



a place of mind

THE UNIVERSITY OF BRITISH COLUMBIA

UBC DEPARTMENT OF ANESTHESIOLOGY, PHARMACOLOGY & THERAPEUTICS

GUIDELINES FOR PROMOTION TO CLINICAL ASSOCIATE PROFESSOR

1. Promotions should be regarded as recognition of sustained activity by one's peers within and outside the University community in achievement, excellence and distinguished contribution and, not simply, as recognition of expected performance or seniority.

It is not expected that all faculty will necessarily progress through the University rank. Depending on the circumstances and extent of contribution, it may well be that the final rank for a given member of the faculty is that of Clinical Assistant Professor. Promotion will follow in sequence from Clinical Assistant to Clinical Associate.

It would be expected that faculty members being considered for promotion be compliant with the RCPSC document: Objectives for Training for Anesthesiology under the CanMEDS Professional Role: section 2.2: Fulfill the regulatory and legal obligations required of current practice

2. When a review for promotion is pending, it is the **responsibility of the candidate** to provide the following information to the UBC Department Head:
 - a. A summary letter and letter of recommendation from either the site Department Head of the candidate or a designate of the site Head.
 - b. Up-to-date, signed and dated Curriculum Vitae in UBC format which should include publications record (with an indication of the candidate's contribution to the publication)
 - c. Copies of publication, as available or other written work should be available for peer assessment. It is to form part of the case for promotion
 - d. Copies of Teaching Dossier or Teaching evaluations (Evidence of Effective Teaching) if teaching is core to the application for promotion.
3. Candidates for promotion to Clinical Associate Professor of Anesthesiology will be evaluated in accordance with their contributions in one or more of the areas of: clinical work, education, administration/service and research. A positive case will be made if it is shown that an individual is a leader/developing leader in the field or possesses above average stature and expertise in a field, and that their demeanor and performance is of the highest standard.

4. A Clinical Associate Professor is expected to be involved in academic activities outside of the faculty member's local hospital. This means one expects to see evidence such as being invited to speak at professional society meetings, in continuing professional educational programs or at other institutions; provincial and national involvement in societies relevant to their practice; and invited presentations outside of UBC.
5. Consideration for promotion from Clinical Assistant Professor to Clinical Associate Professor is normally done after 7 years; consideration will be made for individuals showing extraordinary academic contributions after holding Clinical Assistant Professor rank for 5 years.
6. Clinical Associate Professor rank is held for 7-10 years before either consideration for promotion or reappointment at the same rank.
7. If the candidate does not hold an FRCPC in Anesthesiology, please provide an explanation.

Clinical:

Recognized by his/her peers as being an excellent clinician who has made documented significant contributions to professional practice in his/her hospital, agency or professional organization, in the FoM and UBC.

Education:

It is expected that all clinical faculty will be actively involved in the training of medical students and residents from anesthesiology and other specialties. Evidence of superior teaching contribution will come from involvement in development of curricula, didactic teaching to students or residents; or participation as a speaker or organizer in a continuing medical education program. Evidence of education contribution can be shown through acquisition of teaching awards such as: the Master Teacher Award and the Giannoulis Teaching Award, or outstanding reviews by students or residents for the candidate's teaching, either clinical or didactic. Teaching evaluations are excellent additions to a teaching portfolio, and clinical faculty seeking promotion based upon education contributions are encouraged to seek teaching evaluations from students and peers. Other criteria for establishing evidence of success include the development of educational materials, or the development of training materials for patients.

Service:

Service to the University and the Community is valued and includes service performed for the benefit of hospital department, university department, faculty, continuing studies or other parts of the University and for professional organizations, healthcare organizations and the community at large. Service in

the Department of Anesthesiology, Pharmacology & Therapeutics in the Faculty of Medicine encompasses includes participation in department committees and holding formal positions within the academic structure of the department.

Research:

Research may include quality assurance activity. Evidence of peer-reviewed publications and acquisitions of referee grants is the highest indication of success in research. Invited presentations at national or international media, symposia, or other universities are also considered first order evidence of research strength. Research activity, as a primary investigator, or in collaborative studies, will contribute to, but is not necessary for promotion

Once the package has been received by the department head and completeness is assured, the package will be submitted to the Department Appointment, Reappointment and Promotions Committee (DARPT) for evaluation by the Clinical Faculty sub-committee members. A successful promotion occurs when 2/3 or greater of eligible committee members attending the promotions meeting vote in favour of the candidate. The UBC Department Head or DARPT co-Chair (Clinical Faculty) acts as Chair, but does not have a vote.