



OFFICE OF THE PROVOST AND
EXECUTIVE VICE PRESIDENT FOR ACADEMIC AFFAIRS

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Dear Colleagues:

I am formally transmitting revised and new sections of the Academic Personnel Manual (APM) as follows:

- Section 278, Health Sciences Clinical Professor Series (APM - 278);
- Section 210-6, Instructions to Review Committees That Advise on Actions Concerning the Health Sciences Clinical Professor Series (APM - 210-6);
- Section 279, Volunteer Clinical Professor Series (APM - 279);
- New Section 350, Clinical Associate (APM - 350); and
- Section 112, Academic Titles (APM - 112).

The policies can be found online at: <http://www.ucop.edu/academic-personnel-programs/academic-personnel-policy/policy-issuances-and-guidelines/index.html>.

Each of the policies is issued effective July 1, 2017, with APM - 350 and APM - 112 to be implemented on that date. Health Sciences Compensation Plan (HSCP) campuses and schools will have up to one year, until July 1, 2018, to create new procedures or revise existing procedures to implement APM - 278, APM - 210-6, and APM - 279. These will include conditions that are appropriate for current Health Sciences Clinical Professors and Volunteer Clinical Professors to transfer to administration under the revised policies or to transfer to the applicable title under policy criteria matching duties, review criteria, and appointment status. Campuses, schools, and/or departments will consult as appropriate with individual faculty members to ensure a smooth transition. New hires and new volunteer appointees will be subject to the new policies and policy criteria on a date to be determined by the campus. Complete implementation should be accomplished no later than July 1, 2018, when the former policies will be retired effective June 30, 2018, or as soon as all HSCP campuses and schools implement APM - 278, APM - 210-6, and APM - 279, whichever date is earlier.

Consultation Process

The effort to update this suite of health sciences-related policies is an outgrowth of the work begun in 2001-02 to recast the single Clinical Professor series policy, then used to appoint University faculty *and* volunteers. The 2001-02 work continued until 2005 when

three policies were issued: 1) APM - 278, governing faculty appointments, 2) APM - 210-6, defining appointment, advancement, and promotion criteria for faculty appointments, and 3) APM - 279, governing volunteer appointments. The Clinical Professor series was renamed the Health Sciences Clinical Professor series; terms and conditions for appointment were introduced to the policy (APM - 278); and, new policy was created to provide for the Volunteer Clinical Professor series (APM - 279). At the time, campuses developed local guidelines for each of the two title series, transferring appointees to the applicable title series depending on the duties, review criteria, and appointment status. These three policies have not been reviewed or updated since issuance in 2005.

Comprehensive review of the policy suite began in 2015 when a senior health sciences academic affairs/academic personnel work group identified the major areas of policies requiring revision. The work group report, submitted in October 2015, recommended that policy clarify criteria for appointment and promotion in the Health Sciences Clinical Professor title series, differentiate that title from the Volunteer Clinical Professor title by adding language to supplement definitions, identify responsibilities, and specify terms of appointment and reappointment. In addition, the work group recommended creating a new, non-faculty academic title for clinical practitioners without teaching responsibilities who are employed by University health system network sites and satellite healthcare facilities. The October 2015 report and recommendations were used to draft revisions to four policies and to create new policy APM - 350. The full suite of policies was circulated for Management Consultation from January to March 2016, followed by two major Systemwide Reviews conducted over the past 12 months, concluding on March 1, 2017.

During Management Consultation, reviewers expressed general approval of all five draft policies; some reviewers offered recommendations, most of which were incorporated in final language. Reviewers who submitted comments during the first Systemwide Review endorsed the APM - 279, APM - 112, and APM - 350 drafts, offering minor revisions that have been incorporated in final policies. Substantive comments related to APM - 278 and APM - 210-6 were submitted during the first Systemwide Review, prompting in-depth conversations about current policy, review criteria, and best practices with Senate leaders and campus academic administrators who are experts in health sciences disciplines; these consultations were followed by additional revisions to the drafts and a second Systemwide Review.

Principles Guiding the Policy Revisions

Several principles provide the foundation for revisions to each of the health sciences faculty policies:

General. The principles described here apply to all faculty, whether paid by the University or paid by a formal affiliate under University agreement with entities such as or similar to the Veterans Administration Medicine Center or the Howard Hughes Medical Institute.

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Responsibilities. Health sciences faculty are expected to engage in each of the four areas of faculty responsibility, participating in each area to a varying degree dependent on the series: 1) teaching, 2) professional competence and activity, 3) research, scholarly, or creative work, and 4) University and public service. Across the health sciences faculty series, these four areas of responsibility form the basis of the Ladder-rank Professor, Professor of Clinical (e.g., *Medicine*), Professor in Residence, and Health Sciences Clinical Professor series. The percentage of activity in each of the four areas differentiates each of the series titles.

Policy for each of the four title series (Ladder-rank Professor, Professor of Clinical [e.g., *Medicine*], Professor in Residence, and Health Sciences Clinical Professor series] acknowledges that there is a division of effort among the four activities depending on the nature and purpose of the series.

The evidence required to establish research or creative accomplishment is a continuum based on series expectations, from minimal engagement in the non-Senate Health Sciences Clinical Professor series, where creative activities are subordinate to teaching and clinical service, to the Professor of Clinical (e.g., *Medicine*) series, where intellectual contributions are significant components of a dossier for Senate-series clinician educators, to the Ladder-rank Professor series and the Professor in Residence series, where research or creative activities and achievement are a fundamental component of a dossier for a Senate-series appointment.

Eligibility for appointment. Health Sciences Clinical Professors are faculty whose primary duties are clinical teaching and clinical practice within the health sciences professions who are expected to engage in scholarly or creative activity in the context of clinical duties and in University and public service.

Appointees in the Volunteer Clinical Professor series are clinicians in the community who teach the application of clinical and basic sciences in areas of patient care on a part-time, unsalaried, voluntary basis in the areas of teaching, patient care, and clinical research. There is no service expectation although some Volunteer Clinical Professor appointees do engage in University and public service.

Clinical practitioners practice their disciplines at University-managed clinics, practices, or satellite healthcare facilities; they have no clinical teaching, scholarly or creative, or service duties. Clinical Associates are not entitled to faculty appointments at UC without undergoing academic review.

Implementation. The 2005 versions of APM - 278 and APM - 210-6 provide campuses with flexibility to interpret and implement the policies, including authority to create guidelines for evaluating the research/creative activity (now revised to “scholarly/creative activity”) criteria in the Health Sciences Clinical Professor series. This flexibility and authority is maintained in final language.

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Key Policy Provisions

The extended consultation process allowed us to refine key policy provisions for the Health Science Clinical Professor series. Reviewers and consultants agreed, though not unanimously, that it is essential to maintain the Health Sciences Clinical Professor title as a meaningful faculty appointment with a scholarly or creative activity requirement. In addition, reviewers and consultants recommended edits to address concerns that the research and/or creative activity requirement included in earlier drafts was unduly burdensome for faculty with clinical teaching and expanding clinical service duties. Most agreed that 1) the policy should allow campuses to interpret and to implement the policies, and 2) the term “scholarly or creative activity” should replace the “research and/or creative activity” requirement to align the language with existing expectations for this series. The changes that were recommended by reviewers and consultants during the second Systemwide Review are incorporated into final language.

I wish to thank all members of the University community for their efforts to develop this important suite of health sciences policies during a robust systemwide consultation process. Your contributions are deeply appreciated.

Cordially,



Aimée Dorr, Provost

Executive Vice President for Academic Affairs

cc: President Napolitano
President's Advisory Group
Executive Vice Chancellors/Provosts
Executive Vice President Stobo
Vice President Duckett
Vice President Ellis
Vice Provosts/Vice Chancellors of Academic Personnel/Academic Affairs
Associate Vice President Nation
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Deputy/UCOP Compliance Officer Lane
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