

Responses to Junior Faculty Questions

by: Assistant Dean Richard Gold, Assistant Dean John Colicelli, and CAP Chair Catia Sternini

1. What are the most important factors in being considered for promotion, and can you please discuss (with specifics) the processes of accelerated promotion?

Although everything in your dossier is considered at each level of the review process, scholarship and teaching accomplishments stand out as indispensable for promotion in all Professorial series. Service and professional competence are also evaluated. Service is not a priority for an Assistant Professor and can be limited (e.g., membership on a departmental or university committee, reviewing for a journal), but will be expected to increase after your promotion to Associate Professor. The meaning of professional competence depends on your professor series and could include wide recognition of your research, teaching, or clinical activity. Excellence in clinical activity is essential for clinicians.

Scholarly accomplishments of particular importance for promotion in the In-Residence and Regular Professor series are peer-reviewed publications and competitive grant awards (see Q3 for more details on both). Extramural evaluators typically focus on these measures of success.

Teaching accomplishments include didactic instruction (formal courses, stand-alone lectures, research seminars, grand rounds, etc.), tutoring (leading or contributing to a medical student course or to a journal club or discussion group), and research and career mentoring (primary advisor to undergraduate or graduate students, or to postdoctoral or clinical fellows, or serving on a masters or Ph.D. dissertation committee of which someone else is the chair or primary supervisor).

Requests for accelerated advancement need to be justified in the candidate's Personal Statement (Self-Statement) and in the Department's letter by describing extraordinary accomplishments during the period under review. "Extraordinary" means accomplishments above the high standard established for regular, on-time advancement at UCLA. Examples include multiple high-profile publications as first or senior author, multiple large extramural grants on which you are the P.I. or one of dual or multiple P.I.s, and prestigious honors or awards.

2. Promotion within the In-Residence Professor series is more difficult to obtain than promotion in the Health Sciences Clinical Professor series. What are the advantages of being appointed in the In-Residence series at the onset of one's career rather than switch to In-Residence later?

A Professor-in-Residence, like a regular Professor or Professor of Clinical X, is a member of the Academic Senate. (Among the rights and privileges of Academic Senate membership are shared governance of School and University policy and access to Academic Senate committees that deliberate on policies and certain types of funding opportunities.) Provided you have strong prospects for success in research it is easier to be appointed in the In-Residence series at the onset of your career as an Assistant Professor because your appointment doesn't have to be approved by the Council on Academic Personnel (CAP) and the Vice Chancellor for Academic Personnel, as would be required were you to switch to In-Residence from the Health Sciences Clinical series. Keep in mind, however, that your Fourth-Year Appraisal and your promotion to the associate professor rank require a review by CAP (or, if you are in the Health Sciences Clinical series, by ClinCAP a subcommittee of CAP), and your record at these points in your career must show significant and increasing progress.

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3. What are the most valued productivity measures for promotion (papers, grants, number of mentees)?

- a. In terms of publications, how does the impact factor of the journals in which my publications appear, and the quantity of my publications, play a role?

Both the number of your publications and each journal's impact factor (or perceived selectivity) are considered by the reviewers of your dossier. There is no formula for determining how many peer-reviewed publications are required or the effect of the impact factor of the journals in which they appear. As a rule of thumb, however, 2 or 3 peer-reviewed articles per year is a reasonable number unless they are in very high-impact journals (e.g., *Nature*, *Science*) or present groundbreaking information, in which case 1 paper per year might be satisfactory. Citation data (the number of papers by other authors in which your paper is cited) is useful but takes years to accumulate. If your publication is highlighted by the journal (e.g., by a cover photo or an editorial), mention the highlight after the entry in your bibliography and mention it in your Personal Statement (Self-Statement).

- b. What is the role of authorship?

Your authorship role is important, and you should make it clear to reviewers. Indicate with an asterisk if you are the corresponding (senior or anchor) author or co-corresponding author. Indicate if the first author is one of your trainees. If you are a middle author of a publication resulting from collaborative research in which your contribution was substantial, describe your contribution in a sentence or two following the entry in your bibliography and describe it and the source of research funding (grant agency) in your Personal Statement (Self-Statement). CAP has recently added a new guideline to recognize the importance of "team science" based on collaborative work. Finally, if you are an inventor on a patent explain your role.

- c. How does the importance or weight of a federal grant differ from that of an industry grant?

Federal grants, especially NIH R01 grants but other NIH grants as well, are the most prestigious if you are the P.I. or one of multiple P.I.s. The source of the grant (government, foundation, industry) is less important than your role (P.I. or one of multiple P.I.s, versus a role carrying less responsibility, independence and leadership, such as co-P.I. or co-investigator). The direct cost to you and the duration of funding is also considered.

Awards greater than \$100K per year for 3-5 years, uncommon outside of NIH and the National Science Foundation, are more competitive and therefore are given more weight.

- d. Is an R01 required to advance from assistant to associate professor?

An NIH R01 used to be the standard because no other grant offered as much funding for so long a time. Now, although an R01 is not specifically required for promotion, being the P.I. or one of multiple P.I.s on an R01 is an important measure of your success as an independent investigator. However, being the P.I. or one of multiple P.I.s on other types of NIH grants or being a project leader on an NIH P grant (Program Project Grant) will also serve you well.

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4. What pitfalls arise in the promotion process for researchers? How can one avoid them?

People in the Researcher series are expected to “engage in research equivalent to that required for the Professor Series.” In other words, their publications and grant funding will be judged by the same standard as that for someone in the regular Professor or Professor-in-Residence series. The difference is that Researchers have no teaching requirement. To be successful, a Researcher needs to establish a record of independent research, including first- or corresponding authorship of peer-reviewed research papers (ideally without a prior mentor as a co-author) and being the P.I. or one of multiple P.I.s on multiyear, prestigious grants.

5. How is the promotion process impacted by parental leave (i.e., what can pause the promotion clock?)

You must be promoted within eight years of your appointment as an Assistant Professor. Time off the 8-year clock (time-off-the-clock or TOC) can be justified by childbearing/childrearing, serious health impairment, bereavement, the COVID-19 pandemic, or a major event that interferes significantly with your research program. Up to two non-consecutive years of TOC may be granted. Requests for TOC should ideally be made within two years prior to its expected onset and prior to July 1 of the promotion year. A candidate may use TOC to postpone a Fourth-Year Appraisal. A candidate determines whether the department mentions their TOC in its requests for extramural letters of evaluation for promotion.

6. Does community-based work contribute to academic advancement?

Yes. Community Service is a category in the Data Summary section of your dossier and includes such activities as serving as a physician volunteer at a health fair or free family clinic, volunteering as a COVID-19 vaccinator, volunteering at fund-raising events for charities, providing healthcare lectures to the community, and volunteering in a classroom or at a food bank or homeless shelter.

Do you think it is necessary to publish to be promoted if you are in the Clinician-Educator Track of the Health Sciences Clinical series? And if so, how much?

The short answer is yes. The publications, however, can be in non-peer-reviewed journals or even online, and include chapters, reviews, clinical vignettes and case reports. Poster presentations are welcome as well. There is no set number of publications required, but at least eight or ten seems right for promotion to the associate professor rank. When the time comes to review your dossier the ideal number of required publications will vary from one reviewing agency to the next and even from one reviewer to the next. So, it is best to err on the high side!

According to Appendix 8 in THE CALL, UCLA’s user-friendly version of the UC Academic Personnel Manual, “in order to be promoted to the Associate Professor or Professor rank in the Health Sciences Clinical Professor series it is necessary that the individual’s record demonstrates creative contributions to administrative, academic, or scholarly activities.” The seventeen examples of creative activities then listed in Appendix 8 are reproduced in the “Junior Faculty Guide to a Successful Career: Keys to Advancement and Promotion at UCLA – Abridged for Faculty in the Health Sciences Clinical Series” (on the website of the DGSOM Office of Academic Affairs, under the tab Academic Forms and Resources), where it is noted, “Although they will add luster to any creative performance, peer-reviewed research publications do not

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necessarily have to be included among the creative activities pursued by faculty in the Health Sciences Clinical Series. Non-peer-reviewed publications, however, and other activities, such as some of those listed in Appendix 8 of THE CALL, are essential,” and include the development of innovative methods, tools, or programs to improve the care or safety of patients and the development of programs or curricula to improve the education of trainees.

It is crucial that your creative activities are substantial and well documented. For instance, a Power Point presentation or a schedule of patient care responsibilities in a clinic is not sufficient. But the development of a curriculum, a new course for medical students, or a new clinical rotation for residents or fellows could represent an important creative activity and should be well documented in your Self-Statement or in a supplement to your dossier.

7. What are the most common reasons why faculty do not receive promotion and what can I do if I disagree with the CAP decision?

In the regular Professor or In-Residence Professor series the most common reason for an unfavorable outcome is insufficient evidence of independent research (see Q1 and Q3 for how these are assessed). However, CAP also considers teaching and service (see Q1). Indeed, serious concerns about teaching (e.g., low evaluation scores, negative comments from trainees, such as complaints of discrimination or a lack of respect) can lead to denial of promotion. Since service is not a priority for Assistant Professors, limited service typically does not hold back promotion to Associate Professor but might hold back advancement at higher levels. When the CAP decision is negative CAP always invites the Department Chair and Dean to appeal the case. The appeal must come from the Chair and/or Dean, not from the candidate, and is most likely to be successful if it includes information that is new, pertinent, and substantial.

8. What is the single most important thing new faculty members should focus on in their first 2 years to stay on track for promotion?

Formal and informal discussions with a mentor is the most important action that new faculty can take. Appropriate topics include where and when to send grant applications, how to attract and screen collaborative trainees, appropriate teaching activities, and the kinds of service to consider performing. Your Department Chair should assign your mentor after you and the Chair have discussed your needs and possible candidates. If you do not “click” with your assigned mentor, ask around and find another. The DGSOM Junior Faculty Lecture Series is a good place to gather information and ask questions. Keeping a record of all your activities (your presentations, the manuscripts you review for journals, etc.) will make it easier to complete your dossier. Keep your CV current and complete. Check THE CALL for information about your series and check the CAP guidelines, which are updated periodically. The Academic Senate’s UCLA Council of Advisors is comprised of experienced faculty – full Professors with mentorship and promotion expertise, representing all areas of the campus, including the School of Medicine – who have volunteered to provide career advice to assistant professors in the regular Professor and Professor-in-Residence series and will match a mentee with a mentor from a department other than the mentee’s own.
<https://apo.ucla.edu/faculty-career-development/mentoring-resources-council-of-advisors>.

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Dossier Preparation

1. How can I get advice on writing a self-statement?

Ask your mentor for advice on your draft versions. Your mentor or a colleague can provide their own Personal Statement as an example. And you can seek advice from the Council of Advisors.