

Clinician Educator Actions: Guidelines

Clinician Educator Actions: Guidelines.....	1
<u>Overview</u>	2
For More Information.....	2
<u>Steps and Timelines</u>	2
<u>Checklists</u>.....	3
<u>Sections of the Appointment/Reappointment/Promotion Package</u>	4
Transmittal Memo.....	4
Curriculum Vitae	4
Offer Letter or Letter of Invitation	4
Referee Letters: External and Internal	5
The Practice Policy and Exemptions	5
Evaluation of Teaching	6
Teaching Evaluations.....	6
Trainee Letters	6
Evaluation of Clinical Excellence	6
Candidate’s Statement	7
<u>Supplemental Information by Rank</u>.....	7
Clinical Instructors	7
Clinical Instructors: Concurrent Appointment as Resident, Fellow, or Postdoctoral Scholar .	8
Clinical Instructors: Advanced Training	8
Clinical Assistant Professors	8
Clinical Associate Professors	8
Clinical Professors	9
Line Change Appointments	9

Overview

Clinician Educators are individuals who engage in clinical care and teaching which advances clinical medicine. While not required, Clinician Educators (CE's) may also engage in scholarly activities and/or an administrative role. They are appointed, reappointed, and promoted in academic (clinical) departments in the School of Medicine. This document is intended to assist departmental staff in assembling appointment, reappointment and promotion information for CE's to be reviewed at the School level by the Office of Academic Affairs and the School's review committees.

Clinician Educators (Affiliated) are employed by other institutions that have an affiliation agreement with the School of Medicine or Stanford Health Care. They provide patient care, clinical teaching or other duties which advance the missions of SHC. They are sometimes referred to as "non-employee affiliates" or "persons of interest;" these terms refer to how they are managed and tracked in PeopleSoft.

For More Information

For more general and specific information on CE's, ranks, titles, and criteria for actions, please see the School of Medicine Handbook [Chapter 3](#).

Steps and Timelines

- Assemble the package (FAA in the CE's division/department), including the OAA checklist.
- Create FASA transaction and attach package. Submit to OAA:
 - Files submitted for OAA review for appointments, reappointments and promotions need to be submitted 60 days in advance of the requested start date.
 - Requests for changes to current appointment (i.e. extensions, FTE changes, add secondary or courtesy, primary department or division change) need to be submitted 45 days in advance of the requested start date.
- At the same time, required documents for Faculty Compensation should be attached in FASA transaction (see the checklists for requirements).
- OAA staff checks the package and contacts the department for any changes or additions needed.
- Faculty Compensation reviews the financial documents, including the draft offer letter. (Note: OAA and Faculty Compensation jointly review and edit the offer letter)
- A position number will be assigned by OAA staff if the action is:
 - A **new appointment**
 - An **FTE change** going from less than 50% FTE to more than 50% FTE.
This is because the individual is changing from a position that doesn't accrue benefits to one that does, and that change in status requires a new position number.

→ CE position numbers do not count against the Professoriate billet cap. There is no formal School level restriction on the number of CE's that may be hired in a Department or by the School.

- OAA staff reviews the entire set of documents, looking for support for the action being proposed, fulfillment of the criteria, etc.
- The next review depends on the rank of the candidate:
 - **Clinical Instructor:** File is reviewed and decided upon by the Vice Dean's designate.
 - **Ranks above Clinical Instructor:**
 - OAA staff will put the complete file on the review committee's next open agenda.
 - The **Clinical Assistant Professors Committee** reviews all Clinical Assistant

Professor and Clinical Assistant Professor (Affiliated) files.

- The **Clinician Educator Appointments and Promotions Committee** reviews all files at the Clinical Associate Professor and Clinical Professor level (including Affiliated).
- The appropriate committee will review the file and then approve, table for more information, or turn it down.

→ CE appointments, reappointments and promotions receive final approval by the Dean’s Office of the School of Medicine and do not require review by the University.

- If more information is needed, OAA will contact the department FAA to obtain it.
- OAA staff notify the department FAA of the outcome of the review.
- For approved files: OAA will approve FASA transaction (with Faculty Compensations approval comment) which will generate an approval email that is sent to the originator.
- The academic approval of the edited offer letter from Faculty Compensation and OAA is attached to the FASA transaction and available for the originator to download after approval email is sent out.
- The offer letter edits must be made before the letter can be finalized, signed by the division chief and department chair, and released to the candidate.
- If a practice policy exemption, was requested, OAA staff will notify the department of approval and SUMIT malpractice approval.
- Department HR must hire the candidate into PeopleSoft.
- OAA staff will enter the candidate’s academic appointment into PeopleSoft after the hire is complete.

Checklists

Clinical Instructor	Appointment	Reappointment
Clinical Assistant Professor	Appointment	Reappointment/Promotion
Clinical Associate Professor	Appointment	Reappointment/Promotion
Clinical Professor	Appointment	Reappointment/Promotion
All Ranks	Change to Appointment (FTE, salary, duties)	Extension of Appointment (up to six months)

Sections of the Appointment/Reappointment/Promotion Package

Transmittal Memo

- Written and signed by the department chair.
 - Evaluates the candidate against the [criteria](#) for the proposed action. For example, promotion to Clinical Professor requires national recognition in their field. This recognition could come from clinical care, teaching, scholarship, administrative activities, national service, or other activities. Explain how they achieve this.
 - Addresses any concerns in the file. Examples include:
 - negative teaching or clinical evaluations
 - negative comments by referees or trainees
 - concerns raised by the department during the review process.
 Includes a plan to rectify these concerns if necessary.
 - Addresses why a letter was used from a referee at a lower rank
 - For the Clinical Excellence Surveys, if there were zero or too few responses based on the required categories and numbers, explains:
 - how many people were solicited in those categories
 - how many reminders were sent and when
 - whether the candidate does or doesn't work with people in those categories. (for example, if the candidate does not work with any clinic managers, you are not required to solicit any.)
 - For **appointments**, describes how candidate was identified (for example, national search, or Stanford fellowship).
- National searches are not required for CE appointments.
- For **appointments and reappointments**, describes candidate's trajectory towards promotion.
 - For Clinical Instructors that will be reappointed after three years into a benefits eligible position, justifies why the candidate is not being promoted to Clinical Assistant Professor instead.
 - For Clinical Instructors with concurrent appointments as residents, fellows, or postdoctoral scholars, states:
 - the FTE's associated with both appointments.
 - whether the appointment is through the Office of Postdoctoral Affairs (OPA) or the office of Graduate Medical Education (GME).

Curriculum Vitae

- Must be current, dated, and complete.
- We recommend that you follow this [template](#) but it is not required.

Offer Letter or Letter of Invitation

Every newly appointed CE receives an offer letter (or if this person is going from unpaid to paid); this letter must be reviewed and approved by the Office of Academic Affairs and the office of Faculty Compensation **before** it is signed by the department chair and division chief and delivered to the candidate.

- Part of every new appointment package is a draft offer letter in Word document format (separate attachment from appointment file) so that it is easily editable by OAA and Faculty Compensation.
- In most cases, CE's receive a [standard offer letter](#).

- Clinician Educators (Affiliated) must receive a [letter of invitation](#) instead, because they are not Stanford employees.
- Clinical Instructors with concurrent appointments as a resident, fellow, or postdoctoral scholar must receive offer letters based on whether the concurrent appointment is administered by the Office of Postdoctoral Affairs (OPA) or the Graduate Medical Education office (GME):
 - OPA: they must receive the [concurrent offer letter](#)
 - GME: they receive the [standard CE offer letter](#).
- When a CE's **FTE (full time effort)** or **FTE distribution** changes (that is, when the amount of time that they work *or* the way that time is distributed among clinical, teaching, and other duties changes), an [FTE change addendum](#) must be sent. See the section "FTE Changes" and the checklist for the full list of documents required for an FTE change.
- When other components of a CE's appointment change (for example, responsibilities, salary, administrative supplement), the [changes other than FTE addendum](#) must be used.

Referee Letters: External and Internal

All appointments and promotions require letters of evaluation from experts inside or outside the School of Medicine (FTE changes and changes to department or division do not). Request letters from referees using the [solicitation letter template](#). Reappointment files do not require referee letters.

- Each referee must be able to provide a meaningful, substantive evaluation of the candidate against the relevant criteria from personal knowledge.
- The author of the letter must be fully identified (name, rank, institution). If the letter does not include this information, either in the letterhead or in the body of the letter, include it as an annotation on the letter header or footer.
- Referees, in general, are expected to have clinical experience.
- If a referee holds an academic appointment, it should be at a rank at least equal to that proposed for the candidate (for example, do not ask an Associate Professor for a letter for a promotion to Professor).
- For each candidate, "external" and "internal" refers to referees based on the candidate's home institution, not whether the referee is external or internal to Stanford. For example, if a Clinical Instructor (Affiliated) at Kaiser Santa Clara is being reappointed and needs an "internal" referee letter, someone at Stanford or any of its affiliated Institutions who meets the above criteria should be the referee.
- Referees do not require approval by OAA (as they do for most Professoriate actions).

The Practice Policy and Exemptions

The practice policy for physicians, psychologists and dentists in the School of Medicine can be found [here](#). Updated in June 2014, this policy governs the providing of clinical care by these professionals at Stanford and elsewhere, and the receipt of income for such care.

Full time clinicians (at 100% FTE) at Stanford may not provide clinical care outside Stanford and its approved practice sites.

For those that are not full time (less than 100% FTE) an exemption from practice policy is required, which must be approved by the division chief, department chair, and Vice Dean.

- For Clinician Educators who are appointed at 50% FTE or greater who wish to practice (and receive practice income) outside Stanford and its approved sites, **an exemption from practice**

policy must be requested with this [form](#), and must be approved by the division chief, department chair, and Vice Dean.

- For Clinician Educators who are appointed at below 50% FTE, **a list of other employers** must be provided to the Vice Dean as part of the appointment package (usually included in the CV) and must be updated when there are changes to the list, or when they are reappointed or promoted.
- The Stanford University Medical Indemnity and Trust Insurance Company (SUMIT) provides malpractice coverage to clinicians at the School of Medicine. If a CE wishes to request a practice policy exemption, they must provide proof of malpractice coverage that is acceptable to SUMIT, or request that SUMIT provide coverage for their outside activity (for example, pro bono clinical care overseas). The Office of Academic Affairs will contact SUMIT and obtain a form that the clinician must fill out in either case.

Evaluation of Teaching

Teaching is a core part of the responsibilities of a Clinician Educator, and excellence in teaching must be documented for CE actions.

Documentation can include standardized teaching evaluations and/or letters from trainees (from Stanford or elsewhere).

Teaching Evaluations

- Stanford teaching evaluation tools include e*Value (core curriculum) and ASSU (electives) for medical student evaluations and MedHub for Residents.
- Please include all evaluations that can be obtained for the candidate's current appointment term. There is no need to include evaluations from before the start of the current term.

Trainee Letters

- If standardized teaching evaluations are not available, then trainee letters may be included; a minimum of three are needed. Trainees solicited for letters should be obtained from the candidate's current appointment term. Do not obtain/include letters from trainees that trained under candidate before the start of the current term.
- Use the trainee solicitation letter [template](#).
- Trainee letters must fully identify the writer (name, degree, position, institution). If the letter does not include this information, either in the letterhead or in the body of the letter, include it as an annotation on the letter header or footer.

Evaluation of Clinical Excellence

Excellence in clinical care is evaluated by the Clinical Excellence Survey (CES), which is generally administered via Qualtrics. Forms, instructions and FAQ's can be found on the OAA website Forms page under the heading [Faculty with Clinical Duties](#). This section will cover issues specific to Clinician Educators.

Clinical evaluations are required from a broad mix of professional colleagues with the training, experience and exposure to the candidate's clinical work that allows for informed commentary on clinical performance. Clinical evaluator types include referees, health care providers who consult with the candidate and non-physician health care professionals.

If internal referees or clinical trainees are solicited for evaluation letters, they must be asked to fill out a CES as well. Include the form with those solicitation letters.

Of course, clinical evaluations are not required for candidates who are not clinically active.

- All actions except for Clinical Instructor new appointments require CES's:
 - 4-7 surveys if the candidate is at less than 50% FTE or Affiliated
 - 9-14 surveys if the candidate is at 50-100% FTE.
- Who to survey for candidates at 50-100% FTE:
 - Health care providers who consult with, or refer patients to, the candidate: 3 (if applicable)
 - Fully qualified physician colleagues: 4 to 6 (including fully qualified physician colleagues from above categories).
 - If applicable, Physician extenders (e.g., physician assistants or nurse practitioners) who work directly with the candidate: 1 or 2
 - Nurse managers, clinic managers, or similar senior clinical administrators: 1 to 3
- Who to survey for Affiliated and candidates at less than 50% FTE – at least one each of the following:
 - Health care providers who consult with, or refer patients to, the candidate (if applicable)
 - Fully qualified physician colleagues
 - Physician extenders (e.g., physician assistants or nurse practitioners) who work directly with the candidate (if applicable)
 - Nurse managers, clinic managers, or similar senior clinical administrators (if applicable)
- Clinical evaluations completed by trainees will not be considered teaching evaluations.

Candidate's Statement

The candidate's statement is the only section of the package in which a CE can have their voice heard directly. It is not required for Clinical Instructors and Clinical Assistant Professors. It is required for Clinical Associate Professors and Clinical Professors. When not required, it is acceptable to include one. It may be advantageous to encourage candidates to include a statement. Guidelines for writing the candidate's statement can be found [here](#).

The candidate's statement should be a maximum of two pages in length. It should generally be written in the first person and should include discussion of the candidate's contributions and achievement in clinical care, teaching and mentorship, administration, and scholarly activity or other areas, as applicable.

Supplemental Information by Rank

Clinical Instructors

There are two sets of special circumstances for Clinical Instructor appointments discussed here:

- Candidates who are also holding a "concurrent appointment" as a resident, fellow, or postdoctoral scholar, administered through the Office of Postdoctoral Affairs or the Graduate Medical Education office
- Candidates who are not in any type of fellowship (ACGME or non-ACGME), but are receiving advanced training as part of their Clinical Instructor appointment.

Clinical Instructors: Concurrent Appointment as Resident, Fellow, or Postdoctoral Scholar

Under exceptional circumstances, a Resident, Fellow or Postdoctoral Scholar may be appointed to a part-time Clinical Instructor appointment. This allows those individuals to provide clinical care or clinical teaching, or both, outside the confines of the “concurrent appointment” as a Stanford trainee. The CE appointment allows them to maintain clinical skills and/or contribute to the teaching program in a way that is not part of their training program.

The FTE associated with the Clinical Instructor appointment, added to the FTE for the concurrent appointment as a Fellow, Postdoctoral Scholar, or Resident, must equal no more than 100%. For example, they might have a Clinical Instructor appointment at 20% FTE and an oncology fellowship at 80% FTE.

Requirements for concurrent appointments:

- The transmittal memo must state the FTE’s associated with both appointments.
- The transmittal memo must state whether the appointment is through the Office of Postdoctoral Affairs (OPA) or the office of Graduate Medical Education (GME).
 - o OPA: use the [concurrent offer letter template](#)
 - o GME: use the [standard CE offer letter template](#)
- The duties of the Clinical Instructor appointment must be separate and distinct from the duties of the fellowship/residency; both sets of duties must be described.
 - o Include Clinical Instructor duties on the FASA form.
 - o OPA: include concurrent appointment (residency/fellowship) duties in the concurrent offer letter
 - o GME: include concurrent appointment duties in the fellowship section on the FASA form.
- GME: need confirmation (email or contract) from GME of FTE and dates.

Clinical Instructors: Advanced Training

Clinical Instructors may receive mentorship in advanced clinical skills, typically focused in a sub-specialty of their primary specialty, under the supervision of more experienced physicians. In delivering complex and sophisticated care, an experienced physician needs to serve as proctor and mentor. This appointment is not appropriate for individuals enrolled in ACGME-certified residency or fellowship training programs.

- These individuals will be paid by the department.
- None of the documentation (including the offer letter) may use the terms “fellow” or “fellowship”.
- Describe the duties of the Clinical Instructor in the offer letter and on the appointment form as usual.

Clinical Assistant Professors

- Candidate’s statement not required for any action at this level; however, the candidate may be encouraged to write one if it is thought to be advantageous to them.

Clinical Associate Professors

- Regional recognition as a superior clinician and clinical teacher is required for appointment, reappointment, or promotion to the rank of Clinical Associate Professor, and must be documented in referee letters.
- The definition of “regional” may vary based upon the candidate’s specialty.

- For special cases, other factors may be considered, such as extraordinary contributions in other areas such as clinical innovation or program building. If promotion is sought based on these other factors or other exceptional circumstances, referee letters must explicitly support the case for promotion based on those factors.
- For more detailed information, please see [Chapter 3.2.C.](#) of the School of Medicine faculty handbook.

Clinical Professors

- National recognition as a superior clinician and clinical teacher is required for appointment, reappointment, or promotion to the rank of Clinical Professor, and must be documented in referee letters.
- For special cases, other factors may be considered, such as extraordinary contributions in other areas such as clinical innovation or program building. If promotion is sought based on these other factors or other exceptional circumstances, referee letters must explicitly support the case for promotion based on those factors.
- For more detailed information, please see [Chapter 3.2.C.](#) of the School of Medicine faculty handbook.

Line Change Appointments

Examples of line change appointments include: Instructor to Clinician Educator, Adjunct Clinical Faculty to Clinician Educator, Visiting Faculty to Clinician Educator, etc.

Generally, departments should follow the normal documents required for a new appointment to the rank being requested. However, because the individual currently holds an academic appointment at Stanford there may be additional required documents needed. For instance, if role and responsibilities as an Instructor included teaching and/or clinical duties then the line change appointment package should include teaching evaluations and clinical excellence surveys. OAA must review these items to confirm fulfillment of the criteria- excellence in the overall mix of clinical care, teaching, administration and/or scholarship appropriate to the programmatic need the individual is expected to fulfill.