peer evaluation and recognition, whether the products of the scholarly activity are papers, books or chapters, invited lectures, or other modes of communicating observations, investigations, results, and ideas.
An appointment, or promotion to clinical professor requires recommendation by the department chair, review by the School of Dentistry Appointment, Promotion, and Tenure (APT) Committee and approval by the School of Dentistry Executive Committee and the Dean and the Provost and Executive Vice President for Academic Affairs.

An initial three year appointment is usual, with an appointment review completed by the end of the third year. If non-reappointment is suggested after the first three year period, the chair will send a letter of non-reappointment no later than the first quarter of the fourth year (minimum nine month notice). Clinical instructional track reappointments at the level of professor will be for additional terms of one to seven years in duration, with five to seven year appointments being the norm. Reappointments to the clinical professor rank are made by the department Chair and are approved by the Executive Committee.

C. Criteria for Appointment and Promotion in the Clinical Instructional Track

The criteria for appointment and promotion in the clinical instructional 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 service, e.g., organizational, administrative, community, volunteerism, or in scholarship. Supporting letters must specifically address how the nominee made an impact, with a detailed description of the work and its influence. Longevity in a rank or position is not sufficient evidence of accomplishment or merit for promotion.

In exceptional circumstances, for a faculty member who has had a profound effect on his or her environment in the role of clinician or educator, this alone may qualify the candidate for appointment or promotion, with such extraordinary service offsetting the usual expectation of some scholarly activity. In this case, letters of support must explain the individual’s impact with great detail and specificity.

Although tenure is not a facet of the School of Dentistry clinical instructional track, the University and the School of Dentistry envision parallelism between the clinical instructional track, the regular instructional track, and the research track in the mechanics of appointment and promotion. Long-term (up to seven years, renewable) commitments can be made in this track.

1. Teaching

Faculty are expected to be knowledgeable about the literature in their field of expertise. The faculty member should demonstrate the ability to assimilate and integrate this knowledge and the ability to teach such knowledge effectively. Successful teaching of dental students and residents is a cornerstone of the clinical instructional track. Educational excellence may be demonstrated in a variety of settings. The educational roles of clinical faculty may involve a broad range of educational activities targeted at diverse audiences such as organizing or participating in local or regional Continuing Education activities or developing patient education tools, health profession education modules, or
public health education programs. In addition to the usual peer sources, letters from former trainees or from colleagues may document educational impact.

The criteria for teaching effectiveness that will be considered in evaluation are quality, innovation, impact upon students, and level of responsibility. Evaluation will be made in all areas of the faculty member's assignments including classroom teaching, laboratory and clinical teaching, course coordination, seminar leadership, supervision of individual student projects, supervision of master's theses and by petition to the Rackham Graduate School serve on a dissertation committee, service on thesis or dissertation committees, and development of instructional materials. Inclusion of documentation of teaching effectiveness that highlights the development and improvement of teaching quality will be required at the time of the faculty member’s promotion review.

a. Quality

The foundation of excellent teaching is mastery of the subject, including an in-depth knowledge of the current literature in one’s discipline. Essential components of the teaching effort are use of appropriate methods of instruction, effective planning and organization, appropriate methods of evaluation, and adequate feedback to students. Teaching of superior quality may be characterized by:

- utilization of highly effective oral, visual, and written communication techniques
- stimulation of critical thinking and problem solving
- encouragement of conceptual comprehension as well as factual recall
- encouragement of students to raise questions and express ideas
- performance of duties with enthusiasm and energy
b. Innovation

Teaching excellence includes some degree of innovative effort on the part of a faculty member. Examples of innovations in teaching are:

- utilization of new technology to improve teaching effectiveness
- development of new courses and programs or unique learning experiences
- use of educational research -- development of methods to evaluate individual teaching, courses, or curriculum

c. Impact Upon Students

Teaching should have a positive effect on students. The qualities of teaching that have positive influences on the student are numerous and may be difficult to measure. Some information regarding the qualities of teaching that are exhibited by a particular faculty member can be gained through informal observation, but a more complete appraisal may be obtained through formal evaluation of teaching. Examples of favorable student-faculty interaction are:

- student pursues independent study as a result of interaction with the faculty member
- students provide unsolicited favorable evaluation of faculty

Desirable characteristics of teachers include, but are not limited to:

- presents a balanced point of view
- treats students with respect
- extends teaching effort beyond the class, clinic, or laboratory assignments
- respects diversity of thought, culture, gender and race
- is fair, reasonable, and timely, in evaluation of students
- monitors student progress in a timely fashion; guides and provides supportive activities when appropriate
- compliments students for appropriate contributions or performance
- continually evaluates his/her own teaching
- promotes academic integrity and professional development

Student input in faculty evaluation is essential, but is only a portion of the information considered. Such input must be considered with the other measures of the quality of teaching.

d. Level of Responsibility

The level of responsibility assigned to the faculty member is a consideration in the promotion process. The extent to which the faculty member's responsibilities contribute to the teaching programs of the School is of importance, e.g., directing a course or having primary responsibilities for a teaching program.
2. Scholarly Activity

Scholarly engagement in relevant professional arenas is typical of senior level clinical instructional track faculty members. Research achievements, though not required of entry level clinical faculty members, are a welcome addition to their records. With rare exceptions (see page 11, section C., paragraph 2) promotion to the senior levels of the clinical instructional track requires scholarly engagement and productivity.

Scholarly activity is a central mission of a research university, therefore, all faculty should engage in scholarly activity. The quality of any scholarly activity should be determined by peer review. Scholarship has two major components:

- the compilation, synthesis, and transferal of current knowledge, and
- the generation of new knowledge through original research and publication of the findings

Promotion to the senior levels of the clinical instructional track, with rare exception, requires scholarly engagement and productivity. Quality of scholarship or academic achievement is evidenced by

- published and other creative work
- training graduate and professional students in scholarly methods
- participation and leadership in professional associations
- editing of professional journals

a. Compilation, Synthesis, and Transferal of Current Knowledge

All scholarly activity supports teaching and professional service. The compilation, synthesis, and transferal of current knowledge is one aspect of this activity that contributes to and advances scholarship. Such scholarly work might take many forms that may include:

- a record of author status on a number of journal articles
- abstracts of oral or poster presentations at regional or national meetings
- the publication of textbooks
- book chapters, E-Books
- educational websites
- review articles
- case reports
- development and documentation of new technical and clinical procedures widely recognized by the profession
- instructional materials (if published in peer-reviewed publication)
- documentation of standards of care or evidence-based practice
b. Original Research and Publication

Research is the generation of new knowledge, through use of the scientific method. Such research may be basic, applied, behavioral, clinical or in health services. It culminates as manuscript publication in refereed scientific journals. A reasonable and consistent level of research productivity is required; however, it is the quality of the investigative activity that is of primary importance in evaluation. In addition, the research should have a focus. Other evidence of a significant research record may include:

- invitations to present one’s research at other universities or major scientific meetings;
- receipt of awards or other special recognition for outstanding scholarly activity;
- a record as a productive independent investigator or collaborator
- a record of author status on a number of journal articles
- specific numbers of publications in each case are not as important as the quality and significance of the work
- publication of research abstracts

3. Service

Many organizational service activities are appropriate to faculty in the clinical instructional track, such as participation in committee work, IRB’s administrative tasks, counseling, and special training programs. Activities (such as leadership of or service on a quality assurance, risk management, or utilization review committee) also pertain to this type of service. In addition, the University also expects many of its staff to render extramural services to other schools, industry, governmental agencies, relevant professional organizations and the public at large. Examples include:

- memberships and offices held in professional societies
- public service activities that relate to the health of the general public
- continuing participation and leadership roles in medical/dental service organizations
- appointment as a section or symposium chairperson

a. Clinical Activity

A clinical instructional track faculty member’s work is usually dominated by clinical responsibilities and a high level of clinical competency is expected in all ranks. Clinical excellence may be documented by letters from University of Michigan faculty and current or former colleagues as well as former trainees. Letters typically attest that the nominee is considered by the dental 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 and should provide an objective evaluation. A clinician is a role model for dental students and must demonstrate collegiality, integrity, professional excellence, respect for diversity, engagement in community, and commitment to individual learning and scholarship.
Faculty members are expected to provide patient care within the University system. Patient care will be evaluated only when it is an assigned responsibility of the faculty member. Examples of activities relating to patient care include:

- certification by specialty board or achievement of Diplomate status
- awards that recognize clinical expertise
- consultation as requested by other faculty members
- membership on a professional examining board
- service as a consultant on patient care, e.g., third-party payment groups, courts, health care organizations
- innovations to make clinical patient care more efficient and effective

b. Continuing Education

Continuing education is a special responsibility of the School of Dentistry and its faculty members. The state, the profession, and the general public depend on the School for help in maintaining high standards of clinical practice in this area of health care delivery. Continuing education is both an instructional and public service activity that the School of Dentistry is uniquely qualified to provide. Continuing education, as a special responsibility, may not be applicable to all faculty members. This area will be evaluated when appropriate.
Refer online to the School of Dentistry Addendum (approved by governing faculty on October 19, 2009) and the University’s Guidelines for the Appointment and Promotion of Research Track Faculty issued by the OVPR made effective September 1, 2009.
IV. SUPPLEMENTAL APPOINTMENTS AND OTHER TITLES

A. Definition of Supplemental and Other Titles

Supplemental appointments are used for special faculty appointments that fall outside the standard categories. Supplemental appointments are made under the same criteria as appointments in the regular tracks to which they correspond. For example, the criteria for a visiting or adjunct associate professor are the same as for an associate professor in the regular instructional track.

B. Supplemental Appointments

Visiting: The term visiting is used for persons primarily identified with another institution of higher education who assume some teaching responsibility at the University of Michigan and for persons whose employment with the University will be explicitly temporary. These appointments are for one year or less and may be extended only under unusual circumstances. They are not tenured appointments. Qualifications at each rank are consistent with those of the regular instructional track, clinical track, and research track.

- this title may be used in conjunction with all instructional, clinical, and research titles.
- appointees to this title must have employment responsibilities with another institution of higher education and are usually on leave from that institution, e.g., a professor from UCSF is at the University for a six month sabbatical
- appointees may be full-time, with a maximum length of appointment of one year
- written requests to extend appointments beyond one year may be granted under unusual circumstances

Adjunct: These titles are to be used for faculty appointments of .49 FTE or less within the School of Dentistry, including those courtesy (without salary) appointments and Dean’s Faculty members. The term adjunct is assigned to faculty members in any rank whose primary employment responsibilities lie outside the University or in another capacity within the University. Adjunct appointments require annual renewal. Qualifications at each rank are consistent with those of the regular instructional track, clinical track, and research track. However, special consideration for clinical skills and teaching contributions should be given to individuals in this track.

Emeritus: An honorary title received upon retirement (for titles in the regular instructional track, clinical instructional track and research professor track) given by the Regents on recommendation of the School. An active status appointment may be requested for retirees who wish to continue their clinical, research, or service activities to the institution. An active appointment is necessary if the retiree requires clinical privileges, receives payment for clinical services or teaching, or continues to be formally involved in research grant activity.
C. Supplemental Promotions

Visiting faculty are appointed for a year or less and are normally not involved in any promotion considerations. The appointment of each adjunct faculty member, however, is subject to annual review and renewal. A request for promotion to a higher level may be made, with documentation, as would be required in the corresponding regular track.

D. Joint Appointment Criteria

Joint appointments are implemented in a secondary or tertiary department (usually in another school or college of the University) for instances of substantial and ongoing academic or clinical collaboration beyond routine collegial interactions. The primary or home department usually is responsible for the paperwork. Joint appointments are extraordinary; they are not used for perfunctory title dissemination or routine recruitment enticements. They may be funded or unfunded. Joint appointments, without tenure, can be initially requested for up to three years, and can be administratively renewed for additional years at the request of the department.