MEDICAL EDUCATOR

(sample nomination letter template for appointment/promotion to senior rank)

The Chairperson’s letter must summarize the evidence supporting the nomination for senior rank. Detailed, evidence-based information is required for each criterion. The letter should include specific information about service development, service size, growth, the number of individuals served and the education or research components of the service.

Dear Dr. Tennen:

INTRODUCTORY PARAGRAPH with BACKGROUND INFORMATION

- PROMOTION:
  I am writing to nominate (name and degree of nominee) for promotion to (Associate Professor/Professor) in the Department of (name of department) in the Medical Educator professional category, (in-residence track or affiliated track of HH, SFHMC, THOCC, CCMC, JAX, etc).

- APPOINTMENT:
  I am writing to nominate (name and degree of nominee) for appointment as (Associate Professor/Professor) in the Department of (name of department) in the Medical Educator professional category, (in-residence track or affiliated track of HH, SFHMC, THOCC, CCMC, JAX, etc).

In this letter I will review (nominee’s name) experience and the rationale for his/her (promotion/appointment) in the (professional category) based on (a.1, a.2, a.3, or a.4).

DESCRIBE NOMINEE’S CONTRIBUTIONS, CURRENT ACTIVITIES AND AREAS OF EXCELLENCE BASED ON THE PROFESSIONAL CATEGORY CHOSEN FOCUSING ON THE “LEG” OF THE PROFESSIONAL CATEGORY SELECTED

Describe nominee’s professional competence and provide detailed, evidence-based information and objective evidence of improvement for ONE of the following:

- a.1 Clinical achievement – Although appointment and promotion nominees should feel free to document more than one clinical achievement, for nominees who select the clinical achievement criterion, a single focused accomplishment should be chosen as the basis for appointment or promotion

- a.2 Research – Evidence of sustained publication in peer reviewed professional journals w/ emphasis given to first or corresponding authorships

- a.3 Education – Objective evidence of significant contributions to one of the following 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

- a.4 Health Service Management – Objective evidence of personal contributions to the development and improvement of clinical programs or clinical support programs which 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

NOTE: Faculty in the Medical Educator Professional category prior to 9/12/16 are grandfathered and may opt to be evaluated on “development of or improvement of a research service”, a criterion prior to 9/12/2016. Please refer to the criteria before 9/12/2016.

and, also

LOCAL AND REGIONAL RECOGNITION
Nomination to Associate Professor requires evidence of local and regional recognition (you must include contributions to UCONN Health as part of local contributions).
Nomination to Professor requires evidence of significant institutional influence and regional and national recognition (If international influence exists please add).

CONTRIBUTIONS TO EDUCATION
Teaching excellence is an important component of the criteria for promotion in each professional category and every track. Comment on the nominee’s active and effective participation in at least one of the following levels of education: undergraduate, graduate, or postgraduate.

CLINICAL ACCOMPLISHMENTS
If the nominee is a clinician, provide information on nominee’s clinical competence including specific examples of the nominee’s expertise and effectiveness in delivering high quality clinical services. Describe any patterns of adverse events, complaints, difficulty in working with colleagues, students or staff and any malpractice-related issues.

SUPPORTING ACTIVITIES
Include any additional activities that will support the nomination.

SUMMARY
Provide a paragraph summarizing the nomination.

_________________    _______________________
(Department Chair Name and Signature)    (Center Director Name and Signature)

(Please refer to the category-appropriate guidelines outlined on the Faculty Affairs Website at the following link : Professional Categories. 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).