March 25, 2016

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

Dear Colleagues:

Enclosed for Systemwide Review are proposed revisions to the Academic Personnel Manual as follows:

- Section 278, Health Sciences Clinical Professor Series (APM - 278),
- Section 210-6, Instructions to Review Committees Which Advise on Actions Concerning the
Health Sciences Clinical Professor Series (APM - 210-6),
- Section 279, Volunteer Clinical Professor Series (APM - 279),
- Proposed new Section 350, Clinical Associate (APM - 350), and
- Proposed revisions to Section 112, Academic Titles (APM - 112-4-b[8]).

In response to requests from senior academic administrators, a Work Group was formed in January 2015
to review this suite of policies. The Work Group was charged to draft policy revisions to 1) strengthen
and refine criteria for appointment and advancement depending on type of academic clinician and
2) differentiate policy language for volunteers (APM - 279) and policy for salaried and without salary
faculty (APM - 278). The attached Work Group report and recommendations provide detailed
information on the rationale for policy revisions and creation of new policy for Clinical Associates
(APM - 350).

These revisions to existing policies and the creation of new policy were considered during Management
Consultation from January to March 2016. Reviewers expressed general approval of the proposed draft
policies. Some reviewers offered line edits, which for the most part, have been accepted. One reviewer
asked whether those appointed as Clinical Associates would be permitted to do occasional or incidental
teaching. APM - 350 does not permit occasional or incidental teaching; occasional or incidental
teaching is permitted under APM - 279 for appointees in the Volunteer Clinical Professor series.
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Systemwide Review is a public review distributed to the Executive Vice Chancellors/Provosts, the Director, Lawrence Berkeley National Laboratory, and the Vice President of Agriculture and Natural Resources requesting that they inform the general University community and affected employees about policy proposals. Systemwide Review also includes a mandatory, three-month full Senate review. Employees should be afforded the opportunity to review and comment on the draft policy, available online at [http://www.ucop.edu/academic-personnel-programs/academic-personnel-policy/policies-under-review/index.html](http://www.ucop.edu/academic-personnel-programs/academic-personnel-policy/policies-under-review/index.html). Attached is a Model Communication which may be used to inform non-exclusively represented employees about these proposals. The Labor Relations Office at the Office of the President is responsible for informing the bargaining units representing union membership about policy proposals.

We would appreciate receiving your comments by **June 24, 2016**. Please submit your comments to ADV-VPCARLSON-SA@ucop.edu. If you have any questions, please contact Janet Lockwood at Janet.Lockwood@ucop.edu or (510) 987-9499.

Sincerely,

Susan Carlson
Vice Provost
Academic Personnel and Programs

Attachments:  Recommendations Report and Appendix A from the APM - 278 Work Group
Proposed Revised Draft APM - 278, Health Sciences Clinical Professor Series (redline and clean copy)
Proposed Revised Draft APM - 210-6, Instructions to Review Committees Which Advise on the Health Sciences Clinical Professor Series (redline and clean copy)
Proposed Revised Draft APM - 279, Volunteer Clinical Professor Series (redline and clean copy)
Proposed New Policy APM - 350, Clinical Associate
Proposed Revised Draft APM - 112-4-b(8), Academic Titles, Clinical Associate (redline and clean copy)

cc:  President Napolitano
Chancellors
Provost and Executive Vice President Dorr
Senior Vice President Vacca
Vice President Duckett
Vice Provosts/Vice Chancellors of Academic Personnel/Academic Affairs
Chief of Staff Grossman
Deputy/UCOP Compliance Officer Lane
Health Sciences Deans
Academic Personnel Directors
Deputy General Counsel Woodall
Senior Counsel Craig
Senior Counsel Leider
Executive Director Baxter
Executive Director Tanaka
Director Chester
Chief of Staff and Director Henderson
Director Lockwood
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Manager Donnelly
Manager Smith
APM - 278 Work Group Members:
Academic Personnel Director Baugh (UCI)
Senior Academic Affairs Analyst Holland (UCR)
Assistant Vice Provost Leathers (UCSF)
Manager Light (UCSF)
Director Morris (UCR)
Academic Affairs Supervisor Musey (UCI)
Academic Personnel Consultant Foole (UCD)
Academic Personnel Manager Reevesman (UCD)
Analyst/Supervisor Reyes (UCD)
Assistant Dean Seifert (UCD)
Director Shaevel (UCLA)
Director Shaw (UCLA)
Director Smith (UCI)
Principal Analyst Woolston (UCSD)
112-4  List with Definitions

   a. Academic titles of the University included within the scope of APM - 110-4 are listed in 112-4-b below. A title for which there is a separate policy section is defined in that section. Information on titles not listed in APM - 112-4-b may be obtained from the Office of the Provost and Executive Vice President for Academic Affairs.

   b. The list of titles together with their description is as follows:

   (8)  Clinical Associate

   The academic title Clinical Associate is generally used for non-salaried, volunteer academic appointees. Typically the Clinical Associate is a physician licensed to practice by the State of California or other clinician employed by the University as staff or through a University-managed clinic or practice, or satellite healthcare facility. Clinical Associates have no teaching responsibilities.
112-4  List with Definitions

a. Academic titles of the University included within the scope of APM - 110-4 are listed in 112-4-b below. A title for which there is a separate policy section is defined in that section. Information on titles not listed in APM - 112-4-b may be obtained from the Office of the Provost and Senior Executive Vice President for Academic Affairs.

b. The list of titles together with their description is as follows:

(8) Clinical Associate

The academic title Clinical Associate is generally used for nonsalaried, volunteer academic appointees. Typically the clinicalClinical associateAssociate is a physician licensed to practice by the State of California who desires to obtain additional training as an observer and participant in a particular department program on a limited basis or other clinician employed by the University as staff or through a University-managed clinic or practice, or satellite healthcare facility. Clinical Associates have no teaching responsibilities.
210-6 Instructions to Review Committees That Advise on Actions Concerning the Health Sciences Clinical Professor Series

a. The policies and procedures set forth in APM - 210-1-a, -b, -c, and -e shall govern the committee in the confidential conduct of its review and in the preparation of its report. The instructions below apply to review committees for actions concerning appointees in the Health Sciences Clinical Professor series. The committee should refer to APM - 278 for policy on the Health Sciences Clinical Professor series.

b. The review committee shall evaluate the candidate with respect to proposed rank and duties, considering the record of the candidate’s performance in (1) teaching (2) professional competence and activity (3) research and/or creative activity, and (4) University and public service. Activities in items (3) and (4) are derived from their primary responsibilities in clinical teaching and professional service activities (see APM - 278-4 and -10) and thus shall be appropriately weighted and broadly defined to take into account the primary emphasis on clinical teaching and patient care services. Candidates for promotion should demonstrate substantial growth and accomplishment in their area of expertise.

The Department Chair is responsible for documenting the faculty member’s division of effort among the four areas of activity; this written document shall be...
shared with the faculty member. The Chair should also indicate the appropriateness of this division to the position that the individual fills in the department, school, or clinical teaching faculty.

Appointees in the Health Sciences Clinical Professor series shall be evaluated in relation to the nature and time commitments of their University assignments. Faculty with part-time appointments are expected to show the same quality of performance as full-time appointees, but the amount of activity may be less.

Clinical teaching, professional activity, and research/creative activity may differ from standard professorial activities in the University, and may therefore be evaluated on the basis of professional competence, intellectual contribution, and originality.

c. Letters of evaluation from internal reviewers are required for health care professionals in the Health Sciences Clinical Professor series being considered for appointment or promotion to the Associate Professor or Professor ranks, as well as for advancement to Step VI or to Above Scale status. Although letters of evaluation from external reviewers may not be required for faculty in the Health Sciences Clinical Professor series who are being considered for appointment or promotion to the Associate Professor or Professor ranks, they may be useful to document other health care professionals’ recognition of the candidate’s achievement in professional competence and activity. Letters of evaluation are
required from external reviewers and from advanced clinical students and former
students now in academic positions or clinical practice for appointment or
advancement to Step VI and to Above Scale status for all faculty in the Health
Sciences Clinical Professor series. If adequate information is not included in the
materials sent forward by the chair, it is the review committee’s responsibility to
request such information through the Chancellor.

If, in assessing all evidence obtained, the candidate fails to meet the criteria set
forth below, the committee should recommend accordingly. If, on the other hand
there is evidence of unusual achievement and exceptional promise of continued
growth, the committee should not hesitate to endorse a recommendation for
accelerated advancement.

The criteria set forth below are intended to serve as guidelines for the review
committee in judging the candidate, not as boundaries for the elements of
performance that may be considered. See section 210-6-d below for more details
on reviews for advancement to Health Sciences Clinical Professor Step VI and for
Above Scale status.
(1) Teaching

Teaching is a required duty of Health Sciences Clinical Professor series faculty. Before making an initial appointment to this series, the review committee should evaluate the candidate’s potential to be an effective teacher and mentor. Evidence of excellence in clinical teaching is essential for advancement in this series. Teaching must include registered University of California students and/or University interns, residents, fellows, and postdoctoral scholars. Normally teaching in the clinical setting comprises intensive tutorial instruction, carried on amid the demands of patient care and usually characterized by multiple demands on the teacher to cope with unpredictably varied problems, patient needs, and the necessity of preparing the students to exercise judgment and/or take action. Nevertheless, the criteria suggested for evaluating teaching in the Professor series are applicable to Health Sciences Clinical Professor series faculty:

In judging the effectiveness of a candidate’s teaching,

the committee should consider such points as the following:

the candidate’s command of the subject; continuous growth in the subject field; ability to organize material and to present it with force and logic; capacity to awaken in students an awareness of the relationship of the subject to other fields of knowledge; fostering of student independence and capability to reason;
spirit and enthusiasm which vitalize the candidate’s learning and teaching; ability to arouse curiosity in beginning students, to encourage high standards, and to stimulate advanced students to creative work; personal attributes as they affect teaching and students; extent and skill of the candidate’s participation in the general guidance, mentoring, and advising of students; effectiveness in creating an academic environment that is open and encouraging to all students, including development of particularly effective strategies for the educational advancement of students in various underrepresented groups. (For the full statement on criteria for evaluating teaching in the Professor series, see APM - 210-1-d (1).)

In addition, the clinical teacher should be successful in applying knowledge of basic health science and clinical procedures to the diagnosis, treatment, and care of a patient that will assure the best educational opportunity for the student, and will also provide the highest quality care for the patient. Dossiers for advancement and promotion normally will include evaluations and comments solicited from students and trainees.

For initial appointment to the Health Sciences Assistant Clinical Professor title, the candidate may have a record of active teaching of health sciences professional students, graduate students, residents, postdoctoral scholars,
fellows, and/or continuing education students. Appointments may also be made based on the promise of teaching excellence when appropriate.

For appointment or promotion to the Health Sciences Associate Clinical Professor title, demonstrated excellence in teaching and mentoring is essential. Evidence typically includes teaching evaluations or the receipt of teaching awards. Other evidence may include invitations to present Grand Rounds, seminars, lectures, or courses at the University of California or at other institutions, by participation in residency review committees, programs sponsored by professional organizations, recertification courses or workshops, peer evaluation, or documentation of activity as a role model or mentor.

For appointment or promotion to the Health Sciences Clinical Professor title, the appointee should be recognized by sustained or continued excellence as a clinical teacher and/or mentor. Evidence typically includes teaching evaluations or the receipt of teaching awards. Other evidence may include invitations to present Grand Rounds, seminars, lectures, or courses at the University of California or at other institutions, by participation in residency review committees, programs sponsored by professional programs, recertification courses or workshops, peer evaluation, or documentation of activity as a role model or mentor.
(2) **Professional Competence and Activity**

The evaluation of professional competence and activity generally focuses on clinical expertise or achievement and the quality of patient care. A demonstrated distinction in the special competencies appropriate to the field and its characteristic activities should be recognized as a criterion for appointment or promotion. The candidate’s professional activities should be reviewed for evidence of achievement, leadership, and/or demonstrated progress in the development or utilization of new approaches and techniques for the solution of professional problems. The review committee should judge the significance and quantity of clinical achievement and contribution to the profession. In many cases, evidence of clinical achievement will be testimonial in nature. An individual’s role in the organization or direction of training programs for health professionals and the supervision of health care facilities and operations may provide evidence of exemplary professional activity; in decisions bearing on academic advancement, these activities should be recognized as important contributions to the mission of the University.

For an initial appointment to the rank of Health Sciences Assistant Clinical Professor, the committee should ascertain the present capabilities of the candidate, as well as the likelihood that the candidate will be a competent teacher, develop an excellent professional practice, and have the potential to
make contributions to the clinical activities of the academic department and to the mission of the University.

In addition to proven excellence in teaching and/or mentoring, creative contributions, and meritorious service, a candidate for appointment or promotion to the rank of Health Sciences Associate Clinical Professor or Health Sciences Clinical Professor in this series should show evidence of distinguished clinical and professional expertise. Such evidence may include, but is not limited to, evaluations that demonstrate:

- provision of high-quality patient care
- a high level of competence in a clinical specialty
- expanded breadth of clinical responsibilities
- significant participation in the activities of clinical and/or professional groups
- reputation as an outstanding referral health-care provider
- effective development, expansion, or administration of a clinical service; or
- recognition or certification by a professional group.
(3) **Research and/or Creative Activity**

The review committee should evaluate research and creative activity from the perspective that these activities are generally derived from clinical teaching and professional service activities. Accomplishments in research and/or creative activity should be evaluated in the context of the candidate’s academic responsibilities and the time available for creative activity. Candidates in this series may be involved in clinical research programs; many may demonstrate creative and scholarly accomplishments in other ways that are unique to the specific discipline and duties. Campus guidelines may include separate requirements or expectations for various schools or departments.

In order to be appointed or promoted to the Associate Professor or Professor rank in this series, the individual’s record must demonstrate creative contributions to academic, research/creative activity, or administrative activities. This criterion can be satisfied by evidence of substantive contributions, some examples of which include, but are not limited to, the following:

- development of or contributions to original materials in handouts or lectures
• development of or contributions to informational brochures with regard to the individual’s professional field

• lectures, original educational materials, or teaching files

• participation in platform or poster presentations at local, regional, or national meetings

• development of or contributions to educational curricula

• development of or contributions to administration of a teaching program

• participation in the advancement of professional education

• participation in research, not necessarily as primary or independent investigator (in some cases, the individual’s participation in research may be sufficiently substantial to warrant a reduced breadth of clinical responsibilities)

• first, senior, or collaborative authorship of peer-reviewed research papers

• publication of case reports or clinical reviews

• development of or contributions to administration (supervision) of a clinical service or health care facility

• development of or contributions to clinical guidelines or pathways

• development of or contributions to quality improvement programs

• development of or contributions to medical or other disciplinary information systems
• participation in the advancement of university professional practice programs
• development of or contributions to community-oriented programs
• development of or contributions to community outreach or informational programs

(4) University and Public Service

The review committee should evaluate both the amount and the quality of service by the candidate to the department, the school, the campus, the University, and the public, with particular attention paid to service which is directly related to the candidate’s professional expertise and achievement. There may be overlap between these guidelines for service and other criteria for evaluation (professional activity and research and/or creative activity). However, the review committee should assess the evidence from the perspective of the candidate’s unique contributions to the discipline and assign the evidence to the appropriate category. Campus guidelines may include separate requirements or expectations for various schools or departments.

Evidence of achievement in this area is demonstrated by participation in University, campus, school, department, and hospital or clinic committees; election to office or other service to professional, scholarly, scientific,
educational, and governmental agencies and organizations, and service to the community and general public which relates to the candidate’s professional expertise in health, education, research and creative activity, and practice.

For initial appointment to the Health Sciences Assistant Clinical Professor rank, the candidate should be evaluated for the likelihood of participation in department activities and the potential for service to the University.

For appointment or promotion to the Health Sciences Associate Clinical Professor rank, University and public service may be demonstrated by active participation on committees or task forces within the program, department, school, campus, or University; or by service to local, regional, state, national, or international organizations through education, consultation, or other roles.

For appointment or promotion to the Health Sciences Clinical Professor rank, service may be demonstrated by awards from the University, or local, regional, national, or international organizations; or appointment to administrative positions within the University such as program director, residency director, or chair of a committee. Service as officer or committee chair in professional and scientific organizations or on editorial boards of professional or scientific organizations is also considered.
d. Advancement to Health Sciences Clinical Professor, Step VI and Above Scale Status

(1) Advancement to Step VI

The normal period of service is three years in each of the first four steps. Service at Step V may be of indefinite duration. Advancement to Step VI usually will not occur before at least three years of service at Step V; it involves an overall career review and may be granted on evidence of sustained and continuing excellence in the following categories:

(1) teaching, (2) professional competence and activity, (3) scholarly and/or creative achievement, and (4) service. Above and beyond that, great distinction in academic health sciences, recognized at least regionally, will be required in teaching and professional competence and activity. Service at Step VI or higher may be of indefinite duration. Advancement from Step VI to Step VII, from Step VII to Step VIII, and from Step VIII to Step IX usually will not occur before at least three years of service at the lower step, and will only be granted on evidence of continuing achievement at the level for advancement to Step VI.
(2) Advancement to Above Scale Status

Advancement to Above Scale status involves an overall career review and is reserved only for the most highly distinguished faculty (1) whose work of sustained and continuing excellence has attained at least national recognition and broad acclaim reflective of its significant impact; (2) whose University teaching performance is excellent; and (3) whose service is highly meritorious. Except in rare and compelling cases, advancement will not occur after less than four years at Step IX. Moreover, mere length of service and continued good performance at Step IX is not justification for further salary advancement. There must be demonstration of additional merit and distinction beyond the performance on which advancement to Step IX was based. A further merit increase in salary for a faculty member already serving at an Above Scale salary level must be justified by new evidence of merit and distinction. Continued good service is not an adequate justification. Intervals between such salary increases may be indefinite, and only in the most superior cases where there is strong and compelling evidence will increases at shorter intervals be approved.
210-24 Authority

The responsibility to nominate and the authority to appoint review committees shall be in accordance with the stipulations set forth in the Academic Personnel Manual Sections concerning the respective title series.
210-6 Instructions to Review Committees Which Advise on Actions Concerning the Health Sciences Clinical Professor Series

a. The policies and procedures set forth in APM - 210-1-a, -b, -c, and -e shall govern the committee in the confidential conduct of its review and in the preparation of its report. The instructions below apply to review committees for actions concerning appointees in the Health Sciences Clinical Professor series. The committee should refer to APM - 278 for policies on the Health Sciences Clinical Professor series.

b. The review committee shall evaluate the candidate with respect to proposed rank and duties, considering the record of the candidate’s performance in

(1) teaching (2) professional competence and activity, (3) research and/or creative activity, and (4) University and public service, and (4) research and creative work. Activities in items (3) and (4) are desirable and encouraged to the extent required by campus guidelines. See derived from their primary responsibilities in clinical teaching and professional service activities (see APM - 278-4 and -10) and thus shall be appropriately weighted and broadly defined to take into account the primary emphasis on clinical teaching and patient care services. Candidates for promotion should demonstrate substantial growth and accomplishment in their area of expertise.
For appointments, the chair shall provide a description of the proposed allocation of the candidate’s time in the areas of activity. For advancement, the chair shall document the faculty member’s allocation of effort among the four areas of activity; this written document shall be shared with the faculty member. The chair should also indicate the appropriateness of this allocation to the position that the individual holds in the department, school, or clinical teaching faculty.

Appointees in the Health Sciences Clinical Professor series shall be evaluated in relation to the nature and the allocation of time commitments of their University assignments. Faculty with part-time appointments are expected to show the same quality of performance as full-time appointees, but the amount of activity may be less.

Clinical teaching, professional activity, and research/creative activity may differ from standard professorial activities in the University, and may therefore be evaluated on the basis of professional competence, intellectual contribution, and originality.

c. Letters of evaluation from internal reviewers are required for health care professionals in the Health Sciences Clinical Professor series being considered for appointment or promotion to the Associate Professor or Professor ranks, as well as for advancement to Step VI or to Above Scale status. Although letters of
evaluation from external reviewers may not be required for faculty in the Health Sciences Clinical Professor series who are being considered for appointment or promotion to the Associate Professor or Professor ranks, they may be useful to document other health care professionals’ recognition of the candidate’s achievement in professional competence and activity. Letters of evaluation are required from external reviewers and from advanced clinical students and former students now in academic positions or clinical practice for appointment or advancement to Step VI and to Above Scale status for all faculty in the Health Sciences Clinical Professor series. If adequate information is not included in the materials sent forward by the chair, it is the review committee’s responsibility to request such information through the Chancellor.

If, in assessing all evidence obtained, the candidate fails to meet the criteria set forth below, the committee should recommend accordingly. If, on the other hand, there is evidence of unusual achievement and exceptional promise of continued growth, the committee should not hesitate to endorse a recommendation for accelerated advancement.

The criteria set forth below are intended to serve as guidelines for the review committee in judging the candidate, not as boundaries for the elements of performance that may be considered. See section 210-6-d below for more details on reviews for advancement to Health Sciences Clinical Professor Step VI and for Above Scale status.
(1) Professional Competence and Activity

The evaluation of professional competence and activity generally focuses on the quality of patient care.

A demonstrated distinction in the special competencies appropriate to the field and its characteristic activities should be recognized as a criterion for appointment or promotion. The candidate’s professional activities should be reviewed for evidence of achievement, leadership, or demonstrated progress in the development or utilization of new approaches and techniques for the solution of professional problems.

a. Professional Practice

For an initial appointment to the rank of Health Sciences Assistant Clinical Professor, the committee should ascertain the present capabilities of the candidate and the likelihood that the candidate will be a competent teacher and develop an excellent professional practice.

In addition to proven competence in teaching, a candidate for appointment or promotion to the rank of Health Sciences Associate Clinical Professor or Health Sciences Clinical Professor in this series should show evidence of excellence in professional practice. Such
evidence may include, but is not limited to, evaluations that demonstrate:

- provision of high-quality patient care;
- a high level of competence in a clinical specialty;
- expanded breadth of clinical responsibilities;
- significant participation in the activities of clinical and/or professional groups;
- effective development, expansion, or administration of a clinical service; or
- recognition or certification by a professional group.

The review committee should judge the significance and quantity of clinical achievement and contribution to the profession. In many cases, evidence of clinical achievement will be testimonial in nature.

(b) Professional Activity

An individual’s role in the organization of training programs for health professionals and the supervision of health care facilities and operations may provide evidence of exemplary professional activity. In decisions bearing on academic advancement, these activities—
should be recognized as important contributions to the mission of the University.
(1) Teaching

Teaching is a required duty of Health Sciences Clinical Professor series faculty. Before making an initial appointment to this series, the review committee should evaluate the candidate’s potential to be an effective teacher and mentor. Evidence of excellence in clinical teaching is essential for advancement in this series. Teaching may involve must include registered University of California students, housestaff and/or University interns, residents, fellows, and postdoctoral scholars. Normally teaching in the clinical setting comprises intensive tutorial instruction, carried on amid the demands of patient care and usually characterized by multiple demands on the teacher to cope with unpredictably varied problems, patient needs, and the necessity of preparing the students to exercise judgment and/or take action. Nevertheless, the criteria suggested for evaluating teaching in the regular Professor series are applicable to Health Sciences Clinical Professor series faculty:

In judging the effectiveness of a candidate’s teaching, the committee should consider such points as the following: the candidate’s command of the subject; continuous growth in the subject field; ability to organize material and to present it with force and logic; capacity to awaken in students an awareness
of the relationship of the subject to other fields of knowledge;
fostering of student independence and capability to reason;
spirit and enthusiasm which vitalize the candidate’s learning and teaching; ability to arouse curiosity in beginning students, to encourage high standards, and to stimulate advanced students to creative work; personal attributes as they affect teaching and students; extent and skill of the candidate’s participation in the general guidance, mentoring, and advising of students; effectiveness in creating an academic environment that is open and encouraging to all students—especially, including development of particularly effective strategies for the educational advancement of students in various underrepresented groups. (For the full statement on criteria for evaluating teaching in the Professor series, see APM - 210-1-d (1)).

In addition, the clinical teacher should be successful in applying knowledge of basic health science and clinical procedures to the diagnosis, treatment, and care of a patient that will not only assure the best educational opportunity for the student, but will also provide the highest quality care for the patient. Dossiers for advancement and promotion normally will include evaluations and comments solicited from students and trainees, educational opportunity for the student, but will also provide the highest quality care for the patient.
For initial appointment to the Health Sciences Assistant Clinical Professor title, the candidate may have a record of active teaching of health sciences professional students, graduate students, residents, postdoctoral scholars, fellows, and/or continuing education students. Appointments may also be made based on the promise of teaching excellence when appropriate.

For appointment or promotion to the Health Sciences Associate Clinical Professor title, demonstrated excellence in teaching and mentoring is essential. Evidence typically includes teaching evaluations or the receipt of teaching awards. Other evidence may include invitations to present Grand Rounds, seminars, lectures, or courses at the University of California or at other institutions, by participation in residency review committees, programs sponsored by professional organizations, recertification courses or workshops, peer evaluation, or documentation of activity as a role model or mentor.

For appointment or promotion to the Health Sciences Clinical Professor title, the appointee should be recognized by sustained or continued excellence as a clinical teacher and/or mentor. Evidence typically includes teaching evaluations or the receipt of teaching awards. Other evidence may include invitations to present Grand Rounds, seminars, lectures, or courses at the University of California or at other institutions, by participation in residency review committees, programs sponsored by professional organizations.
(2) **Professional Competence and Activity**

The evaluation of professional competence and activity generally focuses on clinical expertise or achievement and the quality of patient care. A demonstrated distinction in the special competencies appropriate to the field and its characteristic activities should be recognized as a criterion for appointment or promotion. The candidate’s professional activities should be reviewed for evidence of achievement, leadership, and/or demonstrated progress in the development or utilization of new approaches and techniques for the solution of professional problems. The review committee should judge the significance and quantity of clinical achievement and contribution to the profession. In many cases, evidence of clinical achievement will be testimonial in nature. An individual’s role in the organization or direction of training programs for health professionals and the supervision of health care facilities and operations may provide evidence of exemplary professional activity; in decisions bearing on academic advancement, these activities should be recognized as important contributions to the mission of the University.
For an initial appointment to the rank of Health Sciences Assistant Clinical Professor, the committee should ascertain the present capabilities of the candidate, as well as the likelihood that the candidate will be a competent teacher, develop an excellent professional practice, and have the potential to make contributions to the clinical activities of the academic department and to the mission of the University.

In addition to proven excellence in teaching and/or mentoring, creative contributions, and meritorious service, a candidate for appointment or promotion to the rank of Health Sciences Associate Clinical Professor or Health Sciences Clinical Professor in this series should show evidence of distinguished clinical and professional expertise. Such evidence may include, but is not limited to, evaluations that demonstrate:

- provision of high-quality patient care
- a high level of competence in a clinical specialty
- expanded breadth of clinical responsibilities
- significant participation in the activities of clinical and/or professional groups
- reputation as an outstanding referral health-care provider
- effective development, expansion, or administration of a clinical service; or
- recognition or certification by a professional group.
(3) Research and/or Creative Activity

The review committee should evaluate research and creative activity from the perspective that these activities are generally derived from clinical teaching and professional service activities. Accomplishments in research and/or creative activity should be evaluated in the context of the candidate’s academic responsibilities and the time available for creative activity.

Candidates in this series may be involved in clinical research programs; many may demonstrate creative and scholarly accomplishments in other ways that are unique to the specific discipline and duties. Campus guidelines may include separate requirements or expectations for various schools or departments.

In order to be appointed or promoted to the Associate Professor or Professor rank in this series, the individual’s record must demonstrate creative contributions to academic, research/creative activity, or administrative activities. This criterion can be satisfied by evidence of substantive contributions, some examples of which include, but are not limited to, the following:

- Development of or contributions to original materials in handouts or lectures
• development of or contributions to informational brochures with regard to the individual’s professional field

• lectures, original educational materials, or teaching files

• participation in platform or poster presentations at local, regional, or national meetings

• development of or contributions to educational curricula

• development of or contributions to administration of a teaching program

• participation in the advancement of professional education

• participation in research, not necessarily as primary or independent investigator (in some cases, the individual’s participation in research may be sufficiently substantial to warrant a reduced breadth of clinical responsibilities)

• first, senior, or collaborative authorship of peer-reviewed research papers

• publication of case reports or clinical reviews

• development of or contributions to administration (supervision) of a clinical service or health care facility

• development of or contributions to clinical guidelines or pathways

• development of or contributions to quality improvement programs

• development of or contributions to medical or other disciplinary information systems

Dossiers for advancement and promotion normally will include evaluations and comments solicited from students.
• participation in the advancement of university professional practice programs

• development of or contributions to community-oriented programs

• development of or contributions to community outreach or informational programs

(34) University and Public Service

The review committee should evaluate both the amount and the quality of service by the candidate to the department, the school, the campus, the University, and the public to the extent required by campus guidelines, with particular attention paid to service which is directly related to the candidate’s professional expertise and achievement. There may be overlap between these guidelines for service and other criteria for evaluation (professional activity and research and/or creative activity). However, the review committee should assess the evidence from the perspective of the candidate’s unique contributions to the discipline and assign the evidence to the appropriate category. Campus guidelines may include separate requirements or expectations for various schools or departments.

Evidence of achievement in this area is demonstrated by participation in University, campus, school, department, and hospital or clinic committees; election to office or other service to professional, scholarly, scientific.
(4) **Research and Creative Work**

Educational, and governmental agencies and organizations, and service to the community and general public which relates to the candidate’s professional expertise in health, education, research and creative activity, and practice.

The review committee should evaluate research and creative work, to the extent required by campus guidelines. Campus guidelines may include separate requirements or expectations for different schools or departments.

For initial appointment to the Health Sciences Assistant Clinical Professor rank, the candidate should be evaluated for the likelihood of participation in department activities and the potential for service to the University.

Comparison of the individual with peers at the University of California and elsewhere should form part of the evidence provided. As a general rule, for appointment and promotion at the level of Health Sciences Associate Clinical Professor, faculty may demonstrate local or regional recognition for their clinical For appointment or promotion to the Health Sciences Associate Clinical Professor rank, University and public service may be demonstrated by active participation on committees or task forces within the program, department, school, campus, or University; or by service to local, regional, state, national, or international organizations through education, consultation, or other roles.
and teaching activities. For advancement to the Health Sciences Clinical Professor rank, faculty may demonstrate a regional or national reputation and should demonstrate highly distinguished clinical expertise, highly meritorious service, and excellence in teaching.

For appointment or promotion to the Health Sciences Clinical Professor rank, service may be demonstrated by awards from the University, or local, regional, national, or international organizations; or appointment to administrative positions within the University such as program director, residency director, or chair of a committee. Service as officer or committee chair in professional and scientific organizations or on editorial boards of professional or scientific organizations is also considered.

d. Advancement to Health Sciences Clinical Professor, Step VI and Above Scale Status

(1) Advancement to Step VI

The normal period of service is three years in each of the first four steps. Service at Step V may be of indefinite duration. Advancement to Step VI usually will not occur before at least three years of service at Step V; it involves an overall career review and may be granted on evidence of sustained and continuing excellence in the following categories:
(1) teaching, (2) professional competence and activity, (3) scholarly and/or creative achievement, and (4) service. Above and beyond that, great distinction in academic health sciences, recognized at least regionally, will be required in teaching and professional competence and activity. Service at Step VI or higher may be of indefinite duration. Advancement from Step VI to Step VII, from Step VII to Step VIII, and from Step VIII to Step IX usually will not occur before at least three years of service at the lower step, and will only be granted on evidence of continuing achievement at the level for advancement to Step VI.

(2) Advancement to Above Scale Status

Advancement to Above Scale status involves an overall career review and is reserved only for the most highly distinguished faculty (1) whose work of sustained and continuing excellence has attained at least national recognition and broad acclaim reflective of its significant impact; (2) whose University teaching performance is excellent; and (3) whose service is highly meritorious. Except in rare and compelling cases, advancement will not occur after less than four years at Step IX. Moreover, mere length of service and continued good performance at Step IX is not justification for further salary advancement. There must be demonstration of additional merit and distinction beyond the performance on which advancement to Step IX was based. A further merit increase in salary for a faculty member already serving at an Above Scale salary level must be justified by new
Evidence of merit and distinction. Continued good service is not an adequate justification. Intervals between such salary increases may be indefinite, and only in the most superior cases where there is strong and compelling evidence will increases at shorter intervals be approved.

Extramural referee letters may be requested for new appointments and promotions if required by campus procedures. For reviews at Health Sciences Clinical Professor, Step VI, and for above-scale salaries, the chair should request letters from authorities and should also seek evaluations from advanced clinical students and former students now in academic positions or clinical practice. If adequate information is not included in the materials sent forward by the chair, it is the review committee’s responsibility to request such information through the Chancellor.

210-24 Authority

The responsibility to nominate and the authority to appoint review committees shall be in accordance with the stipulations set forth in the Academic Personnel Manual Sections concerning the respective title series.
278-0 **Policy**

The Health Sciences Clinical Professor series is designed to meet the University’s mission in ways that are unique to the health sciences disciplines through teaching, research and/or creative activity, professional activity, and University and public service. Health Sciences Clinical Professor series faculty make substantial contributions to the University through excellence in teaching, clinical expertise, scholarly achievement, and engagement in service.

278-4 **Definition**

Faculty in the Health Sciences Clinical Professor series teach the application of basic sciences and the mastery of clinical procedures to students, postdoctoral scholars, fellows, interns, residents, and other clinicians in all academic disciplines concerned with patient care, including dentistry, medicine, nursing, optometry, pharmacy, psychology, veterinary medicine, the allied health professions, and other health care professions. Health Sciences Clinical Professor series faculty engage in research and/or creative activities which derive from their primary responsibilities in clinical teaching and professional and service activities.

The Health Sciences Clinical Professor series is distinct from the Volunteer Clinical Professor series that is governed by APM - 279, Volunteer Clinical Professor Series.
University-paid staff physicians and staff clinicians and other clinicians and physicians practicing at non-UC-affiliated sites with teaching responsibilities may be appointed to titles in the Volunteer Clinical Professor series under APM - 279. University-paid staff physicians and staff clinicians and other clinicians and physicians practicing at UC-affiliated facilities without teaching responsibilities may be appointed to the Clinical Associate title under APM - 350, Clinical Associate.

278-8  Types of Appointment

Faculty in the Health Sciences Clinical Professor series may serve the University on a full-time or part-time basis and may be appointed with or without salary. An appointment without salary at the University may be made for an individual who 1) holds a without salary or salaried clinical appointment paid by an institution with which the University has a formal affiliation agreement (a UC-affiliated facility), and 2) meets the criteria for appointment in this series as described in section 278-10.

a. Titles (and ranks) in this series are:

(1) Health Sciences Clinical Instructor

(2) Health Sciences Assistant Clinical Professor
(3) Health Sciences Associate Clinical Professor

(4) Health Sciences Clinical Professor

b. An appointment (as distinguished from a promotion) to one of the four ranks listed above occurs if the individual’s immediately previous status was:

(1) not in the employ of the University; or

(2) in the employ of the University but not in this series; or

(3) moving from Health Sciences Clinical Instructor to Health Sciences Assistant Professor.

c. A change of series is a type of new appointment for an individual whose last appointment was within the University of California, usually in a faculty title. A change of series may occur because an individual’s duties change. A regular academic review is required for this action. A competitive search may or may not be required (see APM - 278-16-b).

d. A promotion is advancement within this series from Assistant to Associate and Associate to Professor.
e. A merit increase is advancement in salary step or to an above-scale salary rate without a change in rank (see APM - 610, Salary Increases).

f. A reappointment is the renewal of an appointment in this series immediately following the end date of the previous appointment (i.e., without a break in service). A reappointment may or may not be accompanied by a promotion or a merit increase.

278-10 Criteria

A candidate for appointment or advancement in this series shall be evaluated by the following criteria, which shall be appropriately weighted according to the primary emphasis on clinical teaching and patient care services and also according to the needs of the campus and the individual’s responsibilities in the specific discipline. The Dean or the Department Chair shall document the faculty member’s expected balance of activities and share this document with the faculty member. The four criteria are:

a. Teaching

b. Professional competence and activity
c. Research and/or creative activity

d. University and public service

These criteria and standards are set forth in APM - 210-6, *Instructions to Review Committees That Advise on Actions Concerning the Health Sciences Clinical Professor Series*.

278-16 **Restrictions**

a. Funding

No State funds shall be used for any salary above the Scale 0 rate associated with Health Sciences Compensation Plan participant’s rank and step on the Fiscal Year Salary Scale. Any compensation above the Fiscal Year Salary Scale 0 shall be funded using Health Sciences Compensation Plan funds and/or other non-State funds in compliance with any relevant fund source restrictions as outlined in APM - 670-18, Health Sciences Compensation Plan.

b. Change of series of appointees to other titles

An appointee in the Health Sciences Clinical Professor series may change to another academic or professorial series following academic review. A competitive
search may or may not be required. The Chancellor may grant a waiver of the search requirement in exceptional circumstances.

c. Appointees at affiliated institutions

In the case of an appointee in the Health Sciences Clinical Professor series who holds an appointment at an affiliated institution, the continuation of the academic appointment is contingent upon the continuation of the faculty member’s appointment at the affiliated institution. In the case of an appointee in the Health Sciences Clinical Professor series who is partially paid by the affiliate and UC, the UC appointment may continue if the appointment at the affiliate ends.

278-17 Terms of Service

An appointment in the Health Sciences Clinical Professor series shall have a specified ending date. Written notice of the appointment or reappointment shall follow the provisions of APM - 137-17, Non-Senate Academic Appointees/Term Appointment. Normally, the effective date of an appointment will coincide with the University’s fiscal year (July 1 through June 30). See APM - 220, Professor Series for general academic personnel policy regarding appointment and promotion.
a. Health Sciences Clinical Instructor

At this rank, an initial appointment is limited to one year or less. Total service as a Health Sciences Clinical Instructor paid by the University or paid by an affiliated institution may not exceed two years. The Chancellor may grant an exception to the two-year limit.

b. Health Sciences Assistant Clinical Professor

Each appointment and reappointment at this rank is limited to one year or less. The review period is two years at each step. Total University service at more than 50 percent time in this title, combined with service at more than 50 percent time in any of those titles listed in APM - 133-0-b and -c, Limitation on Total Period of Service with Certain Academic Titles, may not exceed eight years of service.

Only those quarters or semesters at more than 50 percent time in a University-paid or affiliate-paid faculty position will count toward the eight-year limit.

Faculty holding a without salary Health Sciences Clinical Professor series appointment along with a salaried appointment at an affiliated institution at more than 50 percent time may not exceed eight years of service unless the Chancellor grants an exception to the eight-year limit for these appointees.
There is no eight-year limit for individuals holding an appointment at 50 percent or less time, whether salaried or without salary, unless the Chancellor establishes such a limit.

c. Health Sciences Associate Clinical Professor and Health Sciences Clinical Professor

Each appointment and reappointment at this rank is limited to a term of one year or less until the faculty member reaches Step VI. The review period is two years at each step for a Health Sciences Associate Clinical Professor (Steps I, II, and III). The review period is three years at each step for a Health Sciences Associate Clinical Professor (Steps IV and V) and for a Health Sciences Clinical Professor. Service at Step VI or higher may be of indefinite duration. Advancement from Step VI to Step VII, from Step VII to Step VIII, and from Step VIII to Step IX will only be granted on evidence of continuing achievement at the level for advancement to Step VI and usually will not occur after less than three years of service at the lower step. Except in rare and compelling cases, advancement to Above Scale status will not occur before at least four years of service at Step IX.
278-18 **Salary**

a. The Fiscal Year Salary Scale for the Professor series shall apply, subject to the terms of special salary scales or the Health Sciences Compensation Plan Salary Scales. Salary provisions for Health Sciences Compensation Plan members are outlined in APM - 670-18, Health Sciences Compensation Plan.

b. Normal periods of service at each step in this series coincide with those of the Professor series as described in APM - 220-18-b.

c. Normally, a promotion or merit increase is effective July 1.

278-20 **Conditions of Employment**

a. Appointees in this series are not members of the Academic Senate.

b. Neither tenure nor security of employment is acquired by appointment to a title in this series, regardless of percentage of State funding.

c. Prior to appointment each candidate’s clinical competence shall be reviewed and approved by the Department Chair and/or the Dean as appropriate to the position and to the School. Evidence of clinical competence may be determined by campus
guidelines appropriate to the specific discipline. At the discretion of the department, loss of professional license, credentialing, board certification, and/or active medical staff privileges may result in reassignment of duties or termination of appointment for cause under APM - 150, Non-Senate Academic Appointees/Corrective Action and Dismissal.

d. Expiration of an appointment, layoff, and termination

(1) APM - 137, Non-Senate Academic Appointees/Term Appointment, applies to this series.

(2) A Health Sciences Assistant Clinical Professor who, because of the eight-year limitation of service, is not reappointed as a result of a personnel review, may request a written statement of the reasons for non-reappointment. The written request must be made within 30 (thirty) calendar days of the notice of non-reappointment, and a written response shall be made within 60 (sixty) calendar days of the request. The written notice of non-reappointment shall be given to the individual before the specified ending date, whenever possible. However, the appointment will expire on the specified ending date, regardless of whether the notice was provided before the specified ending date.

(2) Termination of an appointment prior to the specified ending date shall be only for good cause, and in accordance with the provisions of
The Regents Standing Order 103.9. When the reason for termination is based on budgetary reasons, lack of work, or programmatic needs, the procedures described in APM - 145, Non-Senate Academic Appointees/Layoff and Involuntary Reduction in Time, shall apply. When the reason for termination is for cause, such as misconduct, unsatisfactory work performance, dereliction of duty, or violation of University policy, the procedures described in APM - 150, Non-Senate Academic Appointees/Corrective Action and Dismissal, shall apply.

e. An appointee with a title in this series is eligible for leave with pay under APM - 758, Leaves of Absence/Other Leaves with Pay, when the leave is in the interest of the University and to the extent allowable by the fund source(s) from which the salary is paid.

f. Appointees with a title in this series are not eligible for sabbatical leave (APM - 740, Leaves of Absence/Sabbatical Leaves).

g. The Faculty Code of Conduct (APM - 015) applies to all appointees with titles in this series.
h. The provisions of APM - 140, Non-Senate Academic Appointees/Grievances concerning grievances of non-Senate academic appointees shall apply to appointees with titles in this series.

i. The provisions of APM - 145, Non-Senate Academic Appointees/Layoff and Involuntary reduction in Time concerning layoff and involuntary reduction in time shall apply to appointees with titles in this series.

j. The provisions of APM - 150, Non-Senate Academic Appointees/Corrective Action and Dismissal concerning corrective action and dismissal shall apply to appointees with titles in this series.

278-24 Authority

The Chancellor has authority to approve academic personnel actions (e.g., appointments, reappointments, merit increases, promotions, and terminations) in this series in accordance with this and other applicable academic personnel policies. The Chancellor has authority to approve above-scale base salaries up to and including the Indexed Compensation Level threshold. Authority rests with the Provost and Executive Vice President for Academic Affairs to approve base salaries above the Indexed Compensation Level threshold (see APM - 600-4-g).
278-80 Review Procedures

The general provisions of APM - 220-80, Professor Series, apply to faculty appointed in the Health Sciences Clinical Professor series. The Chancellor, with the advice of the Academic Senate and the clinical departments, shall develop local review procedures for this series and for all academic personnel actions (e.g., appointment, reappointment, advancement, and termination). Such procedures shall be developed within the guidelines described in APM - 210-6, Instructions to Review Committees That Advise on Actions Concerning the Health Sciences Clinical Professor Series.
278-4  **Definition**

Faculty in the Health Sciences Clinical Professor series teach the application of basic sciences and the mastery of clinical procedures to students, postdoctoral scholars, fellows, interns, residents, and other clinicians in all academic disciplines concerned with the care of patients, including dentistry, medicine, nursing, optometry, pharmacy, psychology, veterinary medicine, the allied health professions, and other patient care professions. Health Sciences Clinical Professor series faculty engage in research and/or creative activities which derive from...
their primary responsibilities in clinical teaching and professional and service activities.

The Health Sciences Clinical Professor series is separated distinct from the Volunteer Clinical Professor series, which is governed by APM-279, Volunteer Clinical Professor Series.

University-paid staff physicians and staff clinicians and other clinicians and physicians practicing at non-UC-affiliated sites with teaching responsibilities may be appointed to titles in the Volunteer Clinical Professor series under APM-279. University-paid staff physicians and staff clinicians and other clinicians and physicians practicing at UC-affiliated facilities without teaching responsibilities may be appointed to the Clinical Associate title under APM-350, Clinical Associate.

278-8 Types of Appointment

b. Faculty in the Health Sciences Clinical Professor series may serve the University on a full-time or part-time basis and may be appointed with or without salary.

e. Concurrent without-salary appointment: A concurrent without-salary appointment in the Health Sciences Clinical Professor series without salary at the
University may be made for an appointee who is employed by the University as a staff physician or clinician, or for an individual who holds a without salary or salaried clinical appointment paid by an institution with which the University has a formal affiliation agreement. The Chancellor, with the advice of the clinical departments, may establish separate review procedures and, within the limits of APM - 210.6, separate criteria for these appointees. For example, the Chancellor may decide that the campus will conduct only promotion reviews for this group—(a UC-affiliated facility), and 2) meets the criteria for appointment in this series as described in section 278-10.

When an individual’s salaried appointment ends, the without-salary appointment in the Health Sciences Clinical Professor series also will end automatically. Without-salary appointments in this series are to be distinguished from appointments in the volunteer Clinical Professor series (APM - 279), which are for practitioners from the community and at other non-affiliated sites.

d—Health Sciences Clinical Professor titles are supported primarily by non-State funds, as defined in APM – 190, Appendix F (footnote 1), although under certain conditions, State funds may be used (see APM —278-16.a).

278-8 Types of Appointment

a—Titles (and ranks) in this series are:
(1) Health Sciences Clinical Instructor

(2) Health Sciences Assistant Clinical Professor

(3) Health Sciences Associate Clinical Professor

(4) Health Sciences Clinical Professor

b. An appointment (as distinguished from a promotion) occurs when an individual—
is employed into one of the four ranks listed above, occurs if the individual’s immediately previous status was:

(1) not in the employ of the University; or (2) in the employ of the University; or

(2) in the employ of the University but not in this series; or

(3) moving from Health Sciences Clinical Instructor to Health Sciences Clinical Assistant Professor.

c. A change of series is a type of new appointment for an individual whose last appointment was within the University of California, usually in a faculty title. A change of series may occur because an individual’s duties change. A
regular academic review is required for this action. A competitive affirmative action search may or may not be required, (see APM - 278-16-b).

d. A promotion is an advancement within this series from one rank to a higher rank. Assistant to Associate and Associate to Professor.

e. A merit increase is an advancement in salary step or to an above-scale salary rate without a change in rank (see APM - 615, APm - 610, Salary Increases).

f. A reappointment is the renewal of an appointment in this series immediately following the end date of the previous appointment (i.e., without a break in service). A reappointment may or may not be accompanied by a promotion or a merit increase.

278-10 Criteria

A candidate for appointment or advancement in this series shall be evaluated using the following criteria specified below—The criteria, which shall be appropriately weighted to take into account this series' primary emphasis on direct clinical teaching and patient care services and clinical teaching. See APM - 210-6, also according to the needs of the campus and the individual’s responsibilities in the specific discipline. The Dean or the Department Chair shall document the
Faculty member’s expected balance of activities and share this document with the faculty member. The four criteria are:

The criteria are:

a. Teaching

ab. Professional competence and activity

b. Teaching

c. Research and/or creative activity

d. University and public service are desirable and encouraged to the extent required by campus guidelines

d. Research and creative work are desirable and encouraged to the extent required by campus guidelines

These criteria and standards are set forth in APM-210-6, Instructions to Review Committees Which Advise on Actions Concerning the Health Sciences Clinical Professor Series.

278-16 Restrictions
a. Funding

(1) For Health Sciences Compensation Plan members, no State funds shall be used for any salary above the Scale 0 rate associated with the faculty member’s rank and step on the Fiscal Year Salary Scale. Any compensation above the Fiscal Year Salary Scale shall be funded using Health Sciences Compensation Plan funds and/or other non-State funds in compliance with any relevant fund source restrictions as outlined in APM - 670.

The Chancellor may develop guidelines on the locally appropriate use of State and non-State funds to support appointments in this series, within the restrictions on fund sources stated in the APM - 670-18 Health Sciences Compensation Plan and the restrictions given below in (2) and (3).

(2) In a school or equivalent unit where all appointees in this series have appointments of one year or less, funding equivalent to the Fiscal Year Salary Scale rate for the appointee’s rank and step may come from State funds or from other sources. The Chancellor shall notify these faculty that the use of State funds for these appointments does not indicate any commitment of tenure or security of employment. For such appointments, which may be renewed, there is no time limit on the use of State funding.
(3) — Limits on State funding for Schools not covered by (2) above.

In a school or equivalent unit where appointees in this series do not all have appointments of one year or less, the following restrictions apply for any individual who has an appointment at 50 percent time or more. At least 50 percent of funding equivalent to the Fiscal Year Salary Scale rate for the rank and step of an appointee shall come from sources other than State funds. However, in exceptional circumstances, the Chancellor is authorized to use State funds for 50 percent or more of an individual’s Fiscal Year Salary Scale rate for the specific rank and step for no more than 8 (eight) years. This limit on State funding applies to service for an individual over the course of his or her University career in all ranks in this series combined. Such an exception, in combination with service in any other State-funded appointment in those titles specified in APM - 133-0-b and -c, shall not exceed eight years.

Appointments in the Health Sciences Clinical Professor series at less than 50 percent time may be supported by State funds with no limit on the duration of the use of State funding.

b. Change of series of appointees to other titles
An appointee in the Health Sciences Clinical Professor series may be appointed to another academic or professorial series following academic review. A competitive search to the Professor series, the Professor in Residence series, or the Professor of Clinical (e.g., Medicine) series only after a competitive affirmative action search and review by the appropriate Senate committee. In exceptional circumstances, the search may or may not be required. The Chancellor may grant an exception to a waiver of the search requirement in exceptional circumstances.

c. Appointees at affiliated institutions

The Chancellor may approve the transfer of an appointee in the Health Sciences Clinical Professor series to the Adjunct Professor series with the individual's consent, the recommendation of the department, and a regular academic review. Who holds an appointment at an affiliated institution, the continuation of the academic appointment is contingent upon the continuation of the faculty member's appointment at the affiliated institution. In the case of an appointee in the Health Sciences Clinical Professor series who is partially paid by the affiliate and UC, the UC appointment may continue if the appointment at the affiliate ends.
An appointment in the Health Sciences Clinical Professor series shall have a specified ending date. Written notice of the appointment or reappointment shall follow the provisions of APM - 137-17. In addition, the written notice shall include any funding requirements for continuing the appointment and reappointment. APM - 137-17, Non-Senate Academic Appointees/Term Appointment. Normally, the effective date of an appointment will coincide with the University’s fiscal year (July 1 through June 30). See APM - 220, Professor Series for general academic personnel policy regarding appointment and promotion.

a. Health Sciences Clinical Instructor

At this rank, an initial appointment is limited to a one-year term but may be for a shorter term or less. Total University service as a Health Sciences Clinical Instructor paid by the University or paid by an affiliated institution may not exceed two years. The Chancellor may grant an exception to the two-year limit.

b. Health Sciences Assistant Clinical Professor

Each appointment and reappointment at this rank is limited to a maximum term of one year or less. The review period is two years but may be for a shorter term at each step. Total University service at more than 50 percent time in this title, combined with service at more than 50 percent time in any of those titles listed in.
APM-133-0-b and -c, Limitation on Total Period of Service with Certain Academic Titles, may not exceed eight years. The Chancellor may grant an exception to the eight-year limit. In computing the years of service for a Health Sciences Assistant Clinical Professor, only

Only those quarters or semesters at more than 50 percent time in a UC-University-paid or affiliate-paid faculty position will count toward the eight-year limit.

Faculty holding a without salary Health Sciences Clinical Professor series appointment along with a salaried appointment at an affiliated institution at more than 50 percent time may not exceed eight years of service unless the Chancellor grants an exception to the eight-year limit for these appointees.

There is no eight-year limit for an individual who holds a without salary Health Sciences Assistant Clinical Professor appointment, along with a salaried clinical appointment paid by an affiliated institute, or along with a University staff title, individuals holding an appointment at 50 percent or less time, whether salaried or without salary, unless the Chancellor establishes such a limit.

b. e. Health Sciences Associate Clinical Professor and Health Sciences Clinical Professor
For each appointment and reappointment at this rank is limited to a term of one year or less until the faculty member reaches Step VI. The review period is two years at each step for a Health Sciences Associate Clinical Professor (Steps I, II, and III). Each appointment period is limited to a maximum of three years. For each step for a Health Sciences Associate Clinical Professor (Steps IV and V) and for a Health Sciences Clinical Professor, each appointment period is limited to a maximum of three years. An individual may be reappointed for successive terms, for example, as Associate Professor Step V, but each reappointment period is limited to a maximum of three years. Service at Step VI or higher may be of indefinite duration. Advancement from Step VI to Step VII, from Step VII to Step VIII, and from Step VIII to Step IX will only be granted on evidence of continuing achievement at the level for advancement to Step VI and usually will not occur after less than three years of service at the lower step. Except in rare and compelling cases, advancement to Above Scale status will not occur before at least four years of service at Step IX. three years. These appointments may be made for a shorter term.

Normally, the effective date of an appointment will coincide with the University’s fiscal year (July 1 through June 30). Normally, a promotion or merit increase is effective July 1. See APM – 220 for general academic personnel policy regarding appointment and promotion.

278-18 — Salary
a. The academic salary scales Fiscal Year Salary Scale for the regular Professor series shall apply, subject to the terms of special salary scales or the Health Sciences Compensation Plan Salary Scales. Salary provisions for Health Sciences Compensation Plan members are outlined in APM - 670-18, Health Sciences Compensation Plan. Normal periods of service at each step in this series coincide with those of the Professor series as described in APM - 220-18-b.

b. Normally, a promotion or merit increase is effective July 1.

c. Conditions of Employment

a. Appointees in this series are not members of the Academic Senate.

b. Neither tenure nor security of employment is acquired by appointment to a title in this series, regardless of percentage of State funding.
e. Unless not required for the position, appointees in the Health Sciences Clinical Professor series must possess and maintain an appropriate valid license and

Prior to appointment each candidate’s clinical competence shall be reviewed and approved by the Department Chair and/or the Dean as appropriate to the position and to the School. Evidence of clinical competence may be determined by campus active membership as a Medical Staff member, or equivalent. Loss of license guidelines appropriate to the specific discipline. At the discretion of the department, loss of professional license, credentialing, board certification, and/or active Medical Staff medical staff privileges will may result in, at department discretion, reassignment of duties or termination of appointment for cause under APM - 150, Non-Senate Academic Appointees/Corrective Action and Dismissal.

d. Expiration of an appointment, layoff, and termination:

(1) APM - 137, APM - 137, Non-Senate Academic Appointees/Term Appointment, applies to this series.

(2) A Health Sciences Assistant Clinical Professor who, because of the eight-year limitation of service, is not reappointed as a result of a personnel review, may request a written statement of the reasons for non-reappointment. The
written request must be made within 30 (thirty) calendar days of the notice of
non-reappointment, and a written response shall be made within 60 (sixty)
calendar days of the request. The written notice of non-reappointment shall
be given to the individual before the specified ending date, whenever possible.
However, the appointment will expire on the specified ending date, regardless
of whether the notice was provided before the specified ending date.

(3) Termination of an appointment prior to the specified ending date shall be
only for good cause, and in accordance with the provisions of Section

103.9 of the Standing Orders of The Regents. The Regents Standing Order

103.9 When the reason for termination is based on budgetary reasons, lack of
work, or programmatic needs, the procedures described in APM - 145, APM -
145, Non-Senate Academic Appointees/Layoff and Involuntary Reduction in
Time, shall apply. When the reason for termination is for cause, such as
misconduct, unsatisfactory work performance, dereliction of duty, or violation
of University policy, the procedures described in APM - 150, APM - 150,
Non-Senate Academic Appointees/Corrective Action and Dismissal, shall
apply.

e. An appointee with a title in this series is eligible for leave with pay under
APM - 758, Leaves of Absence/Other Leaves with Pay, when the leave is in the
APM—758 when the leave is in the interest of the University and to the extent allowable by the fund source(s) from which the salary is paid. When an appointee’s base salary is supported wholly or partially by State funds, the leave will be proportionately supported by State funds.

f. Appointees with a title in this series are not eligible for sabbatical leave (APM—740).

(APM—740, Leaves of Absence/Sabbatical Leaves).

g. The Faculty Code of Conduct (APM—015) applies to all appointees with titles in this series. The Chancellor may develop procedures for the application of the Faculty Code of Conduct.

h. The provisions of APM—140, Non-Senate Academic Appointees/Grievances concerning grievances of non-Senate academic appointees shall apply to appointees with titles in this series.

i. The provisions of APM—145, Non-Senate Academic Appointees/Layoff and Involuntary reduction in Time concerning layoff and involuntary reduction in time shall apply to appointees with titles in this series.

j. The provisions of APM—150, Non-Senate Academic Appointees/Corrective Action and Dismissal concerning corrective action and dismissal shall apply to appointees with titles in this series.
278-24 Authority

The Chancellor has authority to approve academic personnel actions (e.g., appointments, reappointments, merit increases, promotions, and terminations) in this series in accordance with this and other applicable academic personnel policies.

The Chancellor has authority to approve above-scale base salaries up to and including the Regental compensation threshold. For salaries beyond the Regental compensation threshold, authority rests with The Regents on recommendation of the President. Indexed Compensation Level threshold. Authority rests with the Provost and Executive Vice President for Academic Affairs to approve base salaries above the after appropriate review and as prescribed in Section 101.2(a)(1) of the Standing Orders of The Regents. Indexed Compensation Level threshold (see APM - 600-4-g).

278-80 Review Procedures

The general provisions of APM - 220-80 APM - 220-80, Professor Series, apply to appointees faculty appointed in the Health Sciences Clinical Professor series. The Chancellor, with the advice of the Academic Senate and the clinical departments, shall develop local review procedures for this series and for all academic personnel actions (e.g., appointment, reappointment, promotion, and termination). Such procedures shall be developed
within the guidelines described in APM - 210-6, Instructions to Review Committees That Advise on Actions Concerning the Health Sciences Clinical Professor Series.
279-0 Policy

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. These appointments constitute a valuable way to utilize the interest and expertise of practitioners from the community on a part-time, unsalaried, voluntary basis in the areas of teaching, patient care, and clinical research.

An individual who is employed by the University as a staff physician or clinician with teaching responsibilities may hold a concurrent appointment in the Volunteer Clinical Professor series.

An individual with teaching, research/creative activity, and service responsibilities who holds a clinical appointment paid by a facility that has a formal affiliation with the University (UC-affiliated facility) must hold a concurrent, without salary appointment in the Health Sciences Clinical Professor series (see APM - 278), but not in the Volunteer Clinical Professor series.

279-8 Types of Appointments

Titles and ranks in this series are:
(1) Volunteer Clinical Instructor

(2) Volunteer Assistant Clinical Professor

(3) Volunteer Associate Clinical Professor

(4) Volunteer Clinical Professor

Appointees in this series are not eligible for emeritus status.

279-10 Criteria

a. Minimum Standards for Initial Appointment and Promotion

Clinical competence and excellence in teaching as evidenced by teaching evaluations or peer review are the primary basis for initial appointment and promotion in the Volunteer Clinical Professor series. When appropriate, initial appointments may be made based on the promise of teaching excellence. An appointee must have the appropriate license and/or credentials to practice in his or her field and must contribute to the clinical teaching program as defined by the campus guidelines. If the individual has participated in professional
organizations, University and community service, and/or research, a description of these activities may be included in the appointee’s personnel file as part of the review material. Each school may establish other minimum standards (e.g., board certification, etc.). The Chancellor shall establish campus guidelines that specify the minimum number of required hours per year; the number of minimum hours may vary in different schools or departments.

The Chancellor, in consultation with the clinical schools and departments, shall establish written criteria for any additional evidence, if needed, beyond the requirements of verified clinical competence (see APM - 279-10-c below) and teaching skills required to support a candidate for appointment and/or promotion.

b. **Minimum Standards for Reappointment**

After the initial appointment, there shall be a review at five years of service prior to reappointment that includes an evaluation of teaching and clinical expertise. After that review, each appointee shall be reviewed at least every five years.
c. Evaluating Clinical Competence

Prior to appointment, reappointment, and/or promotion, each candidate’s clinical competence shall be reviewed and approved by the Department Chair and/or the Dean, as appropriate to the School. Evidence of clinical competence may be demonstrated by the medical staff credentialing process or by way of an attestation form as indicated below:

(1) Appointees who teach at a UC facility or a UC-affiliated facility and are successfully credentialed through the medical staff office at the facility where teaching occurs shall be considered to have met the clinical competence requirement.

(2) The attestation form in Appendix A must be submitted for all other appointees, including but not limited to:

(a) appointees who teach at a UC facility or a UC-affiliated facility, but who are not credentialed through the medical staff office at the facility where teaching occurs;

(b) appointees who teach at facilities not formally affiliated with UC, including private practice offices; and
(c) appointees who teach in a non-clinical setting.

279-17 Terms of Service

a. Initial appointment

The initial appointment of an individual to a title in this series shall have a specified ending date and may be for a maximum term of five years.

b. Reappointment

Subsequent reappointments may be for maximum terms of five years. There is no limit on the number of times reappointment may occur or on the number of years spent in each rank.

c. Promotion

Candidates may be considered for promotion after ten years at the rank of Volunteer Assistant Clinical Professor and after ten years at the rank of Volunteer Associate Clinical Professor. Candidates with fewer than ten years of
service may be considered for promotion on an exceptional basis, as determined by the campus.

279-20 Conditions of Appointment

a. **Transfer of Appointment**

Transfer of a Volunteer Clinical Professor to another University title requires academic review. Appointment to another University title may be made after a competitive search, provided that the individual meets the appointment criteria associated with that title.

b. **Non-reappointment**

An appointment in this series with a specified ending date expires by its own terms on that date and the University is not obligated to provide written notice. It is within the University’s sole discretion not to reappoint an individual.

APM - 137, Non-Senate Academic Appointees/Term Appointment, does not apply to appointees in this series.
c. **Termination Prior to End Date**

An appointment may be terminated before the ending date for cause, such as failure to serve the required minimum number of hours, or when, in the opinion of the Dean or designee, there is no longer a need for the appointee’s services or the conduct or performance of the appointee does not warrant continued appointment. The Dean or designee shall give the appointee 30 (thirty) consecutive days prior written notice with a statement of the reason for the termination.

APM - 145, Non-Senate Academic Appointees/Layoff and Involuntary Reduction in Time, and APM - 150, Non-Senate Academic Appointees/Corrective Action and Dismissal, do not apply to appointees in this series.

d. **Complaints**

An appointee may present a written complaint about his or her appointment or early termination of the appointment to the Dean for administrative review. A complaint must be filed within 30 (thirty) calendar days from the date of a written notice of termination or from when the appointee knew or should have known of the termination. The Dean shall consult with the appropriate University official, such as the Department Chair, and shall make a written response to the...
appointee. The written response shall normally be made within 90 days of the
receipt of the complaint. APM - 140, Non-Senate Academic
Appointees/Grievances, does not apply to appointees in this series.

c. University Defense and Indemnification

Appointees may be indemnified by the University for alleged negligent acts
and/or omissions arising from activities conducted within the course and scope of
their University appointment.

Determination of such coverage is made based on the California Tort Claims
Act and other applicable California law, Business and Finance Bulletins,
BUS-81, and applicable campus policy, agreement, or contract. For additional
information on University defense and indemnification, contact the
campus/medical center risk management or Office of the President, Office of
Risk Management.

279-24 Authority

Appointment, reappointment, and/or promotion shall be reviewed and approved by
the Department Chair and/or the Dean as appropriate to the School.
UNIVERSITY OF CALIFORNIA, __________

SCHOOL OF __________

VOLUNTEER CLINICAL FACULTY

ATTESTATION FORM IN SUPPORT OF APPOINTMENT OR RE-APPOINTMENT

I represent the following:

1. I have a current, unrestricted license to practice __________ issued by the _________
   (attach copy of current license).
   - [ ] Yes, license number _____
   - [ ] No, please explain _____

2. Have any of the following ever been, or are any of the following currently being voluntarily or
   involuntarily denied, revoked, suspended, relinquished, withdrawn, reduced, limited, not renewed,
   placed on probation or currently under investigation?
   a) Medical or professional license in any state   [ ] No   [ ] Yes, please explain _____
   b) DEA certificate of registration   [ ] No   [ ] Yes, please explain _____
   c) Membership on any hospital medical staff   [ ] No   [ ] Yes, please explain _____
   d) Clinical privileges on any medical staff   [ ] No   [ ] Yes, please explain _____

3. Have you ever been suspended or excluded by the federal government from participation in any
   governmental health care program or, to the best of your knowledge, been proposed for exclusion?
   - [ ] No
I agree to notify the Department Chair and the Compliance Officer or the University’s Office of General Counsel immediately upon receiving written or verbal notification that I am proposed for exclusion from any governmental health care program.

4. Do you hold Professional Liability Insurance coverage of at least $1 million per occurrence and $3 million aggregate (the minimum coverage required to practice medicine at UC)? N.B. UC liability coverage for voluntary faculty is very limited and only covers activities that are conducted within the course and scope of their University appointment. It does not provide any coverage for the voluntary faculty member’s own lapses, acts, or omissions.

☐ Yes, please identify below

☐ No, if no:

☐ Not needed; UC teaching activities only

☐ Not mandated for specialty, e.g. nursing or pharmacy

☐ Other reason, please explain _____

<table>
<thead>
<tr>
<th>MALPRACTICE CARRIER INFORMATION</th>
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<tr>
<td>NAME OF CARRIER</td>
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</tbody>
</table>
5. Has your professional liability insurance ever been canceled, or has any professional liability insurer refused to renew your policy?

☐ No

☐ Yes, please explain ____

6. I understand that I have an ongoing legal duty to immediately inform UC__ School of _________, in writing, if the _________ (licensing authority) restricts or revokes my license or if my professional liability coverage lapses, is revoked or expires or if any of the circumstances described above occur.

7. I understand that I may be liable for any and all monetary damages or expenses incurred by the Regents of the University of California arising from or related to any misrepresentation, breach of warranty or breach of my ongoing duty to inform the UC__ School of _________ of any of the above changes in licensure or insurance coverage.

I understand, acknowledge and agree that I have the burden of producing adequate information for proper evaluation of my experience, background, training, ability, professional ethics and/or resolving any doubts about these or any of the other qualifications for appointment as a member of the voluntary clinical faculty. I agree to provide such other and further information relating to the foregoing as the School of _________ may require.
I, the undersigned applicant, hereby represent to the UC__ School of _________ that all information contained in the application is true, correct and complete in all material respects. I understand and acknowledge that any material misstatement in or omission from my application shall constitute cause for denial of this application and revocation of my faculty appointment.

Date: ______________________ Signature: ___________________________________________

PRINTED NAME: ________________________________________________________________
Appointees in the Volunteer Clinical Professor series are community volunteer clinicians in the community who teach the application of clinical and basic sciences in areas of patient care. These appointments constitute a valuable way to utilize the interest and expertise of practitioners from the community on a part-time, unsalaried voluntary basis in the areas of teaching, patient care, and clinical research.

For an individual who is employed by the University as a staff physician or clinician with teaching responsibilities may hold a concurrent appointment in the Volunteer Clinical Professor series.

An individual with teaching, research/creative activity, and service responsibilities who holds a clinical appointment paid by a facility that has a formal affiliation with the University (UC-affiliated site, facility) must hold a concurrent without salary appointment should be made in the Health Sciences Clinical Professor series (see APM - 278, but not in the volunteer Clinical Professor series.
279-8 Types of Appointments

Titles and ranks in this series are:

1. Volunteer Clinical Instructor

2. Volunteer Assistant Clinical Professor

3. Volunteer Associate Clinical Professor

4. Volunteer Clinical Professor

Appointees in this series are not eligible for emeritus status.

279-10 Criteria

a. Minimum Standards for Initial Appointment and Promotion

Clinical competence and excellence in teaching as evidenced by teaching evaluations or peer review are the primary basis for initial appointment and promotion in the Volunteer Clinical Professor series. When appropriate, initial appointments may be made based on the promise of teaching excellence. An
appointee must have the appropriate license and/or credentials to practice in his or her field and must contribute significantly to the clinical teaching program— as defined by the campus guidelines. If the individual has participated in professional organizations, University and community service, and/or research, a description of these activities may be included in the appointee’s personnel file as part of the review material. Each school may establish other minimum standards (e.g., board certification, etc.). The Chancellor shall establish campus guidelines that specify the minimum number of required hours per year; the number of minimum hours may vary in different schools or departments.

Clinical competence and excellence in teaching will be the primary basis for appointment, reappointment, and promotion in this series. Clinical competence should be determined by primary verification of licenses, written peer recommendations from recent supervisors, National Practitioner Data Bank (NPDB) report (may be self-query by applicant), evidence of current medical malpractice insurance, chronology of employment with no unexplained gaps since completion of residency, and list of malpractice claims and suits in which the applicant has been involved with narrative description of the underlying allegations, facts and resolution of the complete case. The Chancellor in
consultation with the schools and clinical departments shall determine the need for additional review criteria. For example, if the individual has participated in professional organizations, University and community service, and/or research, a description of these activities should be included in the appointee’s personnel file as part of the review material. The Chancellor, in consultation with the clinical schools and departments, shall establish written criteria for any additional evidence, if needed, beyond the requirements of verified clinical competence (see APM - 279-10-c below) and teaching skills required to support a candidate for appointment and/or promotion.

279-17 Terms of Service

The initial appointment of an individual to a title in this series shall have a specified ending date and may be for a maximum term of three years. Subsequent reappointments may have maximum terms of five years. There is no limit on the number of times an appointment may be renewed or the number of years spent in each rank.

b. Minimum Standards for Reappointment

After the initial appointment, there shall be at least a minimal review at five years of service prior to reappointment that includes an evaluation of teaching and clinical expertise. Such evaluation must include a written evaluation from
After that review, each appointee shall be reviewed at least every five years. The Chancellor may defer the review for one year.

c. Evaluating Clinical Competence

Prior to appointment, reappointment, and/or promotion, each candidate’s clinical competence shall be reviewed and approved by the Department Chair and/or the Dean, as appropriate to the School. Evidence of clinical competence may be demonstrated by the medical staff credentialing process or by way of an attestation form as indicated below:

1. Appointees who teach at a UC facility or a UC-affiliated facility and are successfully credentialed through the medical staff office at the facility where teaching occurs shall be considered to have met the clinical competence requirement.

2. The attestation form in Appendix A must be submitted for all other appointees, including but not limited to:
(a) appointees who teach at a UC facility or a UC-affiliated facility, but who are not credentialed through the medical staff office at the facility where teaching occurs;

(b) appointees who teach at facilities not formally affiliated with UC, including private practice offices; and

(c) appointees who teach in a non-clinical setting.

279-17 Terms of Service

a. Initial appointment

The initial appointment of an individual to a title in this series shall have a specified ending date and may be for a maximum term of five years.

b. Reappointment

Subsequent reappointments may be for maximum terms of five years. There is no limit on the number of times reappointment may occur or on the number of years spent in each rank.
The Chancellor in consultation with the clinical schools and departments shall establish written criteria and guidelines, including the timing for a promotion review. In general, after 10 (ten) years of service, promotion should be considered.

c. **Promotion**

Appointees in the volunteer Clinical Professor series may not be transferred to another University title. Appointment to another University title may be made after a competitive affirmative action search.

Candidates may be considered for promotion after ten years at the rank of Volunteer Assistant Clinical Professor and after ten years at the rank of Volunteer Associate Clinical Professor. Candidates with fewer than ten years of service may be considered for promotion on an exceptional basis, as determined by the campus.

### 279-20 Conditions of Appointment

#### a. **Transfer of Appointment**

Transfer of a Volunteer Clinical Professor to another University title requires academic review. Appointment to another University title may be made after a
b. **Non-reappointment**

An appointment in this series with a specified ending date expires by its own terms on that date. Written notice should be provided when the appointment and the University is not obligated to provide written notice. It is within the University’s sole discretion not to reappoint an individual.

APM - 137, Non-Senate Academic Appointees/Term Appointment, does not apply to appointees in this series.

c. **Termination Prior to End Date**

An appointment may be terminated before the ending date for cause, such as failure to serve the required minimum number of hours, or when in the judgment of the Dean, upon the recommendation of the chair or designee, there is no longer a need for the appointee’s services or the conduct or performance of the appointee does not warrant continued appointment with the University. The Dean or designee shall give the individual appointee 30 (thirty) consecutive days prior written notice with a statement of the reason for the termination.
APM - 145, Non-Senate Academic Appointees/Layoff and Involuntary Reduction in Time, and APM - 150, Non-Senate Academic Appointees/Corrective Action and Dismissal, do not apply to appointees in this series.

d. **Complaints**

An appointee may present a written complaint about his or her appointment or early termination of the appointment to the Chancellor/Dean for administrative review. A complaint must be filed within 30 (thirty) calendar days from the date of a written notice of termination or from when the appointee knew or should have known of the termination. The Chancellor/Dean shall consult with the appropriate University official, such as the department Chair or Dean, and shall make a written response to the appointee. The written response shall normally be made within 90 days of the receipt of the complaint. APM - 140, Non-Senate Academic Appointees/Grievances, does not apply to appointees in this series.

e. **279-75 - University Defense And Indemnification**

Appointees may be covered under indemnified by the University's self-insured liability programs for alleged negligent acts and/or omissions arising from activities conducted within the course and scope of their University appointment. Determination of such coverage is made based on the California Tort Claims Act, Business and Finance Bulletins, BUS-9 and...
Determination of such coverage is made based on the California Tort Claims Act and other applicable California law, Business and Finance Bulletins, BUS-81, and applicable campus policy, agreement or contract. For additional information on University defense and indemnification, contact the campus/medical center risk management or Office of the President, Office of Risk Management.

279-24 Authority

Appointment, reappointment, and/or promotion shall be reviewed and approved by the Department Chair and/or the Dean as appropriate to the School.
I represent the following:

1. I have a current, unrestricted license to practice __________ issued by the __________
   (attach copy of current license).
   [ ] Yes, license number ______
   [ ] No, please explain ______

2. Have any of the following ever been, or are any of the following currently being voluntarily or
   involuntarily denied, revoked, suspended, relinquished, withdrawn, reduced, limited, not renewed,
   placed on probation or currently under investigation?
   a) Medical or professional license in any state [ ] No [ ] Yes, please explain
   b) DEA certificate of registration [ ] No [ ] Yes, please explain
   c) Membership on any hospital medical staff [ ] No [ ] Yes, please explain
   d) Clinical privileges on any medical staff [ ] No [ ] Yes, please explain

3. Have you ever been suspended or excluded by the federal government from participation in any
   governmental health care program or, to the best of your knowledge, been proposed for exclusion?
   [ ] No
I agree to notify the Department Chair and the Compliance Officer or the University’s Office of General Counsel immediately upon receiving written or verbal notification that I am proposed for exclusion from any governmental health care program.

4. Do you hold Professional Liability Insurance coverage of at least $1 million per occurrence and $3 million aggregate (the minimum coverage required to practice medicine at UC)?  

N.B. UC liability coverage for voluntary faculty is very limited and only covers activities that are conducted within the course and scope of their University appointment. It does not provide any coverage for the voluntary faculty member’s own lapses, acts, or omissions.

☐ Yes, please identify below

☐ No, if no:

☐ Not needed; UC teaching activities only

☐ Not mandated for specialty, e.g. nursing or pharmacy

☐ Other reason, please explain _____

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</table>
5. Has your professional liability insurance ever been canceled, or has any professional liability insurer refused to renew your policy?

☐ No

☐ Yes, please explain

6. I UNDERSTAND THAT I HAVE AN ONGOING LEGAL DUTY TO IMMEDIATELY INFORM UC SCHOOL OF __________, IN WRITING, IF THE __________ (LICENSING AUTHORITY) RESTRICTS OR REVOCKES MY LICENSE OR IF MY PROFESSIONAL LIABILITY COVERAGE LAPSES, IS REVOKED OR EXPPIRES OR IF ANY OF THE CIRCUMSTANCES DESCRIBED ABOVE OCCUR.

7. I UNDERSTAND THAT I MAY BE LIABLE FOR ANY AND ALL MONETARY DAMAGES OR EXPENSES INCURRED BY THE REGENTS OF THE UNIVERSITY OF CALIFORNIA ARISING FROM OR RELATED TO ANY MISREPRESENTATION, BREACH OF WARRANTY OR BREACH OF MY ONGOING DUTY TO INFORM THE UC SCHOOL OF __________ OF ANY OF THE ABOVE CHANGES IN LICENSURE OR INSURANCE COVERAGE.

I understand, acknowledge and agree that I have the burden of producing adequate information for proper evaluation of my experience, background, training, ability, professional ethics and/or resolving any doubts about these or any of the other qualifications for appointment as a member of the voluntary clinical faculty. I agree to provide such other and further information relating to the foregoing as the School of __________ may require.
I, the undersigned applicant, hereby represent to the UC School of that all information contained in the application is true, correct and complete in all material respects. I understand and acknowledge that any material misstatement in or omission from my application shall constitute cause for denial of this application and revocation of my faculty appointment.

Date: ____________________ Signature: __________________________________________

For additional information on University defense and indemnification, contact the campus/medical center risk management or Office of the President, Office of Risk Management.

PRINTED NAME: _______________________________________________________________
350-0 Policy

Clinical Associates are University-paid staff physicians or other clinicians who practice at a facility that has a formal affiliation with the University of California and whose accomplishments are valuable to the University; they deliver high-quality health care and make contributions to the University through their expertise, knowledge, and perspectives.

350-4 Definition

Clinical Associate is a non-salaried, volunteer appointment title for clinicians who contribute to the University of California mission. As Clinical Associates, they practice at UC-affiliated facilities, which include University-managed clinics or practices as well as satellite healthcare facilities with which the University has a formal affiliation. A Clinical Associate may be employed by the University in a salaried staff position. Clinical Associates are recognized at their primary practice facility and/or by the University of California for practicing patient care at acceptable quality standards based upon appropriate licensure, credentials, and review of their peers. Because Clinical Associates have no formal teaching or research obligations, they are non-faculty academic appointees.
350-8 Type of Appointment

There are no ranks associated with the title Clinical Associate. The word “professor” is not to be included in the title. Appointees are not eligible for emeritus status.

350-10 Criteria

The following criteria are applied when evaluating a candidate for appointment:

a. Evidence of professional competence may be met by specialty or subspecialty board certification, plus evidence of current state licensure or the equivalent; and

b. Continuing practice at the UC-affiliated facility and satisfactory performance as assessed and documented by peer review at that facility.

350-17 Terms of Service

a. The initial appointment of an individual to the Clinical Associate title shall have a specified ending date and may be for a maximum term of five years. Subsequent reappointments may be for maximum terms of five years.
b. Notwithstanding the individual’s appointment or reappointment term, all Clinical Associate appointments are contingent upon the following conditions and will end if either condition is no longer met: 1) the individual continues to actively practice at the UC-affiliated facility and 2) an affiliation agreement between the University and the UC-affiliated facility remains in effect.

c. The University may terminate the appointment before the end of its term without prior notice.

350-18 Salary

Individuals appointed to the title of Clinical Associate are ineligible for compensation, whether in the form of salary or wages, from the University of California, in connection with that appointment.

350-20 Conditions of Appointment

a. Appointment to the title of Clinical Associate does not constitute employment at the University of California.

b. A Clinical Associate is bound by the rules and policies of the University of California.
c. Transfer of Clinical Associate appointees to another University title requires academic review. Appointment to another University title may be made after a competitive search, provided that the individual meets the appointment criteria associated with that title.

d. An appointment as Clinical Associate expires on the specified end date and the University is not obligated to provide written notice. It is within the University’s sole discretion not to reappoint an individual. APM - 137, Non-Senate Academic Appointees/Term Appointment, does not apply to the Clinical Associate title.

350-24 Authority to Appoint

Appointment and/or reappointment shall be reviewed and approved by the Department Chair and/or the Dean as appropriate to the School.
### APPENDIX A
Proposal: Review Criteria for Health Sciences Clinical Professors, Volunteer Clinical Professors, and Clinical Associates

<table>
<thead>
<tr>
<th>Review Criteria: Overview</th>
<th>APM - 278 &amp; APM - 210-6 Health Sciences Clinical Professors</th>
<th>APM - 279 Volunteer Clinical Professors</th>
<th>APM - 350 Clinical Associates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellence in clinical teaching</td>
<td>Excellence in clinical teaching</td>
<td>Excellence in clinical teaching</td>
<td>Affiliation with UC</td>
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<tr>
<td>Professional competence and activity</td>
<td>Professional competence and activity</td>
<td>Professional competence and activity</td>
<td>Recognition by employer and UC as achieving acceptable quality standards for clinical care based on employer's review</td>
</tr>
<tr>
<td>Research and/or creative activity</td>
<td>No expectation of research/creative activity</td>
<td>No expectation of research/creative activity</td>
<td>Initial appointment with confirmation of appropriate license/credentials to practice in the field</td>
</tr>
<tr>
<td>University and public service</td>
<td>No expectation of service</td>
<td>No expectation of service</td>
<td></td>
</tr>
<tr>
<td>Chancellor establishes criteria of any additional evidence beyond the requirements of verified clinical competence and teaching skills</td>
<td>Chancellor establishes criteria of any additional evidence beyond the requirements of verified clinical competence and teaching skills</td>
<td>Chancellor establishes criteria of any additional evidence beyond the requirements of verified clinical competence and teaching skills</td>
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### Review Criteria: Teaching

- Evidence of excellence in clinical teaching is essential for advancement. Normally, teaching in a clinical setting comprises intensive tutorial instruction.

**HS Assistant Clinical Professor:** Either a record of active, competent teaching of health sciences students, graduate students, residents, postdoctoral scholars, fellows, or continuing education students - or - the promise of teaching excellence.

**HS Associate Clinical Professor:** Demonstrated excellence by way of teaching evaluations or awards, invitations to present Grand Rounds, lectures, or courses, etc.

**HS Clinical Professor:** Recognized as an outstanding teacher or mentor by way of teaching evaluations or awards, invitations to present Grand Rounds, lectures, or courses, etc.

- Excellence in clinical teaching as evidenced by teaching evaluations or peer review
- Must contribute to the clinical teaching program as defined by campus guidelines
- Campus guidelines specify the minimum number of required hours per year

- N/A
## APPENDIX A

### Proposal: Review Criteria for Health Sciences Clinical Professors, Volunteer Clinical Professors, and Clinical Associates

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<td>Evaluation focuses on quality of patient care, the significance and quantity of clinical achievement and contribution to the profession.</td>
<td>• Clinical competence verified by appropriate license or credentials or attestation form</td>
<td>• Per employer guidelines and employer peer review</td>
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**HS Assistant Clinical Professor:** Assessment of present capabilities, the likelihood that the candidate will be a competent teacher, develop an excellent professional practice, and has the potential to make contributions to the clinical activities of the department.

**HS Associate Clinical Professor or HS Clinical Professor:** Evidence may include, but is not limited to, evaluations that demonstrate:

- Provision of high-quality patient care
- High level of competence in a clinical specialty
- Significant participation in the activities of clinical and/or professional groups
- Reputation as an outstanding referral health-care provider
- Effective development, expansion, or administration of a clinical service
- Recognition or certification by a professional group
## APPENDIX A

**Proposal: Review Criteria for Health Sciences Clinical Professors, Volunteer Clinical Professors, and Clinical Associates**

<table>
<thead>
<tr>
<th>Review Criteria: Research/Creative Activity</th>
<th>APM - 278 &amp; APM - 210-6 Health Sciences Clinical Professors</th>
<th>APM - 279 Volunteer Clinical Professors</th>
<th>APM - 350 Clinical Associates</th>
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<tr>
<td>Research and creative activity is reviewed from the perspective that these activities are derived from clinical teaching and professional service activities. Campus guidelines may include separate requirements or expectations. To be promoted to the HS Associate Clinical Professor or HS Clinical Professor rank, the individual's record must demonstrate creative contributions to academic, research, or administrative activities, satisfied by evidence of substantial contributions, which may include, but is not limited to:</td>
<td></td>
<td>• Campus may establish guidelines</td>
<td>• N/A</td>
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<tr>
<td>• Development of or contributions to educational curricula, administration of a teaching program, advancement of professional education, original materials for lectures, brochures, platform or poster presentations</td>
<td></td>
<td>• No requirement in APM - 279</td>
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<tr>
<td>• Participation in research</td>
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<tr>
<td>• First, senior, or collaborative authorship of peer-reviewed research papers</td>
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<tr>
<td>• Development of or contributions to administration of a clinical service or health care facility, clinical guidelines, quality improvement programs, medical or other information systems, advancement of professional practice programs, community-oriented programs, community outreach or informational programs</td>
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APPENDIX A
Proposal: Review Criteria for Health Sciences Clinical Professors, Volunteer Clinical Professors, and Clinical Associates

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<td>HS Assistant Clinical Professor:</td>
<td>There may be overlap between guidelines for service and other criteria. The review committee should assess the evidence from the perspective of the candidate's unique contributions to the discipline and assign the evidence to the appropriate category. Campus guidelines may include separate requirements or expectations. <strong>HS Assistant Clinical Professor:</strong> The candidate should be evaluated for the likelihood of participation in department activities and the potential for service to the University. <strong>HS Associate Clinical Professor:</strong> Service may be demonstrated by active participation on committees or task forces within the university, service to organizations through education, consultation, or other roles. <strong>HS Clinical Professor:</strong> Service may be demonstrated by awards, appointment to administrative positions such as program director, or chair of a committee, officer or committee chair in professional and scientific organizations or on editorial boards.</td>
<td>• Campus may establish guidelines • No requirement in APM - 279</td>
<td>• N/A</td>
</tr>
</tbody>
</table>
Date: October 21, 2015
To: Vice Provost Susan Carlson
From: APM - 278 Work Group
Subject: Recommendations on Academic Personnel Policy Sections 278 (APM - 278, Health Sciences Clinical Professor Series), 279 (APM - 279, Clinical Professor Series, Volunteer Series), 210-6 (APM - 210-6, Instructions to Review Committees on the Health Sciences Clinical Professor Series), and Proposed New Section 350 (APM - 350, Clinical Associate)

Introduction

In January 2015, a Work Group began review of APM - 278 and APM - 210-6 to draft recommended revisions to policy governing the Health Sciences Clinical Professor series. The Work Group’s objective was to draft policy reflecting common existing philosophy and practices, strengthen and refine criteria for appointment and advancement depending on type of individual, and differentiate policy language for volunteers (APM - 279) and policy for salaried and without salary faculty (APM - 278). The sixteen-member Work Group includes academic administrators from each of the health sciences campuses and the Office of the President, including:

- Becky Baugh, Academic Personnel Director (UCI)
- Susan Fauroat, Policy and Compensation Analyst (UCOP)
- Jami Holland, Senior Academic Affairs Analyst (UCR School of Medicine)
- Cynthia Leathers, Assistant Vice Provost (UCSF)
- Emerald Light, Manager, Academic Affairs (UCSF)
- Janet Lockwood, Director, Policy and Compensation (UCOP)
- Sheila Morris, Director, Academic Affairs (UCR School of Medicine)
- Kris Musey, Academic Affairs Supervisor (UCI School of Medicine)
- Kimberley Poole, Academic Personnel Consultant (UCD)
- Lisa Reevesman, Academic Personnel Manager (UCD School of Nursing)
- Abby Reyes, Analyst/Supervisor (UCD School of Medicine)
- Brent Seifert, Assistant Dean (UCD School of Medicine)
- Steve Shaevel, Director, Academic Personnel (UCLA School of Dentistry)
- Stephanie Shaw, Director, Academic Affairs (UCLA School of Medicine)
- Carl D. Smith, Director, Academic Affairs and Faculty Compensation (UCI School of Medicine)
- Rebecca Woolston, Principal Analyst, Academic Affairs (UCSD School of Medicine)

The Work Group met by phone 15 times between January and October and in person on July 17, 2015. The Work Group is staffed by Academic Personnel and Programs, Office of the President.
Background

The landscape of health care delivery is changing rapidly in response to external pressures. For example, one of the main ways the Affordable Care Act seeks to reduce health care costs is by encouraging doctors, hospitals and other health care providers to form networks that coordinate patient care; this model is known as the “accountable care organization (ACO).” The ACO model calls for the coordination of services across the care continuum and raising the quality of care for a regional population of patients who seek comprehensive care. In response to these pressures, many of the UC Medical Centers are now expanding into health networks by partnering and affiliating with other physician and hospital organizations to reach a larger population and operate at the scale necessary to sustain an academic health center. It is within this context that the Work Group felt it important to review multiple APM sections simultaneously. The goal of the Work Group was to ensure that this suite of APM sections would provide both clarity and flexibility to address a number of issues in a rapidly changing health care environment, such as clinicians working under varying affiliation agreements.

Summary of Recommendations

APM - 278 and APM - 210-6. We have completed our analyses and have developed a number of recommendations to improve how the University of California appoints and advances faculty whose primary duties are clinical teaching and clinical practice within the health sciences professions; these faculty appointees are also expected to engage in research/creative activities in the context of their clinical duties and in University and public service. Proposed draft APM - 278 and proposed draft 210-6 are attached to this report.

APM - 279. As our work progressed, it became clear that we needed to view the Health Sciences Clinical Professor series in the context of proposed draft APM - 279, the Volunteer Clinical Professor series, which had been circulated for Management Consultation during the fall of 2014; this policy requires updates to be consistent with our approach to APM - 278. As you know, Volunteer Clinical Professor appointees are those who have clinical care and clinical teaching as their duties with no expectation of research/creative activity or University and public service. A revised proposed draft APM - 279 is attached to this report, which we recommend circulating for a new round of Management Consultation with proposed drafts of APM - 278, APM - 210-6, and new policy APM - 350 described below.

New policy APM - 350. We identified an additional group for which a non-faculty academic appointment would be beneficial to the University: these are clinical practitioners who contribute to the mission of the University by practicing their disciplines at University-managed clinics or practices, or satellite healthcare facilities; however, they have no clinical teaching duties. Although a faculty appointment is not recommended, we propose repurposing the Clinical Associate title, currently defined in APM - 112-4-b(8), as a title to be used for 1) without academic salary and paid staff clinicians with no teaching duties, and 2) without academic salary, volunteer appointees employed by University health system network sites and satellite facilities. Proposed new policy APM - 350, Clinical Associates is attached for your consideration.
**Context for Recommendations**

Work Group members dedicated substantial time to collect and review relevant materials to serve as a foundation for our discussions and drafting efforts. This section of our report is a summary of the policies, data, and campus practices that we reviewed and a summary of the concepts we identified as the basis for our drafts. Background documents with additional detail prepared for each of the efforts described below are available on file.

**History of APM - 278, APM - 210-6, and APM - 279.** There are few useful historical documents on file regarding the creation of these policies. Existing materials show that Clinical Professor series titles were in use systemwide at least since 1962. Sometime between 1962 and 1974, a definition of Clinical Professor was added to what was then the “Administrative Manual, 112-4(12).” The definition stated that: “Appointees in the clinical series teach the application of basic sciences and clinical procedures to clinical practice in all those areas concerned with the care of patients.” There are documents on file that refer to Clinical Professor series review criteria in APM - 220; however, we could find no other reference or specific policy in the history files.

Each health science center campus had been using the Clinical Professor title for an extended period and in accord with campus policy and practice. A review of the existing historical documents showed that campuses developed guidelines for individuals appointed with salary, without salary, and as volunteers. The lack of a systemwide policy had affected the University’s ability to defend what was then increasing litigation. In 2001 (and perhaps earlier), then Vice President Drake formed a work group to draft systemwide policy, followed later in 2001 and 2002 by OP Academic Advancement and Academic Personnel Director efforts to craft policy addressing campus needs to appoint salaried Clinical Professors and volunteer Clinical Professors. This work culminated in the creation and issuance of APM - 278, APM - 210-6, and APM - 279 in 2005.

**Comparator institution policy.** OP staff collected and reviewed available and relevant policy at comparison institutions: the Comparison 8 (Harvard, Illinois, MIT, Michigan, Stanford, SUNY-Buffalo, Virginia, and Yale) plus other Association of American Universities (AAU) member institutions (Brown, Chicago, Colorado, Columbia, Cornell, Duke, Emory, Indiana, Johns Hopkins, Kansas, Maryland, Minnesota, New York, Northwestern, Pennsylvania, Princeton, Southern California, Texas, Washington, and Wisconsin) and other institutions (Baylor College of Medicine, Medical College of Wisconsin, and the Robert Wood Johnson Medical School).

Review of the available policy revealed the complexity and array of faculty appointments for clinicians who are engaged primarily in clinical service, participate in teaching, and are encouraged to engage in scholarly activities and university and public service. Many policies incorporate language and credit toward appointment and/or promotion for administrative service, such as department chair or program directors, or for those in other leadership positions. All institutions offer research and clinical appointments for faculty with tenure and on tenure tracks, somewhat like the Ladder-rank series with many elements in common with the Professor In Residence and Professor of Clinical X series. Most institutions offer adjunct and/or volunteer clinical appointments for faculty paid by affiliates and part-time faculty, i.e., Adjunct Clinical Professor of X and/or Clinical Professor of X. Some institutions offer the “Clinician Educator (Affiliated),” “Clinical Assistant Professor (Affiliated),” “Affiliate Professor of X,” or “Professor of X at Affiliate” for faculty appointed at affiliate institutions either salaried by the home institution or salaried by the affiliate. No institutions offered the combination of non-tenure track and without salary titles that UC offers, i.e., Adjunct, Health Sciences Clinical Professor, and Volunteer
Clinical Professor. Some institutions, for example, Northwestern, offer the title, “Health System Clinician (100% Clinical),” allowing participation up to 5% in teaching. Many institutions offer the “clinician educator” track and some institutions provide for movement between non-tenure track titles for clinician educators and full-time clinicians (Penn and Weill).

University of California Health Sciences Clinical Professor population. There are many different types of individuals appointed in the Health Sciences Clinical Professor series, whose appointments are defined by different, varied attributes. The various possible attributes for each appointee are: with salary, without salary, paid by UC, paid by affiliate, 51% or greater FTE, and 50% or less FTE, all of which can be used in various combinations depending on Plan participation, pay status, FTE, and location of appointment, i.e., 50% FTE located at affiliate and paid by affiliate, 51% paid by UC and located at UC, 100% without salary located at UC, etc. In fiscal year 2013-14, there were in total more than 6,000 Health Sciences Clinical Professor appointees. Payroll reports show that there were 3,272 Health Sciences Clinical Professor appointees who were paid by UC, for a total 2,931 FTE. Because payroll does not track without salary appointees, each UC health sciences center campus provided data on the Health Sciences Clinical Professor appointees who were without salary:

<table>
<thead>
<tr>
<th>HS Clinical Professor Series – Without Salary (WOS)</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>WOS – at UC</td>
<td>978</td>
</tr>
<tr>
<td>WOS – Paid by Affiliate</td>
<td>1,056</td>
</tr>
<tr>
<td>WOS – WOS at Affiliate</td>
<td>69</td>
</tr>
<tr>
<td>WOS – Joint MSP Title</td>
<td>653</td>
</tr>
<tr>
<td>WOS – Other/Unknown</td>
<td>79</td>
</tr>
<tr>
<td>Total</td>
<td>2,756</td>
</tr>
</tbody>
</table>

Campus practice. Work Group members charted campus interpretation of policy and use of the series to identify points of commonality and divergence for Health Sciences Clinical Professor faculty. During the exercise, we compared responsibilities, review processes and procedures, board certification requirements, salary step assignment requirements for appointees without salary, authority levels required for appointment, merit, promotion, and whether the eight-year rule limit is applied. Also, we collected and reviewed campus guidelines for appointing and advancing Health Sciences Clinical Professor faculty. We found that campus and sometimes school-level practice varies greatly. However, Work Group members concluded that the concepts agreed upon during discussions and captured in the new drafts will work at each campus though some may have to change some current practices. In addition, we were able to use significant portions of language from campus guidelines in our drafts.

Concepts underlying 278, 210, 279, and 350. Work Group members charted the following concepts for Health Sciences Clinical Professors, Volunteer Clinical Professors, and Clinical Associates to compare the policy framework for each population:

- Definition, i.e., teaching or no teaching duties
- Responsibilities, i.e., teaching, patient care, research/creative activity, service
- Types, i.e., clinicians, teachers, etc.
- Full-time or part-time
- Term of appointment and reappointment, i.e., length of appointment and reappointment
- Restrictions, i.e., eight-year limit, limits on state funding, eligibility to transfer titles
• Salary, i.e., paid by UC, paid by affiliate, without salary
• Authority, i.e., authority to approve appointments, reappointments, advancement
• Review Criteria:
  o Overview
  o Teaching
  o Professional Competence and Activity
  o Research/Creative Activity
  o Service

Having completed this comprehensive review and analysis of the underlying policy issues, Work Group members consulted with colleagues and administrative leaders on each campus within the campus and/or school Academic Personnel/Academic Affairs offices to make sure that our direction and plan for drafting policy were sound and compatible with campus needs. Work Group members reported on these conversations at the in-person meeting on July 17, bringing questions and feedback forward to inform our drafting work. We were pleased to find that campus/school colleagues and leaders consulted by Work Group members approved of the direction of our work to date and plan for drafting policy.

Key Issues

Work Group discussions have centered on fundamental questions and issues related to APM - 278 and APM - 210-6 which were submitted by the campuses at the outset of our work, including the following:

• Which types of faculty appointees should be covered under APM - 278 and which types should be covered under APM - 279? How should MSP staff clinicians with and without teaching responsibilities be appointed?
• Is this the appropriate series for faculty who teach clinical procedures but have no patient care? Can policy be revised to specifically cover all health sciences disciplines, not just medicine?
• Should the Health Sciences Clinical Professor series be separated into research and clinical tracks?
• How do we appoint clinicians who will have a relationship with the University as campuses expand into healthcare networks in which there are more/multiple affiliations with hospitals, medical groups, etc.?
• How do we develop criteria to distinguish between full-time paid Health Sciences Clinical Professor appointees; without salary, paid by affiliate, Health Sciences Clinical Professor appointees; and, Volunteer Clinical Faculty?
• Should without salary appointees be subject to the appointment and advancement policies that cover paid appointees? Should APM - 137, 140, and 150 apply to without salary appointees?
• Should Health Sciences Clinical Professor faculty be limited to eight-years’ service? Should it be imposed on without salary appointees?
• Should the APM - 278 limits on state funding be maintained?
• Should minimum review criteria for advancement in the Health Sciences Clinical Professor series be defined in APM - 210-6? Do we need to define local/regional/state/national/international reputation for the purpose of appointment and promotion?
• Should there be standardized timelines for advancement? Should criteria for accelerations be defined?
• Can advancement criteria for the barrier steps be defined for this series and added to APM - 210-6 since APM - 220-18-b(4) about advancement from Professor Step V to Step VI and to Above-Scale status does not work for Health Sciences Clinical Professor faculty?

Addressing the Key Issues

The report narrative below provides the Work Group’s proposals to address the key issues and questions that were considered during the course of our work. The attached chart (Appendix A) provides a side-by-side comparison of the following appointment characteristics for Health Sciences Clinical Professors, Volunteer Clinical Professors, and Clinical Associates.

Proposed policy framework. Proposed draft APM - 278 covers both paid and without salary appointees, including both full-time and part-time appointees, regardless of location, i.e., UC or affiliate. Proposed draft APM - 279 covers community (volunteer) clinicians. In addition, APM - 279 covers MSP-paid and other paid staff titles who require a without salary appointment to undertake teaching responsibilities. Proposed new policy APM - 350 covers 100% clinicians without teaching responsibilities to fill a gap for without salary, paid staff clinicians and appointees at “satellite” locations affiliated with the University, i.e., health system networks, hospitals (other than the VA and county hospitals, for example, with formal, detailed affiliation agreements), practice groups, clinics, etc.

Appointee responsibilities. Health Sciences Clinical Professor appointees are expected to fulfill teaching, professional competence and activity, research/creative activity, and University and/or public service responsibilities. The appointment and advancement criteria are to be balanced, depending on how the duties are weighted. However, research/creative activity and University and/or public service derive from their primary responsibilities in teaching and professional competence and activity.

Volunteer Clinical Professor appointees are practitioners from the community who teach the application of clinical and basic sciences in the areas of patient care. These appointments are made on a part-time, without salary, voluntary basis in the areas of teaching, patient care, and optionally, research and service.

Clinical Associates are 1) paid staff clinicians and 2) clinicians who are employed by satellite facilities, health system networks, and other affiliated clinical entities and engaged 100% time in patient care, with no UC salary, and no teaching, research/creative activity, or University and/or public service responsibilities. To be paid by UC and/or engage in teaching, research/creative activity, or University and/or public service, the individual must be placed in an appropriate title following a competitive search.

Term of appointment and reappointment. Health Sciences Clinical Professors are appointed and reappointed on an annual basis. Review cycles are every two years at the Assistant I through Associate III level and every three years thereafter until Professor IX, after which reviews are every four years. Affiliate-paid and without salary appointments located at affiliates end when employment with the affiliate ends. However, affiliate-initiated layoffs are covered by APM - 145 and the appointment continues on a without salary basis.
Volunteer Clinical Professor appointees are appointed and reappointed on five-year terms. Promotion may occur after 10 years but is not required. These appointments expire on the end date and appointees may be terminated before the end date.

Clinical Associates are appointed and reappointed on five-year terms. There are no ranks. Appointments end when employment with the affiliated site ends.

**Salary.** Health Sciences Clinical Professor appointees may be paid by UC and/or an affiliate; they may also be appointed on a without salary basis.

Except for MSP and other staff clinicians who are paid as staff, Volunteer Clinical Professor appointees and Clinical Associates are ineligible for salary from the University.

**Eight-year limit.** The eight-year limit is imposed on 1) faculty appointed 51% or more who are paid by UC, and 2) faculty appointed 51% or more who are paid by an affiliate (without salary from UC).

**State funding limits.** Language related to state funding limits is removed. State funding limits were instituted originally in 2005 to 1) ensure that FTEs were reserved for those in the Professorial series, and 2) reduce the potential implication of tenure or an allocated, budgeted position claim. Work Group members assert that this concept is now outdated; state funds are rarely used to support faculty in the Health Sciences Clinical Professor series and policy is clear that the faculty appointed in this series are ineligible for tenure.

**Authority to appoint, reappoint, and advance.** Campus practice varies greatly for Health Sciences Clinical Professor and Volunteer Clinical Professor appointees; thus, policy indicates the Chancellor as the authority, which may be delegated. The authority to appoint Clinical Associates is proposed at the Dean level.

**Faculty rights in the event of early termination.** The following rights and protections for non-Senate academic appointees under Regents Standing Orders and the APM remain in place: Regents Standing Order 103.9; APM - 137, Term Appointment; APM - 140, Grievances; APM - 145, Layoff and Involuntary Reduction in Time; and APM - 150, Corrective Action and Dismissal.

**Consideration of APM - 210-6, Instructions to Review Committees**

The Work Group understands that we may need to consult with the Academic Senate on proposed review criteria for the Health Sciences Clinical Professor series before proceeding with Management Consultation. Since there were significant questions and issues related to current review criteria in APM - 210-6, which is often confusing and deficient regarding differentiation of rank, the Work Group proceeded to draft new language based largely on current campus guidelines and best practices. Language for the Volunteer Clinical Professor series and Clinical Associates is based on campus guidelines, best practices, and comparator institution policy. Review criteria are drafted with intentional flexibility to allow faculty to advance and to be eligible for promotion at a standard pace. Review cycles mirror those of the Professorial series: every two years from Assistant I through Associate III and every three years thereafter until Professor IX. Except in rare and compelling cases, advancement to Above Scale will not occur after less than four year at Professor IX. The following paragraphs describe the approach and overview of criteria for each of the titles.
Overview of review criteria. Health Sciences Clinical Professor faculty are appointed and advanced based on evidence of clinical teaching, professional competence and activity, research/creative activity, and University and/or public service. Criteria are to be weighted depending on a description of the appointee’s duties provided by the department chair. However, research/creative activity and University and/or public service are derived from the appointee’s primary responsibilities in teaching and professional competence and activity.

Volunteer Clinical Professor appointees are appointed and advanced based on evidence of clinical teaching and professional competence and activity. Evidence of research/creative activity and/or University and/or public service is encouraged and will be considered during reviews for appointment and advancement if provided. However, there is no expectation of achievement in these areas.

Clinical Associates are appointed and reviewed by their peers at their place of employment based on achieving acceptable quality standards for clinical care based on the employer’s review. Confirmation of the appropriate license and/or credentials to practice in the field must be provided to the University department at the time of initial appointment.

Review criteria for teaching, professional competence and activity, research/creative activity, and University and/or public service. Please see Appendix A for a summary of proposed review criteria for Health Sciences Clinical Professors, Volunteer Clinical Professors, and Clinical Associates.

Recommendation and Next Steps

The Work Group believes that the attached proposed drafts of APM - 278, APM - 210-6, APM - 279, and APM - 350 present a coherent and well-reasoned approach to policy covering the complex array of roles for health sciences practitioners contributing to the mission of the University of California as faculty, volunteers, and affiliated academic appointees. The Health Sciences Clinical Professor series is intended for faculty involved in all aspects of a faculty member’s role in teaching, professional competence and activity, research/creative activity, and University and public service, regardless of pay status or location. The Volunteer Clinical Professor series is intended for those involved in clinical teaching and clinical practice on behalf of the University. This title is intended for University-paid staff clinicians and those without academic-based salary or the expectation of involvement in research/creative activity or University and/or public service, though the title does not preclude engaging in those activities. The Clinical Associate title is intended for those providing clinical services on behalf of a University satellite facility, without salary (except for paid-staff clinicians), and with no responsibility for teaching, research/creative activity, and service.

Thank you for holding Systemwide Review of APM - 279 pending our review of APM - 278, APM - 210-6, APM - 279 and creation of APM - 350. We believe that, following your review and any recommended revisions of the drafts, these policies are ready to be distributed for Management Consultation. We recognize that you may wish to consult with Academic Senate leaders and others prior to that stage of policy review.

The Work Group would be willing to meet with you to discuss our first round of recommendations in this memo and reflected in the drafts. We appreciate the chance to contribute to crafting these important policies.