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25 Guidelines for Appointment to Junior Faculty Rank and Joint Appointments may be found in Appendix A of the SOM Bylaws.
I. Guidelines for Appointment or Promotion to Senior Faculty Rank and/or Tenure

A. Introduction

The faculty of medicine is engaged in teaching, research, patient care, and other professional activities. While it is expected that all faculty members will teach and that excellence in teaching is a requirement for senior rank, the nature and extent of the other activities vary among faculty members. In recognition of this, different professional categories have been designed which differ in their requirements for attainment of senior rank.

A faculty member’s job description and academic professional category should match the allocation of his/her time. This requires an active dialogue between department chair and faculty member to ensure that each faculty member’s professional category is a true reflection of his/her activities. The criteria for appointment, promotion, and tenure reflect the diverse activities of the faculty and provide a basis by which performance may be rewarded. In determining academic rank, the candidate will be evaluated by effort and accomplishment in teaching, research, patient care, and other professional activities. Insofar as possible, these criteria establish high standards that are reflected in objective evaluations. These evaluations should be readily interpretable by the Senior Appointments and Promotions Committee (SAPC).

SOM faculty paid by the University and faculty paid by affiliated institutions at least 80% time and effort must choose a professional category.26

B. General Factors to be Weighed in Evaluating Different Activities

In all cases, the following criteria are to be considered in evaluating the teaching, research, and patient care activities of candidates for appointment or promotion to senior rank. However, the degree to which each criterion must be satisfied will vary in the different professional categories and will differ for appointment or promotion to Associate Professor and Professor.

1. Teaching
   a. Knowledge and level of mastery of subject matter.
   b. Effectiveness in oral and written communication; ability to lecture and to conduct conference and discussion groups.
   c. Ability to stimulate student interest, to encourage independent study, and to direct student research projects.
   d. Development of teaching and evaluation methods.
   e. Effectiveness as a student mentor.
   f. Leadership in a teaching program (e.g., clerkship, medical school course, graduate program).

2. Research
   a. Quality, independence, originality, and importance of published work.
   b. Continuity of record of scientific contribution.

26 Faculty hired prior to May 11, 1990 need not select a professional category until nomination for promotion, at which time selection of a professional category must be made. The usual two year period required between selection of a professional category and consideration for promotion is waived.
c. Level of acceptance by peers, and national and international standing.
d. Quality of presentations at local, national, and international meetings.
e. Leadership in a research program, or significant, essential and independent contributions to the work of more than one principal investigator on multiple projects.

3. Patient Care
   a. Role model of excellence in clinical work for students and house staff.
   b. Demonstrated sensitivity and responsibility to patients.
   c. Recognition by peers.
   d. Level of knowledge and skill in professional field or specialty.
   e. Competence in all aspects of patient management.
   f. Leadership in health care programs.

4. Other Professional Activities
   a. Participation and leadership in critical intramural committees (e.g., Admissions committee, SAPC, etc.).
   b. Leadership role in department or hospital as a section or division chair.
   c. Participation and leadership in professional societies, scholarly organizations, editorial boards, scientific advisory boards, and research review panels on a local, state, national, and international level.

C. Specific Requirements for Appointment or Promotion to Senior Rank

1. Investigator

   For appointment or promotion to Associate Professor based on performance as an investigator, the following requirements must be met:

   a. Active and effective participation in at least one of the following levels of education: undergraduate, graduate, or postgraduate (which includes other health professionals).

   and either b. or c.

   b. A record of sustained\textsuperscript{27} publication in refereed journals of results from original and independent investigations that are recognized as important. The applicant for appointment or promotion should be a contributor of major ideas and innovations and should have an established reputation as an original investigator outside the University of Connecticut Health Center. Examples of reputation are the importance, originality, independence and sustainability of one’s scientific contributions.

   c. A record of sustained\textsuperscript{28} publication in refereed journals of important work resulting from collaborations with more than one principal investigator on multiple projects to which the candidate has contributed his/her unique skills. The applicant must have made significant, essential and unique contributions to this

\footnote{\textsuperscript{27} In these contexts, the attributes and relative magnitudes that these words are meant to denote are as follows. “Sustained” suggests repeated publications at regular intervals throughout the current appointment; “periodically” implies repeated publications at a lower frequency than “sustained”; and “occasional” indicates the least frequent publication rate, where publications may occur at irregular intervals.}

\footnote{\textsuperscript{28} ibid.}
published work. One indicator of these contributions is for the candidate to be listed as key personnel or investigator with collaborators. The candidate must also periodically\textsuperscript{29} be the corresponding author of refereed articles in journals that are devoted largely to the individual’s area(s) of professional expertise.

Appointment or promotion to the rank of Professor will require:

a. A national reputation within his/her field as evidenced by memberships in study sections, advisory groups, prestigious professional societies, etc., or by awards, prizes, or other notable academic achievements.

b. Active and effective participation in at least one of the following levels of education: undergraduate, graduate, or postgraduate (which includes other health professionals).

c. An established reputation as an original or essential investigator outside the University of Connecticut Health Center.

and either d. or e.

d. A record of sustained\textsuperscript{30} publication of original and independent research findings that have had a demonstrable impact on the field. Examples of Recognition are the importance, originality, independence and sustainability of one’s scientific contributions.

e. A record of sustained\textsuperscript{31} publication in refereed journals of important work resulting from collaborations with more than one principal investigator on multiple projects to which the candidate has contributed his/her unique skills. The applicant must have made significant, essential and unique contributions to this published work. An example of these contributions is continued recognition as key personnel or investigator with collaborators. The candidate should also periodically\textsuperscript{32} be the corresponding author of refereed articles in journals that are devoted largely to the individual’s area(s) of professional expertise.

2. **Clinician-Investigator**

For appointment or promotion to Associate Professor based on performance as a clinician-investigator, the candidate must demonstrate:

a. Active and effective participation in at least one of the following levels of education: undergraduate, graduate, or postgraduate (which includes other health professionals).

b. Recognition as an authority in a clinical specialty both inside and outside the immediate medical community, or a demonstrably effective leadership role in a department or hospital.

c. An established reputation as an original and important investigator or contributor outside the University of Connecticut Health Center and the immediate medical community.
and either d. or e.

d. A record of sustained\textsuperscript{33} publication in refereed journals of results from original and independent investigations that are recognized as important. The applicant for appointment or promotion should be a contributor of major ideas and innovations. Examples of reputation are the importance, originality, independence and sustainability of one’s scientific contributions.

e. A record of sustained\textsuperscript{34} publication in refereed journals of important work resulting from collaborations with more than one principal investigator on multiple projects to which the candidate has contributed his/her unique skills. The candidate must have made significant, essential and unique contributions to this published work. One indicator of these contributions is for the candidate to be listed as key personnel or investigator with collaborators. The candidate should also be the occasional\textsuperscript{35} corresponding author of refereed articles in journals that are devoted largely to the individual’s area(s) of professional expertise.

Appointment or promotion to the rank of Professor will require:

a. Active and effective participation in at least one of the following levels of education: undergraduate, graduate, or postgraduate (which includes other health professionals).

b. A national reputation within his/her field as evidenced by memberships in study sections, advisory groups, prestigious professional societies, or by awards, prizes, or other notable academic achievements.

c. Superior accomplishment in a clinical specialty or effective departmental, hospital, or institutional leadership.

d. An established reputation as an original and important investigator or contributor outside the University of Connecticut Health Center and the immediate medical community.

and either e. or f.

e. A record of sustained\textsuperscript{36} publication of original and independent research findings that are important. Examples of recognition are the importance, originality, independence and sustainability of one’s scientific contributions.

f. A record of sustained\textsuperscript{37} publication in refereed journals of important work resulting from collaborations with more than one principal investigator on multiple projects to which the candidate has contributed his/her unique skills. The candidate must have made significant, essential and unique contributions to this published work. An example of these contributions is continued recognition as key personnel or investigator with collaborators. The candidate should also be the occasional\textsuperscript{38} corresponding author of refereed articles in journals that are devoted largely to the individual’s area(s) of professional expertise.

\textsuperscript{33}{\textit{ibid.}}
\textsuperscript{34}{\textit{ibid.}}
\textsuperscript{35}{\textit{Ibid.}}
\textsuperscript{36}{\textit{ibid.}}
\textsuperscript{37}{\textit{ibid.}}
\textsuperscript{38}{\textit{Ibid.}}
3. **Clinician-Scholar**

For appointment or promotion to Associate Professor based on performance as a clinician-scholar, the following requirements must be met:

a. Development of original teaching materials or major improvements over those used elsewhere (such as new curriculum or educational programs, textbooks or chapters, syllabi, computer programs, videotapes, evaluation mechanisms, etc.), or continuing publication of clinical observations, reviews, or analytic studies in peer-reviewed journals. Should be contributor of major ideas and innovations.

b. Effective participation in clinical training and service. Teaching may include medical students, residents, specialty fellows, or postgraduate students. Recognition of high quality teaching by formal evaluations or teaching awards. Impact of teaching should extend beyond home hospital as evidenced by invitations to teach in other institutions or in the programs of professional societies and continuing medical education (CME) courses.

c. Established reputation inside and outside the immediate area as an authority in a clinical specialty as evidenced by outside referrals, visiting lectureships, or participation in the teaching programs of professional societies.

Appointment or promotion to the rank of Professor will require:

a. A record of continuing publication in peer-reviewed journals of (1) analytic clinical studies or observations or (2) widely recognized comprehensive clinical reviews. Alternatively, development of original materials or major improvements over those used elsewhere (such as new curricula, textbooks or materials, or computer programs, evaluation mechanisms, etc.) which have reached a national audience.

b. Performance as a key individual in clinical training and service; active and continuing participation in medical student teaching with recognition of extraordinary effectiveness. Evidence of a wide impact from teaching, e.g., in specialty societies, in CME courses, or in visiting professorships.

c. A national reputation for superior accomplishments within a clinical specialty as evidenced by invitation to membership or fellowship in prestigious professional societies or by other academic recognition or awards, or play leadership role in department or hospital.

4. **Medical Educator**

To be eligible for appointment or promotion to senior rank in the medical educator professional category, candidates must have both (a) and (b):

a. A high level of professional competence, as well as significant achievement, in one of the following:

   (1) **Clinical achievement:** Clinical achievement is measured through development and/or improvement of clinical protocols and guidelines, or clinical programs, or quality initiatives that demonstrate objective positive impact in the quality of patient care. There must be objective evidence of the candidate’s personal contributions to the development or improvement.
(2) Research: Achievement is demonstrated through sustained publication in peer reviewed professional journals of observations, analytical studies, or topic reviews. Emphasis will be given to first or corresponding authorships*.

(3) Education: Achievement in education is measured through the development of one of the following and objective demonstration of its positive outcomes. There must be objective evidence of the candidate’s personal contributions to the development or improvement.

a) New and/or innovative educational program
b) New and/or innovative curriculum
c) Leadership of new and/or innovative educational programs
d) New and/or innovative assessment tools;
e) A recognized leader in the skills of mentoring/advising

Significant contributions in one of the educational areas above must be substantiated by documented improvements to education. Examples include, but are not limited to, outstanding achievement in accreditation; educational material such as syllabi, curricula, web-based modules and courses that demonstrate improvement in the quality of a course; newly developed assessment tools that helps measure achievement of course objectives; dissemination of achievements at regional or national conferences; or results of a mentoring relationship such as the success of an advisee that can be linked to the mentor’s role.

(4) Health Service Management: Achievement in health service management is measured through the development of clinical programs or clinical support programs which objectively improve the effectiveness, efficiency, safety, timeliness, patient-centeredness, or equity of health care delivery; development of effective physician leadership programs; and/or scholarly evaluation of health care delivery. There must be objective evidence of the candidate’s personal contributions to the development or improvement.

b. A record of excellence in at least one of the following levels of education: undergraduate, graduate, or postgraduate (which includes other health professionals).

Local and regional recognition is most consistent with appointment or promotion to the rank of Associate Professor, whereas significant institutional influence, regional, and national recognition is most consistent with appointment or promotion to the rank of Professor.

*When research and/or scholarship is pursued in a collaborative manner and results in multi-authored publications, the specific contributions of the candidate must be clear and significant. Unique contributions must be clear both in the Chair’s nomination and candidate’s personal statement.
5. **Medical Researcher**

For appointment or promotion to Associate Professor based on performance as a Medical Researcher, the following requirements must be met:

a. Active and effective participation in at least one of the following levels of education: undergraduate education, undergraduate medical education, graduate medical education, graduate school, postgraduate (which includes other health professionals) and/or continuing medical education.

b. A record of sustained publication\(^{39}\) in refereed journals of important work resulting from collaborations to which the candidate has contributed his/her unique skills. The candidate must have documented evidence of significant and essential contributions to this published work.

c. A record of occasional publications\(^{40}\) in refereed journals in which the candidate is a corresponding author.

d. An established reputation for research within his/her field outside the University of Connecticut Health Center.

Appointment or promotion to the rank of Professor will require:

a. A national reputation for research within his/her field. One such indicator, among others, of the recognition of the importance and originality of one’s scientific contributions and its sustainability is grant support either as a principal investigator or as key personnel on grants and collaborations.

b. Active and effective participation in at least one of the following levels of education: undergraduate education, undergraduate medical education, graduate medical education, graduate school, postgraduate (which includes other health professionals) and/or continuing medical education.

c. A record of sustained publication\(^{41}\) in refereed journals of important work resulting from collaborations to which the candidate has contributed his/her unique skills. The candidate must have documented evidence of significant and essential contributions to this published work.

d. A record of periodic publication\(^{42}\) in refereed journals in which the candidate is a corresponding author.

\(^{39}\) *ibid*

\(^{40}\) *ibid*

\(^{41}\) *ibid*

\(^{42}\) *ibid*
6. **Clinical Xology**\(^{43}\)

For promotion to Associate Professor of Clinical Xology, the following requirements must be met:

a. Local or regional recognition by peers and students for excellence in clinical teaching of residents, fellows, or medical students.

b. Local or regional recognition by peers of a high level of competence in a clinical specialty.

c. The candidate also must either:

   1. play an effective and significant leadership role in the University, one of its components, or an affiliated hospital, or
   2. develop clinical services new to the University of Connecticut SOM, or
   3. publish clinical observations, reviews, or analytic studies in peer-reviewed journals, or
   4. develop new curriculum offerings, educational programs, or teaching materials not previously available at the University of Connecticut SOM.

Promotion to Professor of Clinical Xology will additionally require regional or national recognition for any of the achievements required for promotion to Associate Professor.

7. **Community Faculty**

Appointments or promotions to senior rank shall occur on application to the SAPC by the department chair.

Application for appointment at senior ranks of Associate Clinical Professor, Adjunct Associate Professor, Clinical Professor or Adjunct Professor shall be based on prior accomplishments using the criteria in one of our professional categories (Investigator, Clinician-Investigator, Clinician-Scholar, Medical Educator, or Medical Researcher).

Application for promotion to senior ranks of Associate Clinical Professor, Adjunct Associate Professor, Clinical Professor or Adjunct Professor shall require evidence of continual high quality contributions to the programs of the School of Medicine. The application should include evidence of the contributions and their quality, such as (a) medical or graduate student, resident, fellow or post-doc evaluations, (b) objective evidence of efficacy of teaching, (c) research productivity and mentorship, and/or (d) description of administrative contributions to program development or maintenance, as well as other factors deemed relevant by the department chair.

\(^{43}\) The Clinical Xology professional category was eliminated as an option for newly appointed faculty in 2001, but those already in that professional category were allowed to remain. Faculty members who have been in the Clinical Xology professional category and who change to another professional category are not eligible to transfer back into the Clinical Xology professional category.
D. Tenure

Tenure in the professorial ranks will be granted only to persons of outstanding achievement. In general, the qualifications for tenure will be equivalent to those for promotion or appointment at senior rank. The review for tenure shall be concerned with assurance that the faculty member will continue a high level of performance consistent with senior rank.

The awarding of tenure requires a level of excellence in faculty performance commensurate with a permanent appointment to the faculty.

Faculty members in the Medical Educator and Medical Researcher professional categories are not eligible for tenure.

E. Duration in Rank for Appointment, Promotion, or Receiving Tenure

1. Maximum time to promotion for In-Residence faculty

Assistant professors in-residence (hired after February 1985) in the Investigator, Clinician-Investigator, Clinician-Scholar, and Clinical Xology professional categories must be promoted to Associate Professor by the end of the ninth year of the appointment as Assistant Professor. Assistant Professors in-residence who work part-time have the same nine year requirement, pro-rated by percent effort worked.

If not promoted, an appointment for a terminal tenth year appointment is at the discretion of the department chair. This promotion requirement does not apply to the Medical Educator and Medical Researcher professional categories. If, however, an individual selects the Medical Educator or Medical Researcher categories and later transfers to another category, the allowed nine years includes the time served in the Medical Educator or Medical Researcher category.

2. Minimum and maximum times for achieving promotion and tenure for Tenure Track faculty

Consistent with the University Laws and Bylaws, only full-time faculty members may have tenure track positions or positions with tenure.

Service at another institution may be credited towards tenure. The amount of credit should be agreed upon by the Dean, department chair, and candidate at the time of appointment. For junior faculty appointments, the amount of credit towards tenure should not exceed three years.

The probationary period for tenure track faculty begins September 1 of the calendar year of the initial appointment. Ordinarily, Assistant Professors may be nominated for tenure and promotion as early as the end of the fifth, but not later than the end of the seventh, probationary year after initial appointment. Promotion and tenure shall take effect at the beginning of the appointment year following a positive decision by the Board of Directors.
If tenure is not approved by the end of the eighth year, the terminal year is defined by the University Laws and Bylaws. A faculty member denied tenure then may not transfer to the in-residence track.

Appointment to senior rank with or without tenure may be granted by the Board of Directors upon arrival at the University. This requires SAPC review and approval. In all other circumstances, the University requires new appointees to serve a probationary period of at least one year. Continuous tenure may be granted at any time thereafter and before the expiration of the maximum probationary period by vote of the Board of Directors.

3. Interruption of Progression to Promotion and Tenure

Significant life events may be allowed to increase the probationary period leading to promotion and, where applicable, tenure, for a maximum of twenty-four months. A faculty member may request an increase in the probationary period to promotion and, where applicable, a congruent increase in the probationary period to tenure when the faculty member’s productivity is affected by a significant life event. Such requests must be approved by the Department Chair and the Dean’s Office. An increase in the probationary period leading to promotion and/or tenure is automatically awarded when the faculty member takes leave documented and approved under the Federal Family Medical Leave Act, the State of Connecticut Family Medical Leave Act, or the State of Connecticut Workers’ Compensation Act.

Extension of the tenure probationary period does not alter the standards by which the faculty member will be judged for promotion to senior rank or for tenure.

F. Changing Professional Category or Track

Change of professional category can and should occur if a change in job description involves duties that better fit a different professional category. Change of professional category can occur at any time, but must occur at least two years before consideration for promotion and must be signed by the faculty member and approved by the department chair and the Dean.

Assistant Professors may transfer into the Medical Educator or Medical Researcher professional categories (if appropriate) only through the end of the eighth year. Assistant Professors may transfer into professional categories with a promotion clock only through the end of the sixth year.

Full-time faculty members who leave the in-residence track for an appointment in the tenure track may then be eligible for tenure according to the University of Connecticut Laws and By-Laws. Transfers from either the tenure to the non-tenure track or from the non-tenure to the tenure track can be made on one occasion only, and such a change is irreversible.

All changes of professional categories and tracks must be approved by the faculty member, department chair, and the Dean.
Individuals with tenure are not eligible to transfer into the Medical Educator or Medical Researcher professional category.

G. Review of Rehired Faculty

If a faculty member of senior rank or who previously achieved tenure voluntarily discontinues employment with the University but is rehired after an interval of one year or more, the faculty member must be reviewed and approved again for appointment at senior rank and, if in the tenure track, for tenure.

H. Faculty Transferring from Another School of the University of Connecticut System or from Other Institutions

All appointments at senior rank must be reviewed by the SAPC, including transfers from other schools within the University of Connecticut or other institutions. Tenured faculty transferring to the School of Medicine from another school of the University of Connecticut system will retain their tenure.

II. Operating Guidelines for the SAPC

A. Review Mechanisms

1. All business of the Committee shall be considered confidential and only communicated by the Chair(s).
2. Initiation of all senior appointments, promotions, or tenure will be by the appropriate department chair. Before initiating a recommendation for appointment, promotion, or tenure, the department chair will indicate his/her intentions to the Dean.
3. The list of documents required to support the deliberations of the SAPC as well as the procedures the SAPC will use in making its decisions will be developed by the SAPC and transmitted to the department chairs and the Dean on an annual basis.
4. For each nomination for promotion, the Chair(s) of SAPC will choose one member of the SAPC as principal reviewer, and one alternate member of the Committee will serve as a secondary reviewer. All written material pertinent to a nomination will be distributed by the Chair(s) to all Committee members.

B. Meetings of the SAPC

1. At least seven members of the 11 total, one of whom may be an alternate, must be present and voting for business to be conducted.
2. Committee members who hold primary appointments in the nominee’s primary department of appointment will not receive the written materials and will not be present during discussion by the reviewers, nor be eligible to vote.
3. Alternate members shall be used as secondary reviewers. Alternate members may, at the discretion of the Chair(s), observe the proceedings of the SAPC meetings. Such use of alternate members is designed to provide a pool of qualified Professors for subsequent appointment by the Dean as regular members.
4. All votes will be cast by secret written ballot.
C. Transmission of the Decision and Supporting Data

The Chair(s) of the Committee will transmit in writing all decisions to the Dean. The Dean will inform the appropriate department chair within two weeks of the decision and will include the numerical vote and explanatory comments concerning the basis for the decision. The department chair, in turn, will inform the candidate as soon as possible. The Dean will forward recommendations for promotion or tenure to the Provost, who will in turn make final recommendations to the Board of Directors. The Board of Directors will vote on the Provost’s recommendations.

D. Reconsideration of Negative Actions Taken by the SAPC

1. Request by the Department Chair for Reconsideration

   The department chair may request through the Dean reconsideration of the SAPC’s action when new information concerning academic credentials is provided or when important non-academic issues are raised. This request must be submitted to the Dean no later than one month after the department chair is notified of the SAPC’s action.

   a. New academic information will be submitted to the SAPC and incorporated into the overall review of the nominee’s academic accomplishments. The SAPC will report to the Dean its decision in light of the new academic information.

   b. Appointment, promotion, and/or tenure will be considered by the Dean’s Council only if there are overriding, non-academic institutional issues for the appeal that were outside the purview of the SAPC. Only in rare circumstances should non-academic issues outweigh the lack of academic accomplishments.

      (1) When a department chair chooses to appeal based on non-academic considerations, the supporting information will be distributed to the Dean’s Council prior to its formal consideration.

      (2) At the Dean’s Council meeting, the department chair or designate will present the non-academic issues. After answering questions, the department chair will be excused from discussion and voting by the Dean’s Council.

      (3) The Chair(s) of the SAPC or designee will present the evidence for the negative action by the SAPC.

      (4) Voting will be by secret written ballot, and only Dean’s Council members present shall vote. A quorum must be present for a vote.

      (5) The Dean will forward a recommendation for promotion or tenure to the Provost, who will in turn make a final recommendation to the Board of Directors. The Board of Directors will vote on the Provost’s recommendation.

2. Requests for Reconsideration by a Faculty Member in the Event of Failure to Nominate or of Negative Action by the SAPC

   A request to the Dean by a faculty member is allowed either when the department chair has failed to nominate the faculty member for promotion and/or tenure, or when the department chair fails to request reconsideration of a negative action by the SAPC.
a. Failure to Nominate by Department Chair

The department chair must notify the faculty member and the Dean’s Office in writing that he or she does not intend to nominate the faculty member by September 1 of the penultimate year. If notification by the department chair is not made, then the faculty member will be informed in writing by the Dean’s Office. These letters of notification must indicate that an appeal by the faculty member to the Dean can be made, but must be submitted to the Dean within one month. The Dean may deny the request or appoint ad hoc a faculty committee to consider its merits.

The ad hoc committee will consist of three faculty members who have the same qualifications as members of the SAPC. The ad hoc committee will collect appropriate information and recommend to the Dean either that the request be denied or that sufficient evidence exists for consideration by the SAPC. The ad hoc committee should report to the Dean within one month.

Review by the SAPC will follow customary procedures, and its recommendation reported to the Dean.

The timing of notification of non-renewal of tenure track appointments will be governed by the University of Connecticut Laws and By-Laws.

b. Failure by the Department Chair to Request Reconsideration of Negative Action of SAPC

Within one month of the SAPC’s negative action, the department chair must notify the faculty member and the Dean’s Office in writing of the department chair’s decision not to request reconsideration. If notice by the department chair is not made within a month, the Dean’s Office will notify the faculty member in writing. These letters of notification must indicate that an appeal by the faculty member to the Dean can be made, but must be submitted to the Dean within one month. The Dean may deny the request or appoint ad hoc a faculty committee to evaluate the request.

The ad hoc committee can recommend to the Dean that (1) the request for reconsideration be denied; (2) sufficient new academic information is available to warrant reconsideration by the SAPC; upon consideration of new information and review of academic credentials, the SAPC may sustain or reverse its earlier action; or (3) non-academic issues are of sufficient importance for consideration by the Dean’s Council. The ad hoc committee should report to the Dean within one month.

If important non-academic issues are raised by the ad hoc committee and the Dean, consideration of appointment, promotion, or tenure of the faculty member will be made by the Dean’s Council. The supporting information will be distributed to the Dean’s Council prior to its formal consideration. Only in rare circumstances should non-academic issues outweigh the lack of academic accomplishments.
(1) At the Dean’s Council meeting, the chair of the ad hoc committee or the Dean will present the non-academic issues to be considered. After answering questions, the chair of the ad hoc committee will be excused from discussion and voting by the Dean’s Council.

(2) The earlier negative recommendation by the SAPC will be reported to the Dean’s Council by the Chair(s) of the SAPC or designee.

(3) The involved department chair will not be present during discussion or voting by the Dean’s Council, but will have the opportunity to present a statement.

(4) Voting will be by secret written ballot, and only Dean’s Council members present shall vote. A quorum must be present for a vote.

(5) The Dean will forward a recommendation for promotion or tenure to the Provost, who will in turn make a final recommendation to the Board of Directors. The Board of Directors will vote on the Provost’s recommendation.

C. Appeal by a Faculty Member

The faculty member has the right of appeal using the grievance process as described in the University Laws and By-Laws.

III. Instructions for Chairs of Academic Departments

A. Obligations of the Department Chair to Department Members

1. At the time of initial appointment:
   a. State in writing expectations regarding responsibilities and portion of effort to be expended in various activities, and professional category selection.
   b. Provide a clear written statement of the time when the appointee will be considered for tenure or promotion.

2. Annually:
   a. Review progress with all department members and formulate a written summary to be filed in the Dean’s Office, including revision of expectations if there are to be changes in responsibilities.
   b. Review all community-based faculty appointments concerning continued contribution to academic programs.

3. At the beginning of the sixth year, the progress of all in-residence faculty members will be reviewed, with special reference to their prospects for advancement, by a departmental promotions committee. A written summary of the review will be provided to each faculty member.

All department chairs should have copies of this document.

Approved by the School of Medicine Council on May 16, 2001.
Approved by the Dean’s Advisory Committee on May 22, 2001.
Revised June 25, 2001 (technical changes).
Approved by the Dean, School of Medicine, on June 26, 2001.
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Approved by the Dean, School of Medicine on January 10, 2005.
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Approved by the UCONN Board of Trustees on April 12, 2005
Revised May 2007
Approved by the voting faculty of the School of Medicine on June 5, 2007
Approved by the UCHC Board of Directors on September 17, 2007.
Revised June 19, 2008
Approved by the voting faculty of the School of Medicine on July 15, 2008
Approved by the UCHC Board of Directors on September 15, 2008
Revised November 2008
Approved by the voting faculty of the School of Medicine on December 23, 2008
Approved by the UCHC Board of Directors on March 9, 2009
Revised April 2010.
Approved by the voting faculty of the School of Medicine on November 15, 2011
Approved by the UCHC Board of Directors on February 14, 2011
Revised October, 2011
Approved by the voting faculty of the School of Medicine on October 2, 2012
Approved by the UCHC Board of Directors on December 10, 2012
Approved by the UCONN Board of Trustees on April 24, 2013
Revised July 2013
Approved by the voting faculty of the School of Medicine on December 9, 2013
Approved by the UCHC Board of Directors on March 24, 2014
Approved by the voting faculty of the School of Medicine on July 13, 2016
Approved by the UConn Health Board of Directors on September 12, 2016
Approved by the voting faculty of the School of Medicine on May 10, 2017
Approved by the UConn Health Board of Directors on June 19, 2017