

***Evaluation Criteria for Faculty Advancement
of Tenure-Line and Clinical-Line Faculty***

School of Physical Therapy

Physical Therapy Program Guidelines

Revised and Amended March 2017 to limit participation to PT faculty only
Revised May 2008 and Amended August & December 2009
to include Program Director's criteria and Director of Clinical Education's criteria
Physical Therapy Program
University of Puget Sound
Tacoma, Washington

Approved by the Professional Standards Committee May 2017

Procedures for the Evaluation Process for Faculty Members in the Physical Therapy Department

Guiding Documents:

Faculty members under review or those who are participating in reviews are expected to consult the appropriate document and become thoroughly familiar with information as follows:

Faculty Code:

- The University evaluation standards and criteria at different stages of the faculty member's career
- Timetable for faculty evaluation
- Faculty rights and responsibilities
- Appeal procedures

Professional Standards Committee Faculty Evaluation Criteria and Procedures (formerly known as the "buff document"):

- Deadlines for submitting complete file including colleague letters and summary of deliberations to Dean's office
- Elaboration of University evaluation standards
- Standards for colleague evaluation letters and the timing of their submission
- Process and associated deadlines for inclusion of letters from colleagues outside the department
- Pattern and documentation of class visitations for the purpose of observing teaching
- General guidelines for elements to include in the file including specific requirements for student evaluations
- Timing of faculty evaluation meetings
- Physical Therapy Department Evaluation Criteria

The process for departmental faculty evaluation within the Physical Therapy Program shall otherwise follow the Faculty Evaluation Criteria and Procedures as published by the Professional Standards Committee of the University with the following unique inter-program procedures

- All full-time faculty members are eligible to participate in the evaluation process. Eligible faculty members will participate in the evaluation of all members of his/her resident department except as noted below. Visiting and Adjunct faculty will not participate.

PARTICIPATION in an evaluation implies a thorough evaluation of the evaluatee's file, teaching observations, a careful review of the department evaluation criteria providing an independent evaluation letter and participating in the departmental deliberation meeting.

- Observations of teaching will normally be conducted by all participating faculty unless concurrent teaching scheduling do not allow it. Usually each evaluatee will have a minimum of two teaching observations done by two different faculty colleagues.
- Faculty members who are on sabbatical are not expected to participate in any aspect of the evaluation process, although they may choose to do so.

**Physical Therapy Program
Evaluation Criteria for Faculty Advancement:
Explanation of Areas Evaluated and
Requirements for Documentation of the Areas**

Teaching

The Physical Therapy Program is committed to quality education for its students. Curricular goals must address the goals of the University of Puget Sound, the needs of the profession, the requirements imposed by CAPTE, and requirements for professional licensure of graduates. Professional education in physical therapy requires a carefully integrated blend of classroom didactic instruction, clinical laboratory instruction, clinical instruction in the presence of actual patients/clients, and mentoring in the process of critical inquiry. Course content, assignments and expectations should reflect curricular goals, and the particular type of teaching. Any faculty member may be engaged in some or all of these types of teaching. Because all of these forms of teaching are critically important in PT education, each requires teaching at all levels of Bloom's taxonomy, and none is favored over the others, the faculty member is expected to demonstrate quality in each form of teaching that makes up part of his or her load. The particular combination of teaching types for each individual faculty member is determined by both curricular need and expertise of the faculty member.

Students in Physical Therapy, like those throughout the University, come with varied educational and life experiences and a variety of learning styles. Faculty must acknowledge these differences and implement diversity of teaching strategies to the extent that class size and content permit.

The faculty member must have an excellent grasp of the discipline taught, so as to convey accurate information, to engender in students' enthusiasm for and confidence in the discipline, to challenge students within the discipline while providing guidance to meet those challenges, and to nurture student valuing of continued lifelong learning. Faculty members who teach clinical methods in the classroom or who provide clinical instruction in the onsite clinic must maintain clinical currency by participating in some level ongoing clinical practice.

Course structure, presentations, activities, and materials should be well organized and reflect the nature of the content presented. Classroom presentations and management should effectively convey information, spark excitement in the students and establish a stimulating, supportive atmosphere. The faculty member should carefully evaluate student work and make appropriate distinctions between levels of achievement. Teaching methodologies should promote student independence and encourage active learning. Teaching methods, course content and activities, and student requirements should demonstrate sensitivity to the level of expected student progress toward becoming effective entry-level clinicians. Clinical reasoning and judgment, based upon culturally sensitive values and priorities, must be addressed as appropriate.

One of the unique features of the physical therapy program is the onsite teaching clinic. The clinic requires a form of teaching that is distinctly different from classroom didactic teaching. Faculty who teach in the onsite clinic must be able to facilitate the student's metamorphosis from classroom learner to independently thinking clinician. The faculty member must provide thorough supervision to protect the safety of the client/patient and ensure quality of treatment while also giving the student opportunities to develop skill in examination, physical therapy diagnosis, clinical reasoning and the provision of evidence-based treatment.

Preparing students to perform respectful, ethical, and culturally competent patient care is the ultimate goal of the program.

Faculty members being evaluated should identify, in the personal statement, which of the following forms of teaching are relevant within their particular teaching assignments and present evidence for teaching quality appropriate to the type of evaluation within each relevant area of teaching. Documentation of quality in teaching in the file shall include evidence that supports performance in all criteria within this category. Such documentation includes, but is not limited to, inclusion of sample course syllabi (including objectives), representative assignments, examinations, examples of feedback given to students, and student evaluations. The professor should include documentation to illuminate his/her modification of course content/methodology based upon faculty/student feedback and developments within the discipline, as well as communication with other faculty members to ensure concurrent and sequential organization of content within the program.

Criteria universally applicable to all types of teaching

- Conveys enthusiasm for the discipline.
- Employs teaching methodology appropriate to the content and goals of the course and to the curricular goals.
- Establishes clear and measurable course requirements.
- Uses behavioral objectives appropriate to the goals of the course, the curriculum, and/or the undergraduate core rubric if applicable.
- Posts office hours and is accessible to students.
- Promotes student independence.
- Facilitates student awareness of current developments in the discipline and application of evidence.
- Exemplifies a role model for the profession.
- Encourages students to be lifelong learners.
- Communicates with other faculty members to ensure concurrent and sequential organization of content within the and/or effective team teaching as appropriate
- Models collaboration and teamwork as appropriate between faculty members in physical therapy and related disciplines.

Classroom didactic teaching:

- Demonstrates mastery of the content area.
- Demonstrates excellent classroom presentations (including non-clinical labs if appropriate) and/or facilitation of discussion
- Develops assignments and/or examinations that facilitate and measure student understanding.
- Promotes student development of relevant professional writing skills as appropriate to the course content
- Carefully evaluates student work and provides helpful feedback in a timely manner.

Clinical Laboratory Teaching:

- Models safe, competent and effective clinical practice.
- Explains and demonstrates physical therapy procedures in an understandable way.
- Communicates clear expectations for successful mastery of techniques.

- Organizes laboratory activities that promote student understanding and development of skills.
- Monitors each student's success in attaining necessary skills and provides effective feedback to promote improvement and greater success.
- Designs student evaluations that appropriately measure student skill in clinical procedures.

Onsite clinic mentoring:

- Maintains awareness of student progression in curriculum in order to provide opportunities for application of highest level of content attained.
- Clearly communicates expectations for student success.
- Facilitates safe, competent and effective clinical practice.
- Recognizes barriers to student success and provides effective correction or instruction while promoting maximum student independence.
- Provides thoughtful, helpful and timely feedback on all aspects of clinical performance including clinical reasoning, clinical decisions, procedures, interaction with patients, peers and instructors, written documentation and affective behaviors important for successful clinical practice.
- Carefully evaluates student attainment of clinic objectives and student readiness to progress to the next level of clinic or internships.
- Provides clinical supervision that allows the student to grow as an individual and as a professional.
- Maintains good communication with other clinical instructors in order to facilitate smooth operation of the clinic and be helpful to students or faculty as needed.

Critical Inquiry:

- Models intellectual vigor and enthusiastic engagement with critical inquiry.
- Facilitates student understanding of research question and related content (which may include involvement of clinical or other collaborators).
- Facilitates student progress in the program research curriculum and associated tasks (e.g., background study and literature review, proposal development, IRB, data collection, data analysis, manuscript preparation, presentation) balancing considerations of time limitations and student independence.
- Provides thoughtful, timely and helpful feedback on draft documents and other research activities.
- Provides appropriate supervision to data collection and management (which may include involvement of consultants or other collaborators)
- Facilitates appropriate data analysis and in-depth consideration of clinical implications of findings (which may include involvement of consultants or other collaborators)
- Promotes student development of writing ability of a form and quality appropriate to public dissemination of findings
- Guides students in appropriate professional presentation of study.

II. Professional Development

CAPTE requirements state “Each core faculty member [regardless of rank or classification] has a scholarly agenda that is reflected by accomplishments that: (1) contribute to the development or creation of new knowledge, or (2) contribute to the critical analysis and review of knowledge within disciplines or the creative synthesis of insights contained in different disciplines or fields of study, or (3) apply findings

generated through the scholarship of integration or discovery to solve real problems in the professions, industry, government, and the community, or (4) contribute to the development of critically reflective knowledge about teaching and learning.¹ CAPTE has provided a specific elaboration on these types of scholarship and how they are evaluated at the level of program accreditation (Appendix I). Thus, every faculty member in the Physical Therapy Program is expected to demonstrate peer-reviewed productivity in one or more of the areas of scholarship elaborated by CAPTE by the time of the three-year review, and on an ongoing basis thereafter at the rate of at least one product every two years, on average. No individual faculty member is required to demonstrate peer-reviewed productivity in all areas. None of the areas of scholarship elaborated by CAPTE is preferred above the others; the individual faculty member's area(s) of scholarly engagement will relate to that faculty member's role in the program and in the profession.

According to the Faculty Code, the University values scholarship in the discipline because "it has a direct bearing...on the person's expertise" and "on the quality and effectiveness of the person's teaching." Given that each physical therapy faculty member must meet the standards of scholarship described by CAPTE, all faculty in the Physical Therapy Program will have the same expectation for scholarship whether they are in the tenure-line or the clinical-line.

Prior to AY 1991-1992, the Master's degree was considered to be the terminal degree for the purpose of evaluating both tenure-line and clinical line faculty members in the Program of Physical Therapy. For faculty members hired prior to 1991, completion of advanced study leading to the Doctorate degree is recognized as a significant and highly valued form of professional growth in and of itself. For tenure-line faculty hired subsequent to AY 1991-1992, the post-entry level doctorate degree must be completed prior to the three-year review in order to be tenured and promoted beyond the Assistant Professor rank. Doctorate preparation is highly valued (though not required for hiring or salary advancement) for clinical line faculty in the Physical Therapy Program. Thus, advanced study leading to a doctorate degree remains a significant and highly valued form of professional growth in and of itself for physical therapy faculty members in the clinical line.

In addition to peer-reviewed productivity, the Physical Therapy Program highly values myriad other forms of professional growth. Because medical and therapeutic knowledge is in a constant state of change and growth, continued or advanced study is critical to the ability to teach contemporary practice, and to model engagement in lifelong learning for our students. Attainment and maintenance of Board Certification in a specialty area of physical therapy practice is a particularly valuable way to contribute to the collective expertise of the physical therapy faculty.

The cornerstone of physical therapy is providing patient care. Treating patients requires the ability to examine patients, analyze findings, reach a physical therapy diagnosis, design evidence-based treatment strategies, assess outcomes, and integrate all of these processes to consider macro implications on physical therapy practice. Clinical practice must be culturally sensitive, humane, and consider the whole person. Faculty members responsible for teaching clinical methodology didactically, in laboratories, or in the on-site clinic serve as mentors. Therefore, it is critical to the program that faculty members teaching clinical method maintain some degree of clinical practice in their areas of expertise.

Because our professional organizations have the power to legislate certain aspects of practice and to influence educational policy on a state or national level, performing leadership roles in our professional or regulatory organizations can be a form of professional development.

Evidence to support professional development may include but is not limited to copies of publications, printouts of Powerpoints used in presentations, miniatures of posters, abstracts of presentations,

documentation of role in the editorial process, certificates of completion of continuing education, description of clinical activity including dates and extent, titles and dates of service of leadership roles in professional organizations, documentation of role in preparation of evaluation reports, and external review of work completed. Collaborative publications are typical in the field of physical therapy; when the faculty members being evaluated present collaborative work, they should include a specific delineation of the role and responsibility they had in the project.

Current work in progress shall be documented by a brief description, as well as drafts, written excerpts or outlines, as appropriate, of the final product. The specific form(s) of professional development that are most important for faculty members will vary depending on their role. Responsibility lies with the evaluatee to describe the relationship between professional development and specific role in the program.

III. Advising

Advising responsibilities in the physical therapy program are identical for both tenure-line faculty and clinical-line faculty. Advising responsibilities as described in the Faculty Code begin in the second year of full-time employment as a faculty member in physical therapy.

A single faculty member is typically assigned to advise an entire class of students in the physical therapy program. This assignment is done on a rotating basis such that a faculty member works with the same group of students from admission into the program until program completion. Advising in the physical therapy program may include having primary responsibility for advising an entire class of PT students, advising undergraduates who are interested in the health professions, or advising prospective students who are interested in the physical therapy program at Puget Sound. Each type of advising is necessary and of equal importance to the functioning of a professional graduate program.

Advisors of physical therapy students need a clear understanding of University and program policies relative to graduate students, a clear understanding of the appropriate curriculum, and an understanding of University resources available to students. These advisors must understand the complexities of advising students regarding their ultimate integration into the professional clinical community and must be able to mentor them in that process.

Faculty members in physical therapy may act as undergraduate advisors for UPS students who are interested in the health professions. These advisors need a good understanding of undergraduate policies and University services available to undergraduates, plus good familiarity with the structure of various undergraduate majors, degree requirements, and courses of academic study throughout the undergraduate institution. In addition, these advisors need to be well versed in PT admissions policies (both specific to UPS and generalizable to the broader range of potential professional preparation sites), general admissions requirements for other health professions, and in the process of proper guidance for individuals who hope to successfully gain admission to a program of professional study in any health profession. When admission to the PT program, or another health professions program is no longer the goal for whatever reason these advisors are expected to be able to assist students in the exploration of acceptable alternatives, and in the process of transitioning to another course of study.

Faculty members who do not have an advising class or responsibility for advising undergraduate students may be involved in advising prospective students who anticipate application to the PT program after graduation from institutions other than Puget Sound. These advisors need clear understanding of the PT admissions process as well as a familiarity with the policies and procedures for evaluation of transfer credit. When advising prospective students, it is necessary to be able to effectively guide such individuals

in both academic and co-curricular choices that will help them either reach their goals or identify acceptable alternatives.

Documentation for advising (when appropriate as described in the Faculty Code) may include remarks from student evaluations, as they apply to advising, descriptions of actual cases, where a student presenting a problem was assisted in the appropriate fashion, or other sources. Additionally, documentation of office hours and availability to students may be included here.

IV. University Service

Faculty members of the Physical Therapy program (both tenure-line and clinical line) are expected to take part in some form of University service as described in the Faculty Code. In addition, faculty may serve the university through assisting with student recruitment. Participation in University governance, including long-term planning and revenue enhancement efforts, gives faculty members the privilege of helping to shape the direction of the university. Active participation in campus standing committees, ad hoc committees, and Faculty Senate provides physical therapy faculty members with an invaluable opportunity to maintain the vitality of the relationship between the Physical Therapy program and the University as a whole.

Documentation related to University service should show participation in Physical Therapy Program meetings and activities, and participation in University level committees and representative bodies as appropriate to rank, as specified in the Faculty Code. Dates, levels and examples of participation should be included. University service in other capacities should also be documented.

V. Community Service

It is generally expected that each faculty member will be active in community service that is related to professional interest and expertise. For the purpose of physical therapy faculty members, “professional interest and expertise” is broadly defined as any activity that allows the faculty member to enhance (by modeling) the students’ appreciation of the realization of the benefits of a broad and fully developed liberal arts undergraduate education in the midst of professional education and entry into a human service profession.

Faculty community service may take many forms and should be documented by the member being evaluated. The faculty member being evaluated has the responsibility for explaining the relationship between his or her community service and the discipline of physical therapy or the education of physical therapy students. Dates, organizations, and roles should be included.

References

1. Evaluative criteria for accreditation of educational programs for the preparation of physical therapists (Adopted October 26, 2004 and effective January 1, 2006; revised 5/07) Commission on Accreditation in Physical Therapy Education
2. A Normative Model of Physical Therapist Professional Education, Version 2004. American Physical Therapy Association.

APPENDIX I: CHARACTERISTICS OF SCHOLARSHIP (CAPTE DOCUMENT)			
If the scholarly work	It is typically	Within a scholarly agenda, accomplishment is typically demonstrated by	And is documented by (as appropriate for the activity)
<p>Contributes to the development or creation of new knowledge</p> <p>(Scholarship of Discovery)</p>	<ul style="list-style-type: none"> • Primary empirical research • Historical research • Theory development • Methodological studies • Philosophical inquiry 	<ul style="list-style-type: none"> • Peer-reviewed publications of research, theory, or philosophical essays • Peer-reviewed/invited professional presentations of research, theory, or philosophical essays • Grant awards in support of research or scholarship • Positive peer evaluations of the body of work 	<ul style="list-style-type: none"> • Bibliographic citation of the accomplishments • Positive external assessment of the body of work
<p>Contributes to the critical analysis and review of knowledge within disciplines or the creative synthesis of insights contained in different disciplines or fields of study</p> <p>(Scholarship of Integration)</p>	<ul style="list-style-type: none"> • Inquiry that advances knowledge across a range of theories, practice areas, techniques or methodologies • Includes works that interface between physical therapy and a variety of disciplines 	<ul style="list-style-type: none"> • Peer-reviewed publications of research, policy analysis, case studies, integrative reviews of the literature, and others • Copyrights, licenses, patents, or products • Published books • Positive peer evaluations of contributions to integrative scholarship • Reports of interdisciplinary programs or service projects • Interdisciplinary grant awards • Peer-reviewed/invited professional presentations • Policy papers designed to influence organizations or governments • Service on editorial board or as peer reviewer 	<ul style="list-style-type: none"> • Bibliographic citation of the accomplishments • Positive external assessment of the body of work • Documentation of role in editorial/ review processes
<p>Applies findings generated through the scholarship of integration or discovery to solve real problems in the professions, industry, government, and the community</p> <p>(Scholarship of Application/ Practice)</p>	<ul style="list-style-type: none"> • Development of clinical knowledge • Application of technical or research skills to address problems 	<ul style="list-style-type: none"> • Activities related to the faculty member's area of expertise (eg, consultation, technical assistance, policy analysis, program evaluation, development of practice patterns) • Peer-reviewed/invited professional presentations related to practice • Consultation reports • Reports compiling and analyzing patient or health services outcomes • Products, patents, license copyrights • Peer reviews of practice • Grant awards in support of practice • Reports of meta-analyses related to practice problems • Reports of clinical demonstration projects • Policy papers related to practice 	<ul style="list-style-type: none"> • Formal documentation of a record of the activity and positive formal evaluation by users of the work • Bibliographic citation • Documentation of role in multi-authored products • Positive external assessment of the body of work

<p>Contributes to the development of critically reflective knowledge about teaching and learning</p> <p>(Scholarship of Teaching)</p>	<ul style="list-style-type: none"> • Application of knowledge of the discipline or specialty applied in teaching-learning • Development of innovative teaching and evaluation methods • Program development and learning outcome evaluation • Professional role modeling 	<ul style="list-style-type: none"> • Peer-reviewed publications of research related to teaching methodology or learning outcomes, case studies related to teaching-learning, learning theory development, and development or testing of educational models or theories • Educational effectiveness studies such as those found in comprehensive program reports • Successful applications of technology to teaching and learning • Positive peer assessments of innovations in teaching • Published textbooks or other learning aids • Grant awards in support of teaching and learning • Peer-reviewed/invited professional presentations related to teaching and learning 	<ul style="list-style-type: none"> • Bibliographic citation of the accomplishments • Documentation of scholarly role in creation of multi-authored evaluation reports • Positive external assessment of the body of work
<p>Contributes to the identification, understanding and resolution of significant social, civic, or ethical problems and includes systematic data collection, analysis, interpretation and impact.</p> <p>(Scholarship of Engagement)¹¹</p>	<ul style="list-style-type: none"> • Collaborative partnerships involving faculty, community members and organizational representatives (community-based research or interventions) 	<ul style="list-style-type: none"> • Peer-reviewed/invited publications or professional presentations related to development of community-based intervention, curriculum development • Grant awards in support of community-based intervention • Policy papers, presentations, or reports compiling and analyzing community program outcomes that includes analysis and interpretation of data collected and leads to an outcome or plan 	<ul style="list-style-type: none"> • Bibliographic citation of the accomplishments • Positive external assessment of the body of work • Documentation of role in multi-authored products <p>10</p>