

**TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER  
PAUL L. FOSTER SCHOOL OF MEDICINE**

**PROCEDURE FOR  
COMPREHENSIVE PERFORMANCE EVALUATION  
OF TENURED FACULTY**

**SUBJECT**

Peer Review of Tenured Faculty and Tenured Faculty Receiving Academic Promotion

**PURPOSE**

The purpose of this Paul L. Foster School of Medicine Attachment to HSC OP 60.03 is to establish uniform guidelines and procedures leading to a comprehensive performance evaluation of tenured faculty. It will describe also an institutional commitment to assist and support faculty development as part of this peer review, as well as other actions, which may arise as part of this evaluative process.

The procedures are to be consistent with:

1. Texas Education Code Sec. §51.942 Performance Evaluation of Tenured faculty; and
2. HSC OP 60.03, Comprehensive Performance Evaluation of Tenured Faculty.

**REVIEW:**

This School of Medicine Policy will be reviewed by February 1<sup>st</sup> of every even-numbered year by the Dean in consultation with the Committee on Faculty Appointment, Tenure, and Comprehensive Performance Evaluation (CFAPTA) and the Academic Council, with recommendations for revision presented to the Senior Vice President for Academic Affairs for review prior to final approval by the President.

**POLICY/PROCEDURE**

**1. Preamble.**

- a. This Peer Review Policy/Procedure is intended to enhance and protect, rather than diminish, the important guarantees of tenure and academic freedom. The objectives are to: provide guidance for continuing and meaningful faculty professional development; enable faculty to enhance professional skills and achieve professional goals; refocus academic and professional efforts, when appropriate; ascertain that faculty members are meeting their responsibilities to the University and the State of Texas; and comply with the laws of the State of Texas as well as the Rules and Regulations of the Board of Regents of the Texas Tech University System and the policies of Health Sciences Center.
- b. The acceptance and success of the periodic peer review of the tenured faculty will be dependent upon a well-executed, critical process and an institutional commitment to assist and support faculty development. Thus, remediation and follow-up review for faculty who would benefit from such support, as well as the designation of academic administrators with primary responsibility for monitoring such needed follow-up activities, are essential.
- c. Nothing in this peer review evaluation process shall be interpreted or applied to infringe on the tenure system, academic freedom, due process, or other protected rights, nor to establish new term tenure systems or require faculty to re-establish their credentials for tenure.

## 2. Evaluation Focus.

- a. The Peer Review Performance Evaluation process will be directed toward the professional development of the faculty member. It will include a comprehensive review of the faculty member's performance of duties and responsibilities as assigned by the departmental chair or the direct supervisor consistent with institutional policy, including (where applicable) an appropriate balance of areas including teaching, scholarship (research), clinical service, and academically-related public service. The criteria for this review shall be consistent with the ***PLSFOM Guidelines for Faculty Appointment, Tenure and Promotion*** and department-specific criteria adopted by the department's faculty.
- b. The Peer Review Performance Evaluations conducted by a Peer Review Committee will be based to a large extent on the Annual Summary Review Reports of Goals and Objectives for the individual faculty member. The appropriateness of expectations for assigned duties and responsibilities will be reviewed together with the performance. The faculty member will submit additional supporting documentation as is deemed relevant for the Peer Review process, including, but not restricted to, a current curriculum vitae, student evaluations and a summary statement of professional accomplishments.

## 3. Evaluation Schedule.

- a. Evaluation of part-time administrators who are tenured faculty under this Policy will not be waived. Evaluations will be conducted no less than once every six (6) years after the date the faculty member is granted tenure, unless the faculty member is on a leave of absence or assumes a full-time administrative position during this period. Evaluations for persons on leave or serving as full-time Administrators with academic appointments will be deferred by the length of time absent or in service, but no deferral of an evaluation of an active faculty member may extend beyond six (6) years from the due date. Full-time Administrators with academic appointments will be subject to evaluation within six (6) years of return to full-time, active faculty status. A tenured faculty member shall be considered a full-time administrator if the individual spends 50% or greater time on administrative duties as defined by the faculty member's supervisor.
- b. Comprehensive evaluations of faculty tenured as of January 1, 2005 must be completed no later than January 1, 2011. To achieve this, all faculty members tenured as of January 1, 2005 will undergo the initial Peer Review Performance Evaluation during the calendar year 2010.
- c. Except as provided in a. above, all faculty members tenured after January 1, 2003 will be evaluated at six (6) year intervals.
- d. The promotion of a tenured faculty member from associate professor to full professor is based on a comprehensive performance evaluation equivalent to the Peer Review Performance Evaluation described under this Policy. Therefore, the effective date of the promotion will start a new six (6) year cycle for peer review under this Policy.

## 4. Peer Review Committee.

- a. The Peer Review Committee shall be composed of all tenured faculty members of the Committee on Faculty Appointment, Tenure and Promotion, and Comprehensive Performance Evaluation (CFAPTA) of the Paul L. Foster School of Medicine.
- b. The Associate Dean for Faculty Affairs and Development shall serve as the Chair of the Peer Review Committee, according to the Faculty Bylaws of the Paul L. Foster School of Medicine.

- c. A quorum shall be considered to be 50% or more of all members.

**5. Evaluation Procedure.**

- a. The evaluation process will begin on January 1 of each year, commencing January 1, 2010. All tenured faculty members to be evaluated in any year will receive a notice of the upcoming review from the Peer Review Committee at least six months in advance, i.e., no later than January 15 of the year in which the evaluation will take place. Faculty members are responsible for submitting their documentation to the Peer Review Committee by July 15 of the year in which the review is to take place. Addenda may be submitted up through September 1 of that year.
- b. The initial evaluation by the Peer Review Committee of material submitted to it will commence on July 15 and be completed no later than October 15th. Each initial evaluation will be performed by two Committee members, one of whom must be in the same category (clinician, basic scientist, or medical educator) as the faculty member being evaluated. The reviewers may request additional material as deemed necessary through the Chair of the Peer Review Committee. A written report of this initial evaluation will be submitted to the Peer Review Committee for consideration and a recorded vote.
- c. Committee members will recuse themselves in considerations involving themselves, members of their own department, faculty to whom they are related or in other instances of possible conflict of interest.
- d. The Peer Review Committee will develop and approve a Comprehensive Performance Evaluation Report (which could be the same as the one submitted by the initial reviewers) for each faculty member. The Peer Review Committee will deliver the final Report on the same date to all faculty members being reviewed, not later than November 1st of the review year.

**6. Comprehensive Performance Evaluation Reports.**

- a. The Comprehensive Performance Evaluation Reports, issued by the Chair of the Peer Review Committee will be in a standard form. They will state:
  - 1) The specific areas reviewed;
  - 2) The conclusions reached;
  - 3) The basis for the conclusions;
  - 4) Summary findings, i.e. that the faculty member:
    - a) Is performing exceedingly well;
    - b) Is performing well;
    - c) Is performing satisfactorily;
    - d) Needs minor remediation in one or more areas;
    - e) Needs significant remediation in one or more areas; or
    - f) Other action recommended.
- b. This Comprehensive Performance Evaluation Report will be distributed first to the faculty member for review:
  - 1) If the faculty member does not indicate any disagreement with this report, it shall become the final report.
  - 2) If the faculty member disagrees with the evaluation, he/she shall have ten (10) working days from receipt of the Report within which to notify the Chair of the Peer Review Committee in writing:
    - a) That he/she is giving official notice of an appeal; and

b) Stating the basis for the appeal, by:

- i) submitting additional documentation to support the appeal, and
- ii) requesting, if desired, to meet in person with the Peer Review Committee.

- 3) If so requested in writing by the faculty member, the Peer Review Committee shall meet with the faculty member to consider the appeal within ten (10) working days of receiving the notice of appeal. The committee will then formulate a final report including any revisions suggested by this meeting.
- 4) The final written Comprehensive Performance Evaluation Report shall be distributed to the faculty member, the Chair of the Department, the Dean of the School of Medicine, the Senior Vice President for Academic Affairs and the President of the Health Sciences Center by December 1. If the report indicates a need for remediation, the areas must be clearly identified and specific recommendations made.

**7. Actions based on the Comprehensive Performance Evaluation Report.**

- a. No development procedures will be initiated for any faculty member receiving an evaluation of Satisfactory or better.
- b. The Dean of the School of Medicine may consider rewarding any faculty member whose performance is evaluated as meritorious but has been deemed by the Peer Review Committee to have not been appropriately recognized.
- c. A Development Program as described below (Section 8: Professional Development Procedures) will be initiated when the Report from the Peer Review Committee recommends that remediation would be appropriate. Periodic reviews will monitor the progress in a development program.

**8. Professional Development Procedures.**

- a. The individual professional development plan is a document indicating how specific deficiencies in a faculty member's performance will be remedied. The plan will grow out of collaboration between the faculty member, the Peer Review Committee, the Departmental Chair, the Dean, and the Associate Dean for Faculty Affairs and Development, and should reflect the shared goals of the faculty member, the department, and the Paul L. Foster School of Medicine. The plan will be formulated with the assistance of and in consultation with the faculty member. It is the faculty member's obligation to assist in the development of a meaningful and effective plan and to make a good faith effort to implement the plan adopted.
- b. Development Procedures will be standardized, although specific activities designed to improve performance will vary according to the deficits identified. These Development Procedures are as follows:
  - 1) A specific plan of development, covering a period of time not to exceed two (2) years and based on the recommendations of the Peer Review Committee, will be established by the Chair in consultation with the faculty member and the Associate Dean for Faculty Affairs and Development. This program will be submitted to the Peer Review Committee and the Dean of the Paul L. Foster School of Medicine for final approval within 20 working days.
  - 2) The plan will (1) identify specific deficiencies to be addressed as indicated in the Comprehensive Performance Evaluation Report; (2) define specific goals or

outcomes necessary to remedy the deficiencies; (3) outline the activities to be undertaken to achieve the necessary outcome; (4) set timelines for accomplishing the activities and achieving intermediate and ultimate outcomes; (5) indicate the criteria for assessment; (6) schedule times for review of progress at six-month intervals or more often as may be needed; and (7) identify institutional resources to be committed in support of the plan.

- 3) The plan should include mechanisms to provide additional institutional support such as mentoring in teaching and research, counseling, financial support, relief time to devote to areas of deficiency and developmental leave for course work or research training.
- 4) Progress in the development program will be monitored through semi-annual, or more often as may be needed, reports submitted to the Peer Review Committee, the Office of Faculty Affairs and Development by the faculty member and the Departmental Chair. Two members of the Peer Review Committee will meet with the faculty member, the Chair and the Associate Dean for Faculty Affairs and Development annually to review and report on the progress. If the review of progress at the end of the first year shows a clear lack of effort by the faculty member, the Department Chair, on approval by the Peer Review Committee, may file a report to the Dean of the Paul L. Foster School of Medicine suggesting that actions appropriate to an unsatisfactory performance be taken at that time (see 5b). Upon completion of the plan, the Departmental Chair will prepare a final report to the Dean of the Paul L. Foster School of Medicine, the faculty member, the Peer Review Committee, the Committee on Faculty Appointment Tenure and Promotion and Comprehensive Performance Evaluation and the President of the Health Sciences Center.
- 5) Consideration by the Peer Review Committee at the end of the Development Program will result in one of the following recommendations to the Dean of the Paul L. Foster School of Medicine:
  - a) Determination that satisfactory progress has been made and that no further action is necessary. The faculty member's performance would thus be considered satisfactory.
  - b) Determination that progress has been unsatisfactory and that appropriate actions should be taken.
- 6) If, at the end of the Development Program, an adverse action is taken, then the faculty member can follow, if so desired, the Faculty Grievance Policy with the subject of the grievance being the Departmental Chair.

9. **Disciplinary Actions.**

- a. A faculty member may be subject to revocation of tenure or other disciplinary actions as described below if incompetence, neglect of duty (meaning continued or repeated substantial neglect of professional responsibilities), or other good cause is determined to be present at the completion of, or at any time during, the above process.
- b. For faculty found to be performing unsatisfactorily, these guidelines are intended to recognize and distinguish that termination, revocation or other disciplinary action taken pursuant to existing institutional disciplinary procedures or required annual evaluations, are distinct from Termination or Revocation of Tenure or other appropriate disciplinary action taken pursuant to a Comprehensive Periodic Evaluation process under the new Texas Education Code §51.942 as amended or modified and which procedures are set forth below:

## Revocation of Tenure

- 1) A faculty member is subject to revocation of tenure if either incompetence, neglect of duty or other good cause is determined to be present. A faculty member subject to revocation of tenure on the basis of a Comprehensive Performance Evaluation, conducted pursuant to Texas Education Code §51.942 as amended or modified, shall have an opportunity for a non-tenure track term appointment under TTUHSC OP 60.01, Tenure and Promotion Policy. In effect, the transition from the non-tenure track series to the tenure track (or vice versa) may be allowed following review and mutual agreement by the faculty member, the head of the academic unit, and the Dean. Absent extraordinary circumstances which are approved by the Dean, only one transfer between tracks will be allowed.

## 2) Termination of Employees

If good cause exists for termination under TTUHSC OP 60.01, Tenure and Promotion Policy, a faculty member subject to termination on the basis of a comprehensive performance evaluation, pursuant to Texas Education Code §51.942 as amended, shall be given:

- a) An opportunity for referral of the matter to an external, non-binding alternative dispute resolution process (“ADR”) as described in Chapter 154 of the Texas Civil Practices and Remedies Code. All mediators, arbitrators or other person conducting the ADR must meet the qualifications set forth in Chapter 154 and must be selected by an agreement of all parties.
- b) Alternatively, if both parties agree, the matter may be referred to the internal mediation procedure set forth in TTUHSC OP 60.01, Tenure and Promotion Policy
- c) Regardless of whether an internal or external dispute resolution is utilized, a faculty member who is subject to termination under this policy shall be provided a list of charges listed against him or her. In all such cases, the burden of proof shall be on the institution and the rights of the faculty member to due process and academic freedom shall be protected.

## 3) Other Disciplinary Actions:

- a) Other disciplinary action is appropriate under existing Regents’ Rules or institutional policies on the basis of the comprehensive performance evaluation conducted pursuant to Texas Education Code §51.942 as amended or modified.
- b) Such action does not preclude other disciplinary action based on annual evaluations or as may be commensurate with events.

**TIMELINE:**

According to the legislative Act, review of faculty tenured as of January 1, 2005 must be completed by January 1, 2011. Initial Peer Review Committee must be in place prior to January 1, 2010 and this Committee must begin Evaluation Process January 1, 2010.

- a. Process must be set up on calendar-year schedule to begin on January 1 of each year.
- b. Notification of upcoming evaluation must be distributed early enough to be received by January 15. All notifications should go out at the same time.
- c. Faculty being evaluated must submit materials by July 15.
- d. Deadline for submission of addenda will be September 1.
- e. Initial evaluations will begin July 15 and end October 1.
- f. Initial evaluations should be sent to faculty members by October 30.
- g. Faculty must file appeals within 10 working days of receipt of report (due date = approximately Nov 1).
- h. Hearing of appeal by Committee within 10 working days of receipt of appeal (due date = approximately Nov 15).
- i. Final reports to Dean, etc. by December 1.
- j. Remediation (Development) plans to Dean and Peer Review Committee by January 1 and approved by January 15.