

Mentoring

Be a Mentor...Be the Difference



Mentoring and Promotions Handbook: A Guide for Faculty



**Department of
Obstetrics and Gynecology**
UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH



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July 2024



**Department of
Obstetrics and Gynecology**

UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH

Greetings,

Welcome to the Department of Obstetrics and Gynecology in the University of Wisconsin School of Medicine and Public Health.

Our mission at the University of Wisconsin, [Department of Obstetrics and Gynecology](#), is improving the reproductive health and wellbeing of people in Wisconsin and beyond through education, research, clinical care, and advocacy. We do so in an environment of collaboration, humility, integrity and respect.

The vision of the Ob-Gyn Faculty Mentoring and Promotions Program is to support the professional development, success and well-being of all faculty in the department. We hope you find this Mentoring and Promotions Handbook to be a valuable resource!

Sincerely,



Ellen Hartenbach, MD
Chair and Professor, Department of Obstetrics and Gynecology
The Ben Miller Peckham, MD, PhD, Endowed Professor



David M. Kushner, MD
Vice Chair of Faculty Development, Education and Wellness
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II. Introduction

The goal of this handbook is to provide guidelines, procedures and best mentoring practices to support the career growth and timely promotion of faculty in the Department of Obstetrics & Gynecology. Recommending these best practices for promotion oversight committees and mentoring honors the Department of Obstetrics & Gynecology's commitment to the success and well-being of our faculty. The handbook offers mentoring pearls and resources for faculty at all career stages.

We draw a distinction between the functions of oversight, mentorship and sponsorship of faculty:

- **Oversight** assures that the assistant professor is meeting expected milestones along their path to promotion to associate professor;
- **Mentorship** involves career guidance, feedback and support;
- **Sponsorship** involves advocacy by someone who can influence decision-making processes or structures. Sponsorship is a very important skill for senior faculty and leaders in academic medicine to acquire and develop. Importantly, mentors can provide sponsorship, but sponsorship can also be provided by individuals who do not have an ongoing mentoring relationship with the person whom they sponsor.

Faculty at all career stages benefit from strategies designed to maintain and increase their productivity and joy in their careers. One of the most important of those strategies is mentoring. Compared to those without mentors, faculty with mentors demonstrate higher levels of the following success factors:

- Teaching accomplishment evidenced by improved confidence and student ratings of teaching effectiveness;
- Research productivity;
- Professional socialization and interactions with colleagues;
- Salary levels and satisfaction with salary and promotion.

Effective mentoring is also key to the recruitment and retention of a diverse faculty. The Department of Obstetrics and Gynecology, and the University of Wisconsin School of Medicine and Public Health recognize the vital contributions of access to and support of senior faculty mentors, peer networking, professional skill development, and knowledge of institutional culture to career success. Excellent resources can be found on the SMPH Intranet Office of Faculty Affairs and Development's Central Resources page. See [Preparing for Promotion](#), [Mentoring and Mentorship](#), and [SMPH Promotions Oversight Committee Guide](#).

Promoting a culture that values mentoring reflects the Department of Obstetrics & Gynecology's commitment to [diversity, equity and inclusion](#). We value and promote an inclusive environment that respects, welcomes and embraces differences including, but not limited to race, gender, gender identity, ethnicity, language, sexual orientation, age, physical or mental ability, religion, income, and national origin. Through these efforts, we seek to make the department more welcoming and inclusive, increase diversity among faculty, staff, trainees and collaborators, incorporate antiracism principles throughout the department, and improve the patient experience and health outcomes for women from underrepresented groups.

III. Promotion Oversight and Guidance

While informal mentoring is an important component of academic life, formal mentoring and oversight structures such as the Promotion Oversight Committee (POC) for early-career faculty is key to supporting their academic, clinical and research goals and securing a successful path towards promotion. This section of the Mentoring and Promotions Handbook focuses on **best practices for Promotion Oversight Committees**. The Department of Obstetrics & Gynecology has a formal program for oversight and guidance for clinician health sciences (CHS) and tenure track faculty since these are probationary tracks and promotion is a requirement for ongoing employment. While POCs do provide some mentoring functions, most faculty benefit from mentorship that requires more frequent input and different expertise. This handbook provides guidance on mentoring that can benefit early and mid-career faculty on all tracks, including for Clinician-Teacher (CT) track faculty who are not required to have a POC, but may request individual mentoring, or establishment of a POC.

Each year for the first three years of their appointment, assistant professors on all tracks must confirm if they are on the appropriate faculty track. For CT track faculty, the Division Director (DD) is expected to evaluate and confirm if the assistant professor is on the appropriate faculty track. For CHS and tenure track faculty, members of their POC evaluate and confirm if the assistant professor is on the appropriate faculty track. If the assistant professor and the DD or POC determine that the track placement is inappropriate, the DD or POC should recommend and [facilitate a track change per the SMPH policy on track changes](#).

Departmental POCs for assistant professors on the CHS and tenure track meet with probationary faculty to monitor progress toward promotion. Within the first year of their appointment, each assistant professor on the CHS and tenure track will be assigned a Promotion Oversight Committee (POC). This committee will meet with the assistant professor at least annually, but preferably twice a year with suggested meeting times in the spring and fall. The function of the committee is to ensure that the assistant professor is meeting expected milestones along their path to promotion to associate professor. A summary of progress to promotion is included in materials provided to the DD and/or chair to be considered in the annual review process. For faculty on the tenure track, the POC chair will provide an annual summative statement to the department chair and executive committee regarding the assistant professor's progress relative to time in position and readiness to submit the dossier for promotion. Prior to submitting the dossier for promotion for faculty on all tracks – CT, CHS and tenure - the department chair and executive committee review materials and vote on approval to submit the dossier for promotion.

While the primary function of the POC is to review the progress of the assistant professor in order to ensure progression along an expected academic trajectory and ensure the assistant professor is on track to achieve promotion, a secondary function of the POC is to provide general career guidance with the aim of furthering the assistant professor's scholarly pursuits. The chair of the POC will ensure that the assistant professor has adequate and appropriate academic career mentorship. The assistant professor may discuss questions and seek advice from the committee on specific clinical or academic challenges. The POC may also provide advocacy on behalf of the assistant professor. If the POC believes that the assistant professor has areas in need of improvement, the POC will discuss this with the assistant professor and provide recommendations.

The Ob-Gyn Department has established the following guidelines to optimize the scheduling, preparation, note taking and follow up to Promotion Oversight Committee meetings.

A. Ob-Gyn Promotion Oversight Committee Meeting Procedures

1

- **POC meetings are scheduled** by the mentee's medical program assistant (MPA)
- **Schedule POC meetings approximately every 6 months (annually at a minimum)**
- **When POC meeting is scheduled**, mentee's MPA schedules meeting with Promotion Coordinator approx. 10 days ahead of POC to review process and discuss documents to update; MPA works with their faculty to prepare summary of current activities
- **Approximately 1 week in advance** of the POC meeting, the **mentee** provides CV POC notes updates and other relevant materials. These are added to their mentoring and promotions folder (in UW Box)

2

- **The early career faculty and all POC members have access** to the contents in the mentee's mentoring and promotions BOX folder. The folder will be updated after each POC with meeting notes
- **The MPA will send out an email reminder** approx. 1 week in advance of the POC meeting with the meeting materials (updated CV and POC notes providing summary of current accomplishments, goals, resources and barriers, and notes from previous POC meeting). MPA shares these materials with mentors in advance of the meeting (options: email, attach to calendar event and/or share access link to BOX)

3

- The **meeting note taker (MPA or other) distributes a draft of the POC summary report** as soon as possible after each meeting to the POC chair, mentee and promotions coordinator for their feedback and approval. Feedback is requested within one week, otherwise notes are considered approved and final
- The finalized POC meeting minutes are uploaded to the assistant professor's mentoring and promotions folder (in UW Box)
- POC chair, mentors and mentee follow up on any identified action items
- A brief summary of notes from the most recent POC meeting is provided with materials to Division Director/Department Chair in January as part of Faculty Annual Performance Review

IV. Best Practices for Promotion Oversight Committee (POC) Meetings

Selection Process

The first step to establishing an effective POC is the selection of the committee members and chair. The members will be faculty with proven investment in supporting scholarly endeavors. The overall goal for the POC is to engage in ongoing efforts to promote success in research, educational excellence and academic stewardship with an eye towards academic advancement/promotion.

Steps to establishing a POC for assistant professors begin within first 6 months year after arrival in the department:

- New faculty member completes Ob-Gyn Individual Development Plan (IDP) within first 6 months;
- The IDP is uploaded to the faculty member's folder within the Ob-Gyn Mentoring and Promotions folder on UW Box and shared with the Division Director (DD) and VC of Faculty Development, Education and Wellness to support selection of appropriate mentors;
- DD identifies a mentor from Ob-Gyn to serve as chair of the POC. The DD and new POC chair identify 2-3 additional mentors –
 - The POC mentor chair seeks input from the assistant professor about potential committee members and reaches out to invite mentors to join the junior faculty member's POC
- DD typically does not serve on the POC because of the potential conflict of interest. However, assistant professors should meet at least annually with their DD to review the assessments and recommendations from the POC.

Composition of the Committee

- The committee should consist of three to four mentors including the POC chair.
- *Suggested membership* includes one member of the same faculty division and at least one faculty member outside of the department with expertise and experience relevant to mentee's career goals;
- Each POC has a designated chair (Ob-Gyn faculty) with at least the rank of associate professor

The following criteria may be considered when selecting members:

- Interest in contributing to the mentoring process;
- Availability (time and schedule) for planned meetings;
- Familiarity with relevant promotional guidelines and processes;
- Skill set of mentor (e.g., expertise pertinent to needs of the assistant professor);
- Relevant research, clinical, and teaching interests;
- Personal characteristics (e.g., personality, approach, life experiences);
- Promotional track (CHS, tenure, CT track, or a mixture);
- Assistant professors may serve as a member of POC if they are near promotion (years 4-5) but should not take on the role of chair until promoted.

First Meetings: Introductions to Mentoring & Promotion Resources (within 2-3 months of arrival)

Whether new faculty are former UW trainees or clinical instructors or are new to UW–Madison, a series of meetings within the first year of arrival will serve to introduce faculty to the expectations

of the new position and facilitate the ability of the POC to help achieve promotion and career goals.

Introduction to Department Mentoring and Promotion resources by Promotions

Coordinator

- Introduce Ob-Gyn Mentoring and Promotions Handbook;
- Share mentoring and promotion resources for faculty
 - SMPH Office of Faculty Affairs and Development (OFAD) professional development resources as well as the most up to date promotions guidelines
<https://intranet.med.wisc.edu/faculty-affairs-and-development/>
- Review current track promotion guidelines with mentee
 - SMPH Faculty Mentoring Guide and OFAD mentoring resources
<https://intranet.med.wisc.edu/faculty-affairs-and-development/faculty-central-resources/>
- Introduce Mentoring and Promotions folder on UW Box, Ob-Gyn IDP template, UWSMPH CV template, track specific promotional guidelines
- Request new faculty member complete IDP and update CV in Faculty Success within 3 months

Introduction to Faculty Mentoring Program by Vice Chair of Faculty Development, Education and Wellness

- Share advice about selecting mentors and promotion oversight committee processes;
- Provide overview of differences between academic tracks and expectations by track;
- Review best practices for mentees.

First Promotion Oversight Committee Meeting: Establishing Goals and Expectations (within 3-6 months of arrival)

- The POC chair will organize the first meeting (date, time, location). Subsequent meetings are scheduled by mentee with support from their administrative staff;
- The **POC chair** meets 1:1 with the **assistant professor** in advance of the initial promotion oversight committee meeting to review the mentee's duties and expectations as defined in their appointment letter, and to review and provide feedback on their IDP
 - At subsequent POC meetings, the committee chair facilitates the discussion during which committee members review faculty progress and provide career advice.

For Discussion with POC chair and committee at first meeting:

- Review letter of appointment with percent distribution of effort, date of appointment and clock end date;
- Discuss CHS/tenure academic clock and track specific clock extension requests (e.g., for responsibilities related to childbirth, adoption, elder care, or medical leave);
- Review the general timeline for promotion and discuss the relevant UWSMPH promotional guidelines. Define terms such as *academic clinical practice*, *areas of excellence* and *significant achievement*, and *arms-length evaluators*;
- Discuss different areas of academic focus
 - CHS: Clinical/Public Health, Teaching, Research, *Institutional Leadership* (rarely

appropriate as area for promotion to Associate Professor (CHS))

- Tenure: Research, Education, Service, *Outreach (most commonly used for UW Extension appointments)*;
- Review IDP, identifying current allocation of time, responsibilities, goals, expectations and resources, and potential collaborators;
- Begin to probe areas of interest and help the early-career faculty member think about how their areas of interest might fit into the various areas of focus;
- Review the Ob-Gyn Mentoring and Promotions Handbook.

POC Meetings: Scheduled at approximately 6 month intervals

- ***In advance of each POC meeting the assistant professor updates the POC notes template*** on recent accomplishments, short term goals, needed resources and potential barriers. They also update their CV in the SMPH format with data entered in their Faculty Success account. Their administrative assistant will share documents with committee members in advance of the meeting (See POC Meeting Procedures);
- **POC chair** facilitates the discussion during which committee members review faculty progress and provide career advice;
- **Over first 3 years, POC** confirm that assistant professor is on the correct faculty track. If track transfer is considered, assistant professor works with DD or POC as early as possible to take action as needed (ideally within first 2 years of appointment);
- **POC chair** either prepares the POC minutes personally or reviews and edits POC meeting minutes prepared by a designated administrative note taker. In either case, the POC chair is responsible for ensuring that POC meeting minutes are finalized. These are sent via email to the faculty member and the department promotions coordinator and uploaded to the early career member's mentoring and promotions folder in Box;
- **POC chair** and **assistant professor** meet 1:1 as needed during period to promotion. Also consider options for continuing mentoring after promotion
 - Discuss mentoring (its importance, forms of mentoring as options)
 - If mentorship does not come from members of the POC, the chair of the POC will help the assistant professor identify a mentor either through direct recommendations or facilitating a conversation between the assistant professor and the division director;
- Provide sample promotional documents by year 3 or 4 (or earlier)

Maintaining an Effective Promotion Oversight Committee

- As part of the Faculty Annual Performance Review process, DD and junior faculty member discuss whether the POC meets their career development needs giving faculty an opportunity to discuss whether mentoring needs are being met, and to make changes to the POC as needed. If there are mentee concerns, they may seek guidance from the Department Chair.
- The assistant professor may request changes in the composition of the POC in collaboration with and approval of the DD and/or department chair.
- Members of the committee will participate throughout the probationary period but may be excused by the POC or department chair and/or POC chair if they are unable to attend meetings consistently, are ineffective, or are unable to participate for other reasons.

V. Informal Overview of Expectations toward Promotion by Academic Track

Track	CT track	CHS track	Tenure track
Required years for promotion	Minimum 5 years in clinical practice (practically, at least 2 with UW appointment); To Clinical Professor, minimum 10 years in clinical practice and exceptional performance since promotion to Clinical Associate Prof	Minimum 5 years at UW (for track transfer, or appointment to UW with previous faculty experience, may receive years of experience); No required time for advancement to Professor (CHS)	Minimum 5 years (may receive years of experience if transferring from Assistant Professor appointment elsewhere). Goal is to document independence by 6 th year of appointment; Consider (but not required) to submit packet for promotion to Professor no later than 1st post-tenure review (at 5 years)
Example of timeline for submission of promotion packet for tracks with clock deadline (see SMPH Track Guidelines for details)	Not applicable	Probation period: Generally, Ob-Gyn faculty submit promotion packet in fall of 5 th clock year, for promotion beginning start of 6 th clock year Example: Appointment start date 9/1/2024; can submit packet in fall 2029 for promotion July 2030 to Assoc Prof (CHS); if no clock extensions, MUST submit by fall 2031 for review no later than June 2032. If not approved, appointment ends June 2033 (9 year clock)	Probation period: <i>Packet MUST be reviewed by one year before clock end date.</i> Example: Appointment start date 9/1/2023 with clock end date 6/30/2029; can submit packet in fall 2027 for promotion July 2028 (start of 5 th year) to Assoc Prof with tenure; if no clock extensions, MUST submit by fall 2028 for review no later than 6/30/2029. If not approved, appointment ends 6/30/2030 (7 year clock)
Requesting clock extension(s)	Not applicable	See CHS guidelines for requesting: Clock extensions never go against candidate – more like insurance when life has other plans	See Tenure track guidelines for requesting: Clock extensions never go against candidate – more like insurance when life has other plans
Area of Excellence	Clinical service	Clinical, Research or Teaching (Institutional Leadership rarely used for promotion to Associate level)	Research or Teaching
Area of Significant Accomplishment	Not required but packet is strengthened with evidence of teaching and/or service or collaboration on clinical trials or other research	Clinical, Research or Teaching (Institutional Leadership is rarely used for promotion to Associate)	Research, Teaching or Service (Outreach is primarily for UW Extension)
Integrated Packet	Not an option	Appropriate if full integration of clinical, research, teaching and service	Appropriate if full integration of research, teaching and service (for tenure, clinical is considered as service)
Early & ongoing activities from onboarding to promotion	See Suggested Activities in Ob-Gyn Mentoring & Promotions Handbook, section “Clinical Teacher Track Faculty”	See Suggested Activities in Ob-Gyn Mentoring & Promotions Handbook, section “Clinical Health Sciences Track Faculty”	See Suggested Activities in Ob-Gyn Mentoring & Promotions Handbook, section “Tenure Track Faculty”

Track	CT track	CHS track	Tenure track
Scholarly activity expectations	Evidence of sustained and positive clinical service - support with evidence of service, teaching and possibly collaboration in clinical or other research projects	Consistent and progressive contributions over period of review: Work toward at least 10 highlights, combination of peer-reviewed publications, invited regional, state or national presentations (more national for promotion to Professor level), research presentations at national meetings, institutional and national service	Consistent contributions over period of review demonstrating independent research leadership with increasing role as first or senior author, recognized expert (invited presentations with increasing national audience), significant national funding particularly as PI, MPI, or co-PI, research presentations at national meetings, institutional and national service, formal teaching
Develop networks (identify potential letter writers)	Letter writers for promotion: Colleagues, and referred/referring to providers	Arm's length letter writers for promotion: Professional contacts through regional, state or national associations who can speak to your accomplishments; Can be people known through committee work, but are not work colleagues, and have no collaborative research	
What to document	Teaching evaluations, patient feedback, mentees and work done with them, clinic and OR supervision (hours spent, number of trainees), training activities including workshops attended, QI projects.	Teaching evaluations, patient feedback, mentees and work done with them - note mentee roles in publications and presentations, clinic and OR supervision (hours spent, number of trainees), training activities including workshops attended, QI projects. Faculty Success is a good place to document activities including those that don't go on CV	Teaching evaluations, patient feedback (if applicable), mentees and work done with them - note mentee roles in publications and presentations; Mentee/trainee supervision (hours spent, number of trainees), training activities including workshops attended, QI projects. Faculty Success is a good place to document activities including those that don't go on CV
Where to document	Faculty Success can be a good place to document activities including those that don't go on CV; Use your faculty Ob-Gyn mentoring and promotions BOX to store documents – can provide access to mentors, administrative assistant and others for easy shared access		
Department "Citizen" activities	Attend department meetings (Grand Rounds, research days, workshops, etc); complete surveys after presentations Participate in department committees and other activities (eg. as an assigned Peer Partner)		
Sage advice for junior faculty working toward promotion	Select committees and activities carefully that augment academic work; Learn how to gracefully decline requests for academic activities outside the area of academic focus (and don't be afraid to ask mentors to advocate for you); Learn the art of self-promotion - ensure that colleagues, supervisors and others know type and relevance of academic work; Review sample promotion dossiers (for Ob-Gyn, work with department Promotions Coordinator; for examples from other departments, see sample dossiers on SMPH intranet); Keep notes as you progress to help write draft of the personal statement to tell the story of the impact of your work		

Promotion Packet, by Track

Promotion Packet	CT track	CHS track	Tenure track
Promotion packet includes	CV in SMPH format, personal statement, chair letter, appointment letter and duties, trainee and patient feedback, possibly a publication, other items that highlight unique contributions	CV in SMPH format, personal statement, chair letter, POC chair summary letter (for promotion to Associate), appointment letter and duties, trainee and patient feedback, 5 select publications, other items that highlight unique contributions	CV in BioSci format (SMPH CV mirrors this) or other college (if appropriate); POC chair summary letter, chair letter, appointment letter, peer reviews of teaching, 5 select publications AND all publications through review period; other items that highlight contributions in research, teaching and service
Personal Statement	maximum 2 pages	maximum 4 pages	2 pages for each statement - research, teaching, service, and 1 page integrated statement if appropriate
Letters (reviewers selected by and letters requested from Chair's office)	min 2 letters from referring or referred to physicians in or outside specialty area; min 1 letter from colleague; maximum total 6 letters	min 2 arm's length letters of evaluation, total 3-6 letters	min 5, max 8 arm's length letters of evaluation; internal letters included only to clarify candidate's independence or role in collaborative research
letter writer qualifications	at least similar rank or experience of candidate	Associate level minimum for promotion to Associate; Professor level for promotion to Professor;	Tenured Associate level minimum for promotion to Associate; Professor level for promotion to Professor

VI. Clinical Health Sciences Track Faculty

Faculty on the CHS track are engaged in clinical or public health duties that comprise at least 50% of the faculty member's effort while the remainder of the work is related to teaching, research and/or administrative duties. A scholarly approach and external reputation for clinical and academic duties in the domains of clinical/public health activity, teaching, research and/or institutional leadership is required for promotion. The UW School of Medicine and Public Health guidelines and requirements for promotion on CHS faculty track are available on the [SMPH Intranet](#). POC mentors will provide faculty with an objective assessment of performance relative to the CHS guidelines and counsel faculty on early career development to assist the faculty in achieving academic and clinical goals.

Submission of promotion dossier in the first semester of the fifth clock year provides consideration for promotion to Associate Professor (CHS) to begin in the sixth clock year. A decision on promotion must be made before the end of the ninth clock year, with submission of promotion packet by the fall of the seventh clock year. [See guidelines for information on CHS track clock extensions](#). Potential areas of excellence include clinical/public health, teaching, research, or institutional leadership (rarely used for promotion to Associate level) with significant accomplishment in a second of these areas. CHS track faculty may also submit as an integrated packet if their accomplishments in three areas are so closely related that it is not possible to unambiguously document and assign accomplishments to specific areas. The CHS suggestions and timelines for activities to highlight accomplishments are suggested best practices and may vary based on the needs of individual faculty.

While not listed in the SMPH guidelines, CHS faculty experienced in promotion reviews recommend working toward at least ten significant accomplishments over the review period to include as part of promotion packet. These could be a combination of things such as research presentations at national meetings, peer-reviewed publications, activities that impact clinical care such as development and implementation of QI projects, serving as PI on funded research, development of teaching curriculum, service at UW Health/SMPH level and with national professional societies, and invited presentations. Strive for a consistent and progressive record of accomplishments throughout the academic appointment.

Consideration for promotion to Professor (CHS) follows the same guidelines, with increasing emphasis on demonstration of expertise and national reputation. There is no required time for advancement to Professor.

CHS: Suggestions for activities to highlight accomplishments

Onboarding and Year 1

1. Meet with assigned Peer Partner (provides guidance on day-to-day work)
2. Meet with Ob-Gyn Promotions Coordinator (introduction to department and SMPH resources to support career development and promotion)
3. Meet with Ob-Gyn VC of Faculty Development, Education and Wellness
4. Establish clinical practice;
5. Create an Individual Development Plan (IDP);
6. Establish Promotion Oversight Committee (POC) - mentors identified with input from mentee, IDP and department leadership (Division Director, VC, others). Meet at least once with POC;
7. Develop areas of academic focus based on interest from prior training in residency, fellowship and/or graduate school;
8. Sign up for teaching activities such as simulation labs, medical student, resident, and/or fellow lecture(s)

Annually, Beginning Year 1

1. Update scholarly activities in Faculty Success at least semi-annually (better if quarterly);
 - a. Structure CV in the required [SMPH format](#) (see [Office of Faculty Affairs and Development website](#)) – can generate draft report from Faculty Success data;
 - b. Identify mentees on publications and presentations; add combination of mentees' and your percent effort for each of: concept development and design, data acquisition, analysis, writing; write 1-2 sentence summary of combined contributions for every publication during period of review (start of appointment to promotion to Associate rank);
2. Develop an organized system (electronic, paper or combined) to track and document academic activities;
3. Document teaching activities and keep evaluations including for lectures, clinic and OR supervision, mentoring and CME events;
4. At least semi-annually block time on the calendar for a calendar review and documentation of activities;
5. Meet with POC at least once and preferably twice a year, more often with mentor chair as appropriate;
 - a. Update POC notes template in advance of each POC meeting. POC notes template includes IDP information – update long-term goals and allocation of time as needed;
 - b. Review/discuss goals with POC committee at each meeting (and division director/chair at annual performance review meeting);

- c. Tentatively identify the two areas of scholarship (clinical, education, research, leadership); discuss with POC mentors whether an integrated approach is appropriate;
- 6. Complete annual Ob-Gyn Faculty Annual Performance review
- 7. Ensure correct SMPH faculty track placement annually for first 3 years (track transfer to tenure or to CT can only be considered in the first three years of CHS appointment)

Beginning Year 2: Suggested activities to achieve goals and support progress to promotion

1. Sign up for at least one departmental committee (education, clinical operations, research, faculty development, DEI, wellness, others)
2. Apply for a departmental Professional Development Grant to obtain a new skill;
3. Continue to develop current projects—consider applying for a department R&D grant;
4. Present at departmental, local, and regional forums;
5. Volunteer to give a talk at the Wisconsin ACOG section meeting;
6. Author at least one manuscript or abstract annually (consider QI projects, curriculum development, research and other activities – where and how might these be published/presented);
7. Progressively increase first and senior authorship role for manuscripts and abstracts;
8. Submit an abstract to ACOG or specialty society annual meeting;
9. Join the speaker’s bureau in SMPH Office of Interprofessional Professional Development (ICPD), reach out to the Interprofessional Continuing Education Partnership (ICEP) or work with the UW Health physician liaison office to give regional and/or develop multidisciplinary CME talks in your area of interest;
10. Offer to give Grand Rounds at peer institutions (division director and POC chair can help with introductions)
11. Work on a departmental women’s health podcast;
12. Volunteer to provide peer review for one or two journals in clinical or academic specialty area;
13. Provide mentorship for a resident or fellow on their research project;
14. Share your unique work, and develop relationships with people at other institutions through ACOG, specialty organizations or other groups—these may be people who can write arm’s length letters for promotion;
15. Attend SMPH Pathways to Promotion 101 (Year 2 or Year 3);
16. Write an early draft of the personal statement to tell the story of impact; share PS with members of POC, division director and/or others who can help review

Years 4-5: Preparing for Promotion

1. Attend SMPH Pathways to Promotion 102 (guidance on identifying impact and preparing personal statement);

2. Finalize the two areas of scholarship, or confirm that all areas are so fully integrated that integration pathway is best option. If choosing 2 areas of scholarship, select: 1) area of excellence and 2) area of significant accomplishment (clinical, education, research, leadership). Institutional leadership is rarely applied for promotion to Associate level;
3. Identify the impact of your work in each area in the medical community;
4. Finalize personal statements and CV in required SMPH format;
5. Identify additional documents to highlight accomplishments in areas of excellence and significant accomplishment;
6. Identify 5 most significant publications during period of review;
7. Provide list of suggested evaluators (including 2 arm's length evaluators, individuals from outside the UW School of Medicine and Public Health that have no vested interest in the candidate's success or attainment of promotion) to promotion coordinator (PC). PC shares with department leadership. Department Chair adds names and selects final list and letters requesting evaluation are sent from and returned to Chair's office.

VII. Tenure Track Faculty

Tenure Track faculty in the Department of Obstetrics & Gynecology generally have less than 50% clinical responsibilities or are non-clinical faculty engaged full time in research, teaching, and/or service. The UW guidelines and requirements for promotion on tenure faculty track are available on the [SMPH Intranet](#). The POC will provide faculty with an objective assessment of performance relative to the tenure guidelines and counsel faculty on early career development. This will assist the faculty in obtaining their academic, clinical and research goals.

Consideration for promotion to Assistant Professor with tenure can be made from after completion of five years - with submission of the promotion packet in the first semester of the sixth year - up to one year before the clock deadline date. See the [typical tenure process timeline, provided by the UW-Madison Office of the Secretary of the Faculty](#). Potential areas of focus include excellence in research, teaching, service or outreach (generally only used for UW Extension), or integrated if accomplishments in three areas are so closely related that it is not possible to unambiguously document and assign accomplishments to specific areas.

Below is a list of suggested activities to highlight accomplishments beginning at onboarding through to submission of packet for promotion to Associate Professor with tenure. More detailed information for *research onboarding* can be found in the Ob-Gyn research handbook. The Mentor and Promotions Handbook and Research Handbook are intended as complementary guides that, in combination with faculty mentoring, support career success. The Tenure track suggestions and timelines are suggested best practices and may vary based on the needs of individual faculty. The UW School of Medicine and Public Health guidelines and requirements for promotion according to faculty track are available on the [SMPH Intranet](#).

Work toward progressive research independence and expertise demonstrated by regular record of publications as first or senior author in peer-reviewed publications, successful funding from federal granting agencies, invited regional and increasingly national presentations, national research presentations and participation in professional society activities. While developing professional networks, think of people who know your work and could be considered to write arm's length letter of evaluation to submit with promotion packet. Arm's length reviewer has no shared research or publications but may have worked together on professional society work or committees. Prioritize activities in two primary areas of scholarship (research, education, service).

Promotion to *Professor* should be considered no later than the first post-tenure review (performed in the 5th year). If promotion is not sought or granted at that time, associate professor and department chair may mutually agree upon a timeline for reconsideration, not to exceed five years between reviews. An associate professor may request to be considered for promotion any time after their initial fifth-year post-tenure review. Review of consideration for promotion to Professor is through the SMPH Tenure Promotions Committee.

Tenure: Suggestions for activities to highlight accomplishments

Onboarding and Year 1

1. Meet at least monthly with the primary research mentor;
2. Decide the initial research focus and investigate paths to funding;
3. Form the research environment and team as per startup package/plans;
4. Create an Individual Development Plan (IDP) based on discussions with primary research mentor, Division Director and other department leadership (eg.VC of Faculty Development, Education and Wellness);
5. Establish Promotion Oversight Committee - mentors identified with input from mentee, IDP and department leadership. Meet at least once with POC:
Meet with the POC chair and then the full committee to discuss plans and the way grant funding can be pursued in an efficient manner - recommend at least two lines of funding application simultaneously in early years;
6. Begin to prepare grant applications—apply for a department R&D grant if eligible;

Annually, beginning Year 1

1. Update scholarly activities in Faculty Success at least quarterly;
 - a. Structure CV in the required SMPH format (see [Office of Faculty Affairs and Development website](#)) – can generate draft report from Faculty Success data;
 - b. Identify mentees on publications and presentations; add combination of mentees' and your percent effort for each of: concept development and design, data acquisition, analysis, writing; write 1-2 sentence summary of combined contributions for every publication during period of review (start of appointment to promotion to Associate rank);
2. Block time on the calendar for a calendar review and documentation of activities;
3. Develop an organized system to track and document academic activities;
4. Document teaching activities and keep evaluations including for lectures, clinic and OR supervision, mentoring and CME events;
5. Explore training programs on campus that match interests, and apply to join;
6. Prepare grant applications;
7. Continue regular meetings with primary research mentor;
8. Provide mentorship to trainees (resident, graduate student or post-doctoral trainee/fellows) undertaking those research projects; work with trainees to mutual benefit with progressive increase in own authorship as 1st or senior author:
 - a. Note that one or two letters from former mentees can be added to the promotion dossier to provide additional context supporting successful career and research mentoring;

9. Meet with POC at least once and preferably twice a year, more often with mentor chair as appropriate;
 - a. Update POC notes template in advance of each POC meeting. POC notes template includes IDP information – update long-term goals and allocation of time as needed;
 - b. Review/discuss goals with POC committee at each meeting (and division director/chair at annual performance review meeting);
 - c. Tentatively identify the two areas of scholarship (clinical, education, research, leadership); discuss with POC mentors whether an integrated approach is appropriate;
10. Complete annual Ob-Gyn Faculty Annual Performance review
11. Ensure correct SMPH faculty track placement annually for first 3 years (track transfer to tenure or to CT can only be considered in the first three years of CHS appointment)

Beginning Year 2: Suggested activities to achieve goals and support progress to promotion

1. Sign up for at least one departmental committee (education, clinical operations, research, faculty development, DEI, wellness, others);
2. Seek opportunities to present locally, regionally and/or nationally;
3. Attend annual professional society meetings and where possible submit an abstract to the specialty society annual meeting;
4. Consider applying for a departmental Faculty Development Grant to obtain a new skill to support academic work;
5. Consider opportunities to take on graduate teaching/undergrad teaching/training activities in formal courses
 - a. Also consider guest lectures for formal graduate, undergraduate or medical school
6. Between years 2 and 5 seek out peer reviews of teaching (all promotion to Associate with tenure packets require at least 2 reviews preferably sequential by same reviewer and course over time) ;
7. Review upcoming grant submissions and update long-term goals as needed based on grant review meeting outcome(s);
8. Plan next research studies and how peer review papers will stem from UW research program with majority as first or last author;
9. Volunteer to provide peer review for one or two journals in your specialty area;
10. Select committees, professional/development activities and professional society meeting activities carefully to augment academic work and reputation;
11. Attend Pathways to Promotion - Tenure (between Years 2 and 4) (guidance on building a tenure portfolio and preparing for tenure);
12. Plan ahead for potential letter writers: Develop relationships with faculty at other institutions, in specialty organizations or others who can write arm's length letters for the tenure dossier (be aware of the conflicts of interest if they become collaborators)

Years 4-5: Preparing for Promotion

1. Finalize two areas of scholarship: 1) the basis of promotion with one area of excellence and 2) one area of significant accomplishment (research, educations, service or outreach) OR clearly identify integration of your scholarship across areas;
2. By Year 4 - If going up for Excellence in Education, set up outside review of teaching; ad hoc committee report to be included in tenure document;
3. Make sure work can be identified as clearly independent; when working in team science collaborations, clearly identify the role for each project, and how work could not be completed without this unique input;
4. Identify the impact of area of excellence and significant accomplishment of your work;
5. Finalize personal statements and CV in format required by the divisional committee (biological sciences, social sciences) through which you will submit your promotion packet;
6. Identify additional documents to highlight accomplishments in 3 areas;
7. Identify the 5 most significant publications during period of review;
8. Provide list of potential evaluators (including 5 arm's length evaluators) and share with department promotion coordinator; PC shares with department leadership. Department Chair adds names and selects final list and letters requesting evaluation are sent from and returned to Chair's office.

VIII. Clinical Teacher Track Faculty

Clinician Teacher (CT) track faculty spend the majority of their time providing clinical care. The incentives to prepare for promotion and the professional development needs differ for CT faculty since these academic appointments do not have a clock deadline. Career advancement needs may be met by forms of mentoring beyond the formal structure of Promotion Oversight Committees (POC) such as effective bi-directional mentoring that occurs between colleagues. CT track faculty do not have a POC but may request mentoring and/or establishment of a POC.

CT: Suggestions for activities to highlight accomplishments

Onboarding and Year 1

1. Meet with assigned Peer Partner (provides guidance on day-to-day work);
2. Meet with Ob-Gyn Promotions Coordinator (introduction to department and SMPH resources to support career development and promotion);
3. Meet Ob-Gyn VC of Faculty Development, Education and Wellness
4. Establish clinical practice;
5. Create an Individual Development Plan (IDP) based on personal goals and in discussion with Division Director (DD);
6. Develop an organized system to track and document all academic activities:
Document activities that contribute to promotion readiness, including Clinical/Public Health, Education, Research, and Leadership (CT faculty always go up for promotion based on Excellence in clinical practice – other accomplishments enhance packet);

Annually, Beginning Year 1

1. Update scholarly activities in Faculty Success at least semi-annually;
 - a. Structure CV in the required [SMPH format](#) (see [Office of Faculty Affairs and Development website](#)) – can generate draft report from Faculty Success data;
 - b. Identify mentees on publications and presentations; add combination of mentees' and your percent effort for each of: concept development and design, data acquisition, analysis, writing; write 1-2 sentence summary of combined contributions for every publication during period of review (start of appointment to promotion to Associate rank);
2. Develop an organized system (electronic, paper or combined) to track and document academic activities - CT faculty always go up for promotion based on Excellence in Clinical Practice; accomplishments in other areas (public health, teaching research, leadership) enhance the packet;
3. At least annually block time on the calendar for a calendar review and documentation of activities;

4. Sign up for teaching activities such as simulation labs, medical student, resident, and/or fellow lecture(s)
5. Document teaching activities and keep evaluations including for lectures, clinic and OR supervision, mentoring and CME events;
6. Complete annual Ob-Gyn Faculty Annual Performance review
7. Ensure correct SMPH faculty track placement annually for first 3 years (track transfer to CHS or to tenure can only be considered in the first three years of CT appointment)

Beginning Year 2: Suggested activities to achieve goals and support progress to promotion

1. Sign up for at least one departmental committee (education, clinical operations, research, faculty development, DEI, wellness, others); select to augment academic interests;
2. Apply for a department Professional Development Grant to obtain a new skill;
3. Consider participation in QI projects and/or clinical research projects;
4. Share your unique work with colleagues;
5. Present at departmental, local or regional forums;
6. Work on a departmental women's health podcast;
7. Volunteer to give a talk at the Wisconsin ACOG section meeting;
8. Offer to give Grand Rounds for Ob-Gyn and/or at peer institutions;
9. Develop relationships with referring/referred to physicians – these may be people who can write letters for promotion;
10. Consider involvement in regional/state professional society work;
11. Attend SMPH Pathways to Promotion 101 (Year 2 or Year 3)

Years 4-5: Preparing for promotion

1. Promotion requires completion of five years in clinical practice (consider at least 2 years at UW SMPH before applying for promotion regardless of years in practice elsewhere);
2. Attend SMPH Pathways to Promotion 102 (particularly if didn't attend P2P 101 for guidance on identifying impact and preparing personal statement);
3. Finalize personal statements and CV in SMPH format;
4. Identify additional documents to highlight accomplishments (example – flyer for a clinic established by you);
5. Provide list of suggested letter writers for promotion packet: 1-2 colleagues in specialty and 2-3 referring or referred to physicians (must be at least Associate level, or with same or more years in clinical practice); share list with department promotion coordinator. PC shares with department leadership. Department Chair adds names and selects final list and letters requesting evaluation are sent from and returned to Chair's office.

IX. Faculty Mentoring: Best Practices and Mentoring Resources

The early-career faculty will usually have other mentoring relationships external to the Promotion Oversight Committee (POC) that meet a specific need (e.g. research, education or leadership) not provided by the promotion oversight committee. **Individual mentors can provide the mentee with the following types of guidance:**

- Suggestions for *research collaborations* and introductions when appropriate.
- Suggestions for *journals* in which to publish studies.
- Speaking or *teaching* opportunities: which to seek and accept and which to avoid.
- Professional *service* opportunities.
- Participation in state, regional, or national *professional organizations*.
- Advice about *grantsmanship*.
- Protection from excessive demands for service on committees, task forces, etc.
- *Advocacy* on behalf of the mentee within the department when appropriate.
- Emotional support and honest, *constructive feedback* when appropriate.

Mentee and Mentor Roles and Responsibilities

Once the POC is established, the next step toward establishing an effective POC is **communicating and aligning expectations for all committee members** (mentors and mentee). A clear understanding of respective roles and expectations, especially for faculty who may be new to serving on a POC, will promote effective communication. Equally important is that the assistant professor (mentee) understands the responsibilities and is prepared to communicate regularly with the committee and the division director. The mentee and mentor roles and responsibilities are outlined below.

Each faculty with a POC will have a folder within the “Ob-Gyn Mentoring” Folder (on Box), with editor privileges. See the Promotion Oversight Committee Meeting Procedures for further details on scheduling and preparing for promotion oversight committee meetings.



Tools such as a [Mentoring Plan Worksheet](#) may be helpful for discerning the roles of multiple mentors.

Assistant Professor (Mentee): Expectations and Best Practices

- Work with division director to form promotion oversight committee. Prepare [Individual Development Plan](#) (IDP) to support selection of appropriate mentors;
- Work with administrative assistant to *schedule POC meetings at an interval of approximately every 6 months until promotion packet is submitted*;
- Prepare and distribute materials for review and discussion well in advance of each POC meeting. Minimally, materials should include updated curriculum vitae formatted to align with [UWSMPH CV](#), notes on current accomplishments and goal on POC Notes form, and POC Notes from the last meeting;
- Keep records of achievement (annual performance reviews, teaching evaluations, letters or emails of thank you, accolades received, etc.). These materials can be stored in the mentoring and promotions folder for reference when writing promotion statement;

- Monitor the promotion timeline: date of appointment, date to begin assembling the promotional document, and the dates the document is due to official mentors or ad hoc mentors, the departmental executive committee, and the promotional committee;
- Prepare promotion documents at the appropriate time under the guidance of the promotion oversight committee chair and division director. The Department Promotions Coordinator provides administrative support.
 - *Recommended* that the assistant professor on **CHS track** and **tenure track** define their area of excellence and significant accomplishment (or integration of activities) by the end of year 2 and prepare a draft of their personal statement to review with their POC
 - *Strongly recommended* that assistant professor on **tenure track** prepare a draft promotional document and provide to POC members before the end of year 3. Continue building this document with final preparation in late phase of the probationary period.

Mentors: Expectations and Best Practices

- Mentors must be familiar with and understand current UWSMPH [promotional guidelines](#);
- POC members should be available for meetings when given ample time in advance for scheduling. If unable to attend a meeting, the member should make an effort to meet with the assistant professor in person at a time close to the scheduled meeting;
- All members, even those not able to attend the meeting, should review the summary report of the meeting to ensure that the assistant professor is receiving consistent advice from various members of the POC;
- Focus on mentee's priorities;
- Provide constructive feedback with realistic assessment of strengths and areas for improvement through the early (1-2 years), mid (3-4 years) and late phases (5-6 years) of probationary appointment;
- Committee members should review the time commitments of the assistant professor and help identify activities most crucial for professional development and promotion such as:
 - Identifying appropriate committees and stewardship activities;
 - Identifying research opportunities, suggesting potential research collaborators;
 - Providing advice or guidance on funding resources, grant-writing workshops and examples of successful grants, as relevant for mentee's work;
 - Exploring and facilitating local and national faculty development opportunities;
 - Advising on teaching responsibilities and ensure that assistant professor is receiving constructive feedback on teaching from faculty peer reviews (at least 2 reviews over time, beginning no later than year 3);
 - Advising mentee on time commitments related to clinical duties and advocating as needed to ensure clinical responsibilities are not compromising academic goals;
 - Advising the assistant professor to decline certain invitations or making recommendations to the division director/department chair/course coordinator to limit certain assignments (e.g., additional clinical, teaching or committee work).
- Review drafts of manuscripts prior to submission to peer-reviewed journals
- Strategize and provide informal review in advance of submission of grants to the funding source;
- Confidentiality of information shared during promotion oversight committee meetings should be maintained, unless otherwise indicated by the assistant professor.

Mentoring and Career Resources

The [UW–Madison Institute for Clinical and Translational Research \(ICTR\)](#) offers resources for mentors and mentees focused on cultivating effective mentoring relationships, including information on mentoring best practices and the stages of a mentoring relationship.

[Faculty Central Resources](#), Office for Faculty Affairs and Development, UW SMPH

Additional online mentoring resources are available at the [UW-Madison Center for the Improvement of Mentored Experiences in Research \(CIMER\)](#).

[Maximizing the Return on Investment in Your Mentoring Relationships](#), Nancy Raymond, MD, Associate Dean for Faculty Affairs and Development, UW School of Medicine and Public Health.

The [National Research Mentoring Network \(NRMN\)](#), funded by the National Institutes of Health, is a nationwide consortium of science professionals and institutions collaborating to provide students and scientists across all career stages of research in the biomedical, behavioral, clinical, and social sciences with enhanced networking, professional development, research resources and mentorship experiences. The NRMN offers mentorship and professional development programs for all career stages. [Membership is free](#).

The [Association of Professors of Gynecology and Obstetrics](#) (APGO) offers several teaching and learning tools for ob-gyn faculty members. APGO members are encouraged to utilize the online resources designed specifically for faculty development and community-based educators.

The APGO also has several books and awards available for advancing your career (available to APGO members)

[Career Development in Academic Medicine: Your Journey to Success](#) (requires member log in) A valuable resource regardless of specialty or career stage, this digital publication offers guidance for physicians considering a career in academic medicine, for medical school faculty contemplating career direction and for medical school administrators seeking advice on how to establish and nurture excellent faculty at their institutions.

American Association of Medical Colleges (AAMC) Faculty Vitae. [The Educator Portfolio: A Tool for Career Development](#). Career development and advancement of all medical faculty members—from basic scientists to clinicians—involves documentation of educational accomplishments. A well-planned educator portfolio can play a key role in advancing your career as an educator.

The [AAMC's Minority Faculty Career Development Seminar](#). For junior faculty (senior fellows, instructors, and assistant professors) who are members of underrepresented minority groups and who aspire to attain positions of leadership in academic medicine.

The [AAMC's Early Career Women Faculty Leadership Development Seminar](#). Two seminars, one for early career faculty members and one for mid-career faculty members, are held annually. Both are directed to a multidisciplinary audience and emphasize women's leadership skills and opportunities for advancement.

AAMC's [*Compact Between Postdoctoral Appointees and Their Mentors*](#) is designed to support the development of positive mentoring postdoctoral relationships and offers a set of guiding principles to initiate discussions at both local and national levels. The compact was updated in 2017 by the [AAMC Group on Graduate Research, Education, and Training](#) (GREAT) and [AAMC Council of Faculty and Academic Societies](#) (CFAS).

Bland CJ, Taylor AL, Shollen, SL, Weber-Main AM, Mulcahy PA. 2010. [Faculty Success through Mentoring: A Guide for Mentors, Mentees, and Leaders](#). New York: Rowman & Littlefield.

Moreno M, Katzenellenbogen R. Women Rock Science: A Pocket Guide for Success in Clinical Academic Research Careers, Springer Nature Switzerland. 2019. 0498-6 (eBook)
<https://doi.org/10.1007/978-3-030-10498-6>

Seltzer R. 2015. [The Coach's Guide for Women Professors: Who Want a Successful Career and a Well-Balanced Life](#). Stylus Publishing.

X. APPENDIX: POC Notes: Accomplishments, Goals, Challenges & Mentor Feedback

Ahead of each Promotion Oversight Committee meeting:

Mentee updates POC Notes with recent accomplishments, short term goals resources and time needed and potential barriers.

Send updated POC notes and updated CV to POC members 1-2 weeks in advance of meeting

During meeting:

Notetaker adds relevant meeting notes and mentors' comments

Following meeting:

Save notes in mentee's mentoring and promotions documents BOX

Notetaker sends to mentor chair, mentee and department promotions coordinator shortly after meeting to review and edit as needed

Personal and Institutional Long-Term Goals and Aligning your Efforts:

What do you hope to accomplish in your career? – originally identified in your IDP. Update as needed

List other goals discussed with Department Chair/Division Director

Identify personal short-term goals (3-5 years) – originally identified in your IDP. Update as needed

Is your time optimally aligned to support accomplishment of your goals? Update if needed

Your Time	Current Effort	Optimal Effort
Focus Area	# Hours/Week OR % of Total Duties	# Hours/Week OR % of Total Duties
Teaching		
Research		
Clinical Care		
Service (leadership, program development)		
Self-Development (networking, training)		
Total		

Date of Meeting: Click or tap to enter a date.

Faculty Track: Choose an item.

Faculty Member Name:

Division: Choose an item.

Appointment Start Date: Click or tap to enter a date.

Promotion Clock End Date:

Promotion Due Date (one year before clock end date):

Area of Excellence: Choose an item.

Area of Significant Accomplishment: Choose an item.

Mentor Committee Chair:

Mentor Committee Members:

<meeting date> meeting attendees:

Primary Academic Mentor (if applicable):

CV up to date in SMPH CV format? Choose an item.

Meeting Notes (clinical, teaching, research, service, meeting summary/general assessment/recommendations):

Clinical Service (including clinical outreach service)	
Recent goals and accomplishments	
Short term (6-12 month) goals	
Resources, collaborators & time needed to achieve goal(s)	
Identify potential barriers	
Mentors' comments	

Teaching	
Recent goals and accomplishments	
Short term (6-12 month) goals	
Resources, collaborators & time needed to achieve goal(s)	
Identify potential barriers	
Mentors' comments	

Service: Professional Citizenship and Leadership

Recent goals and accomplishments	
Short term (6-12 month) goals	
Resources, collaborators & time needed to achieve goal(s)	
Identify potential barriers	
Mentors' comments	

Include efforts to enhance inclusion of diverse populations at UW

Research (notes, and tally of scholarly activity)

Recent goals and accomplishments	
Short term (6-12 month) goals	
Resources, collaborators & time needed to achieve goal(s)	
Identify potential barriers	
Mentors' comments	

Self-Development

Recent goals and accomplishments	
Short term (6-12 month) goals	
Resources, collaborators & time needed to achieve goal(s)	
Identify potential barriers	
Mentors' comments	

Meeting Summary (add notes here that aren't covered in clinical, teaching, research, and service notes):

General Assessment:

The consensus of the committee is that Dr. _____

- Is on the correct academic track for promotion
- Is making adequate progress towards successful promotion according to their timeline
- Is meeting professional citizenship/leadership standards
- Has concern(s) that need to be addressed to enhance their career development

If yes, describe:

- We request formal discussion of these concerns with the Department Chair.

Tally of Scholarly Activity:

Publications in the past year

- ___ peer-reviewed research papers
 - ___ as first or senior author
 - ___ as review article or case report
- ___ books, or chapters in books, videos or other appropriate media
- ___ papers submitted to peer-reviewed journals
- ___ non-peer reviewed articles
- ___ conference publications
- ___ visual scholarship (such as infographics with impact analyzed by Altmetric)
- ___ invited editorials, technical reports and other publications

Since hired on this track:

- ___ Total number of peer-reviewed publications
 - ___ as first or senior author

Presentations at conferences (include Grand Rounds, etc) or at research meetings

- ___ accepted abstracts
- ___ invited talks

Grant support

- ___ funded grants since hired on this track
 - ___ currently funded
 - ___ completed grants
- ___ pending grants
- ___ clinical trials
- Supported by grants from (name sponsors of major grants):

XI. Individual Development Plans

The individual development plan (IDP) is a tool to help in your career and promotion planning process. The IDP also **facilitates communication between mentees and mentors and can help align expectations for the mentoring relationship**. Discussing elements of your plan in collaboration with your promotion oversight committee means they are aware of and have invested in advising you on your career goals and the proposed timeline to achieve them. IDPs include sections for self-assessment and reflection; career choices and pathways; short- and long-term goals; and ways to achieve and implement those goals.

The department suggests creating an IDP within the first 3 months as an assistant professor and reviewing it with your division director. Once the initial IDP is completed, a dynamic document can be reviewed and updated biannually with your promotion oversight committee. Updating the IDP for each promotion oversight committee meeting can help you as the mentee stay on track and allow mentors to suggest career resources in real time and preemptively identify potential barriers. Mentees can also use the IDP to advocate for their career advancement (e.g. justify participation in professional development activities that will help achieve goals/learning objectives as agreed on in the IDP).¹⁰

Beyond serving as a valuable career tool for your use as a mentee, an IDP is a requirement for all those supported by NIH training grants or career development awards (graduate students, postdoctoral fellows and junior faculty). As a current or future mentor of these trainees, there is an additional benefit of developing familiarity with the IDP. Career planning tools are also advantageous when applying for Mentored Career Development Awards, where applicants are required to provide detailed training and career plans.

If still skeptical, there is research that suggests career impact. One study found that people who use professional development plans such as the individual development plan rank themselves higher on indices of success and achieve greater success within science and other fields according to some metrics¹¹. A second study¹², based on information provided by 7,600 postdoctoral scientists at 46 American research institutions, showed that compared to peers without a written plan, post docs who begin their appointment with an IDP *developed in collaboration with their mentors*:

- Are 23% more likely to submit papers to peer-reviewed journals.
- Publish first-authored papers at a 30% higher rate.
- Are 25% less likely to report that their mentor did not meet their initial expectation.

Tips for Preparing Individual Development Plans (IDPs)* For Mentors and Mentees

An **IDP provides a process to identify career goals and objectives**. It serves as a **communication tool between mentee and mentor**.

Goals of an IDP: Help individuals identify:

- Long-term career options for a mentee to pursue and how to best pursue these options, and
- Short-term need for improving current performance.

Benefits: A clearer sense of expectations achieve and milestones to advance in the system.

The IDP Process: These 4 steps are meant to be interactive; both mentee and mentor must participate fully in the process.

clearer sense of and milestones to advance in the

THE MENTEE

Step 1. Conduct a Self-Assessment.

- Assess your skills, strengths and areas that need development.
- Take a realistic look at your current abilities. This is a critical part of career planning. Ask your peers, mentors, family and friends what they see as your strengths and your development needs.
- Outline your long-term career objectives. Ask yourself:
 - What type of work would I like to be doing?
 - Where would I like to be in this organization?
 - What is important to me in a career?

Step 2. Survey Opportunities with Mentor.

- Identify career opportunities and select from those that interest you.
- Identify developmental needs by comparing current skills and strengths with those needed for your career choice.
- Prioritize your developmental areas and discuss how these should be addressed with mentor.

Step 3. Write an IDP.

An IDP maps out your general path and helps match skills/strengths to your career choices. It is a changing document; needs and goals will almost certainly evolve over time. The aim is to build from your current strengths and skills by identifying areas for development and providing a way to address these.

- Discuss your draft IDP with your mentor(s).

- Revise the IDP as appropriate.

Step 4. Implement Your IDP.

- Put your plan into action.
- Revise and modify plan as necessary; it is not cast in stone and needs to be modified as circumstances and goals change. The challenge is to be flexible and open to change.
- Review the plan with your mentor regularly. Revise the plan based on these discussions.

THE MENTOR:

Step 1. Become familiar with available opportunities.

By virtue of your experience, you should already have knowledge of the mentee's career opportunities, but you may want to familiarize yourself with other career opportunities and trends.

Step 2. Discuss opportunities with mentee.

This needs to be a private, scheduled meeting, distinct from regular research-specific meetings. There should be adequate time set aside for an open and honest discussion.

Step 3. Review IDP and help revise.

Provide honest feedback - both positive and negative - to help mentee set realistic goals. Agree on a development plan that will allow your mentee to be productive in the research and adequately prepared for the next step in their career advancement.

Step 4. Establish regular review of progress.

A mentor should meet at regular intervals with mentee to assess progress, expectations and changing goals. Every 6 months, you should conduct a performance review to assess accomplishments and what needs to be done next. A written review is most helpful in objectively documenting accomplishments.

**Adapted from: UCSF Clinical & Translational Science Institute Mentor Development Program*



The **ObGyn Individual Development Plan (IDP)** is applicable for all faculty tracks and rank. Consider it a communication tool between mentee and mentor. It can function as a living document that can be revisited and updated as needed to reflect changes in career goals.

**Recommended best practices for sharing documents with
Promotion Oversight Committee mentors**

Develop your IDP:

Prepare your IDP within the first 6 months of your faculty appointment. This helps your Division Director and the Vice Chair of Faculty Development, Education and Wellness identify potential mentors to serve on your Promotion Oversight Committee (POC)

Once your mentors are identified, and a POC is established, use the *Promotion Oversight Committee Notes: Accomplishments, Goals, Challenges and Mentor Feedback* template to communicate with your mentors.

Use the POC Notes to update your accomplishments, short term (6-12 month) goals and any changes in your distribution of effort prior to each meeting with your mentors

Send the updated POC notes along with your updated CV to your mentors at least one week in advance of each meeting.

Individual Development Plan

1. **Name:**
2. **Date range:**
3. **Academic Series (CHS, CT, Tenure):**
4. **Academic rank (Assistant, Associate, Full Professor):**
5. **Review your Academic Series requirements as needed** (see Promotional Guidelines for Series/Rank on the [UW SMPH Intranet](#))

6. **Identify Personal and Institutional Long-Term Goals**

What do you personally hope to accomplish in your career?

List other goals discussed with department chair/division director

Identify personal short-term goals (3-5 years)

7. **Areas of Focus: Definition and Distribution of Effort**

The following five areas of focus generally describe the areas where faculty direct their efforts to successfully accomplish their personal, institutional and academic series goals. Faculty in Ob-Gyn have varying roles and responsibilities. Focus only on your development needs in areas pertinent to your career.

1. **Teaching—Excellence in Education**

Training medical students, residents, fellows, other clinical and/or public health learners. Student teaching, training in research methods, student advising, CME/curriculum teaching /involvement, new course development, etc.

2. **Research—Excellence in Research**

Conducting basic science and/or clinical research, presentations and publications, funding and grant support and application,

copyrights and patents, editing, and peer review. Pursuing high quality research anywhere along the continuum from basic, clinical, translational and population approaches.

3. Clinical Care—State-of-the-Art Clinical Care

Provision of care to patients, clinical care, and/or public health activities, chart reviews, related clinical activities, clinical budget performance.

4. Service—Leadership and Program Development

Participation or leadership in governance, committee membership, collegial activities. Suggested service priority: department, School of Medicine and Public Health, University, professional, community, program leadership that advances the missions of the SMPH.

5. Self-Development—Networking, Work/Life Balance and Additional Mentors

Faculty Development activities, leadership programs, CME training, earning advanced degrees, participation in professional academic associations or societies, developing professional contacts, consulting in one’s field, expanding network contacts, balancing work and personal life activities, utilizing additional mentors in specific areas of focus.

Distribution of Effort: Estimate the hours per week spent in each focus area and then list the % of total duties. Only complete the areas that apply. Otherwise, list non-applicable (N/A).

Focus Area	# Hours/Week	% of Total Duties
Teaching		
Research		
Clinical Care		
Service		
Self-Development		
Total		

8. Specific Goals in Focus Areas

Complete the focus areas that specifically apply to the criteria for your Academic Series and therefore will help you accomplish your personal and institutional long-term goals. Other focus areas may not apply to your career goals and can be left blank or labeled non-applicable (N/A).

TEACHING

Please list recent goal(s) and significant accomplishments (teaching appointments, invitations, course or program improvements, etc.). If goal not met, explain and identify barriers.

Recent teaching goals and significant accomplishments:

Short-term (6-12 month) teaching goal(s):

Identify resources, collaborators, and time commitment needed to achieve goal(s):

Identify potential barriers to achieve new goal(s):

RESEARCH AND RESEARCH-RELATED ACTIVITIES

Please list recent goal(s) and significant accomplishments (major publications, grants, presentations, invitations, etc.). If goal not met, explain and identify barriers.

Recent teaching goals and significant accomplishments:

Short-term (6-12 month) teaching goal(s):

Identify resources, collaborators, and time commitment needed to achieve goal(s):

Identify potential barriers to achieve new goal(s):

CLINICAL CARE

Please list recent goal(s) and significant accomplishments (exceptional patient care, development of new techniques, clinical programs, etc.). If goal not met, explain and identify barriers.

Recent teaching goals and significant accomplishments:

Short-term (6-12 month) teaching goal(s):

Identify resources, collaborators, and time commitment needed to achieve goal(s):

Identify potential barriers to achieve new goal(s):

SERVICE/LEADERSHIP

Please list recent service/leadership goal(s) and significant accomplishments. If goal not met, explain and identify barriers.

Recent teaching goals and significant accomplishments:

Short-term (6-12 month) teaching goal(s):

Identify resources, collaborators, and time commitment needed to achieve goal(s):

Identify potential barriers to achieve new goal(s):

SELF-DEVELOPMENT

Please list recent goal(s) and significant accomplishments. If goal not met, explain and identify barriers.

Recent teaching goals and significant accomplishments:

Short-term (6-12 month) teaching goal(s):

Identify resources, collaborators, and time commitment needed to achieve goal(s):

Identify potential barriers to achieve new goal(s):

9. Optimal Distribution of Effort

Revisit the table, “Distribution of Effort,” in step 5. Create a new Optimal Distribution of Effort table, taking into account your specific goals listed in step 6.

Focus Area	# Hours/Week	% of Total Duties
Teaching		
Research		
Clinical Care		
Service		
Self-Development		
Total		

*Adapted from IDP form presented by Russell G. Robertson MD, Medical College of Wisconsin, 2004 AAMC Faculty Affairs Professional Development Conference.

XII. Mentoring Plan Worksheet*

YOUR GOALS

Take some time to think about and write down your research and professional goals. You may want to articulate one- and five-year goals. For example, a short-term goal might be “to complete a pilot study” and a long-term goal might be “to have enough publications to get promoted.” Take some time to think about and write down your clinical, research and professional goals. You may want to articulate one- and five-year goals. For example, a short-term goal might be “to review promotional guidelines” and a long-term goal might be “to assume a leadership role in your professional society.”

Short-term Goals (next year)	Long-term Goals (next 5 years)
1.	1.
2.	2.
3.	3.

IDENTIFY MENTORSHIP NEEDS

Identify competencies that you will need to gain expertise in to reach your goals (see Table below for examples). Identify people who can assist you in achieving these competencies and in meeting your goals. These can be mentors within your department, or from other departments in the UW School of Medicine and Public Health. A blank grid is included on the next page to help you organize your thoughts. Put your initial thoughts down on paper before you approach a mentor, and then revise it as your relationship changes.

Designing research	Establishing goals
Writing grants	Finding funding
Managing your career	Managing staff
Leading teams	Preparing for promotion
Cultural competence	Navigating institution
Organizational dynamics	Managing conflict
Speaking before groups	Knowing career paths
Teaching effectively	Hiring personnel
Collaborating effectively	Managing budgets
Managing data	Mentoring others
Giving feedback	Evaluating literature
Assessing students	Medical informatics

POTENTIAL MENTORS

Identify people who can assist you in developing the competencies you identified and therefore help you to reach your goals. For each potential mentor, identify objectives, develop a list of what you can offer and propose outcomes. Put your initial thoughts down on paper before you approach a mentor, and then revise it as your relationship changes.

APPROACHING MENTORS

We suggest that you first approach mentors by sending an e-mail that includes a request for a meeting, a brief summary of your goals and why you think there would be a good fit between you and the mentor. Let potential mentors know how you are hoping to work with them, such as one-on-one, as one of many mentors, or as part of a mentoring team or committee. You might want to let them know how you think they would be able to contribute.

MANAGING RELATIONSHIPS WITH YOUR MENTORS

Relationships should be nurtured and respected. If you and your proposed mentor develop a working relationship, have some guidelines for how you will work together. Here are some tips:

- ❖ Schedule standing meetings ahead of time and keep them.
- ❖ Give your mentor(s) plenty of time to review drafts of grants and manuscripts.
- ❖ Don't be a black hole of need – limit the number of requests you make of any given mentor.
- ❖ Develop authorship protocols so that expectations are clear.
- ❖ Saying thank you is priceless.

Mentoring Plan					
<i>Mentor</i>	<i>Long and/or Short-Term Goal (e.g. lead a research group)</i>	<i>Competency (e.g. learn how to mentor)</i>	<i>Activity (e.g. mentor a medical student)</i>	<i>What I can offer (e.g. increase research group's capacity to do research)</i>	<i>Outcome (e.g. increased research productivity)</i>

*Adapted from Ann J Brown, MD MHS, Vice Dean for Faculty, Duke University School of Medicine.

XIII. Mentorship Agreement Template

The purpose of this template is to assist you in documenting mutually agreed upon goals and parameters that will serve as the foundation for your mentoring relationships. While mentors and mentees may find mentorship agreements to be useful, they are optional. This template is expected to be altered to meet individual needs.

- [1] **Goals** (what you hope to achieve as a result of this relationship; e.g., gain perspective relative to skills necessary for success in academia, explore new career opportunities/alternatives, obtain knowledge of organizational culture, networking, leadership skill development, etc.):
- [2] **Steps to achieving goals** as stated above (e.g., meeting regularly, manuscripts/grants, collaborating on research projects, steps to achieving independence, etc.):
- [3] **Confidentiality:** Any sensitive issues that we discuss will be held in the strictest of confidence. Issues that are off limits for discussion include:
- [4] **Plan for evaluating relationship effectiveness** (e.g., bi-annual review of mentorship meeting minutes, goals, and outcomes/accomplishments):
- [5] **Relationship termination clause:** In the event that either party finds the mentoring relationship unproductive and requests that it be terminated, we agree to honor that individual’s decision without question or blame.
- [6] **Duration:** This mentorship relationship will continue as long as both parties feel comfortable with its productivity or until:

Mentor’s Signature _____

Mentee’s Signature _____

Date _____

XIV. Mentoring Agreement Form

We are voluntarily entering into a mentoring relationship that we expect will benefit both parties. This agreement sets the parameters of the relationship, including the expectation that we will continually evaluate the relationship to ensure it meets both our needs. Other elements of the relationship are:

- [1] ***Confidentiality:*** Any sensitive issues that we discuss will be held in the strictest of confidence. Issues that are off limits for discussion include:
- [2] ***Frequency of meetings/anticipated duration of the relationship:***
- [3] ***Approximate time investment of Mentor:***
- [4] ***Specific role of Mentor:***
- [5] ***Expectations of Mentee:***
- [6] ***Additional Points:***

Mentee: _____ Date: _____

Mentor: _____ Date: _____