

**Guidelines for appointment, career development and promotion
for Faculty in Clinical Professor Titles
College of Veterinary Medicine
Cornell University
Approved by College Faculty June 15, 2017**

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Part 1: Overview of Positions

This document provides description of faculty in clinical professor titles. There are three levels of clinical professors: assistant, associate, and full professor.

The Faculty Handbook <https://blogs.cornell.edu/deanoffaculty/files/2016/07/Chapter-2-1gssgnl.pdf> describes, on page 31, the positions of clinical professor as follows:

“Clinical Professor, Associate Clinical Professor, Assistant Clinical Professor: These titles are available in a given college only upon satisfaction of a special approval process specified in the Enabling Legislation (please consult enabling legislation approved by the University Faculty Senate on September 4, 2002, for the Clinical Professor Title, available from the Office of the Dean of Faculty).

The ranks of the title of Clinical Professor are available only for long term, non-tenure-track faculty who serve an essential teaching function in a clinical setting. While faculty members of this rank may have additional research, service, or outreach obligations, teaching is their primary responsibility. The title may not be used for positions whose responsibilities largely replicate those of tenure-track faculty.

These titles reflect salaried positions that are subject to affirmative action regulations. Clinical professors generally hold the highest degree in the field. They may be appointed for a term of not to exceed five years, renewable repeatedly. Decisions about appointment and promotion are made on the authority of the dean. College or school legislation as approved in the process with the Faculty Senate authorizing the use of the title in that college or school governs various terms and conditions, including percent limitations on the number of such appointments, voting rights, and access to grievance and appeals procedures (consult the Faculty Senate enabling legislation).”

The following guidelines apply to the College of Veterinary Medicine: included are the functions and responsibilities of the positions, appointment and promotion procedures, and the distribution of such positions within the college.

Part 2: Functions and responsibilities

The primary function of the clinical professor will be to provide clinical or diagnostic service to the College, the Cornell University Hospital for Animals (CUHA) or the Animal Health Diagnostic Center (AHDC) in the context of clinical teaching and is done in accordance with the needs of the department in which the position is appointed. The clinical professor helps the college meet its educational and service missions with efforts ranging from 65-80% allocated to clinical service and clinical teaching, and/or administrative service that supports and impacts the teaching program. The clinical teaching performed in this context is distinctive from classroom teaching and is extremely labor intensive, requiring a high ratio of faculty teachers to trainees.

It is the responsibility of each department to establish clear expectations and evaluation tools for teaching accomplishments and other duties. A clinical professor’s responsibility is to help students integrate and apply knowledge, skills and professional attitudes. Students are broadly defined and may be those enrolled in the professional curriculum; engaged in internship, residency or fellowship training; or participating in continuing education programs. Clinical professors provide context-based learning that is gained through first-hand client and

professional interactions and hands-on training in the clinical practice setting. Clinical professors will be full participants in academic service, serving on faculty committees and providing leadership in their department and college.

Clinical professors will not be expected to develop major independent leadership roles in research. The extent of research activities is normally limited to those of a collaborative or consultative nature. Clinical professors may, however, apply for research grants as a principal investigator as long as the time commitment is less than 25%, and the total research effort is compatible with the significant clinical and teaching expectations of their appointment. Clinical professors will be expected to achieve excellence in all aspects of their mission and to produce scholarship that reflects this excellence.

Part 3: Distribution of positions within the college

The distribution of positions within the CVM is based on 25% of the tenure-track appointments within each department and the contributions of each department to clinical service. In the instance where a clinical or diagnostic service unit is embedded in a larger, non-clinical department, the number of clinical professors shall not exceed 50% of the faculty appointments within that unit (or 25% of the tenure-track faculty in the department, whichever is less), in order to preserve the representation of tenure-track professorial faculty in the unit.

Part 4: Appointment

- A. **Nature of search:** A formal rigorous, national/international search, subject to affirmative action regulations, will be conducted in the manner employed for other faculty appointments. Searches will be conducted by the department in which the appointment will be made, with oversight from the Dean and Associate Dean for Academic Affairs. Waiver of search will require approval of the Provost.
- B. **Credentials:** DVM or equivalent degree, including specialty boards (if applicable/available) or demonstrated expertise in the appropriate discipline where specialty boards are not present/available. In some circumstances, individuals holding Ph.D. or M.D. degrees and specialized diagnostic certification or training may also be appointed. It is required that clinical track faculty members have completed credentials to take specialty boards or board-certified (when applicable/available) prior to being appointed as Assistant Clinical Professor. It is required that clinical track faculty members be board-certified (when applicable/available) for appointment or promotion to Associate or Full Clinical Professor.
- C. **Levels of approval for individual appointments:** Creation of new positions and appointment of individuals to clinical professor titles will require review and input by the departmental faculty and approval by the department chair and Dean.
- D. **Length of appointments:** Initial appointment of Assistant Clinical Professors will be for 3 years. Following a rigorous departmental performance review of the first 3 years, the Assistant Clinical Professor may be re-appointed for an additional 3 years. Promotion to Associate Clinical Professor is normally initiated at the beginning of the 6th year. Assistant Clinical Professors, at the discretion of the department chair and the Dean, may be reappointed at 3 year intervals as an assistant professor, subject to positive annual

reviews and programmatic needs.

Associate Clinical Professors (either newly appointed or promoted from Assistant Clinical Professor) will be reviewed for promotion within 6 years. Renewal of Associate Clinical Professors and Full Clinical Professors will be for up to 5 years on a rolling basis. That is, following a positive annual review, an individual may be reappointed for up to 5 years from the date of review. In this way the appointment would be extended by up to 5 years, every year following a positive annual review. Appointments may be renewed repeatedly as legislated in the University Faculty Handbook.

Possibilities for movement between faculty career paths: Faculty members in either clinical or tenure-track appointments may apply for open positions in another track for which they are qualified. A faculty member in a tenure-track appointment may not move into a clinical-track appointment after a negative tenure decision in any circumstance. Should a clinical professor seek to change titles, and a position is open, they may apply and be considered. The exception would be if it followed a negative reappointment decision.

Part 5: Procedures for renewal and promotion

Appointments and promotions for faculty with clinical professorial titles will closely follow University guidelines and policies on academic appointments for tenurable faculty as outlined in the Cornell University Faculty Handbook, *Chapter 2.0, Academic Appointments, Reappointment, Tenure and Promotion*. <https://blogs.cornell.edu/deanoffaculty/files/2016/07/Chapter-2-1gssgnl.pdf>

A. Reappointment at Assistant Clinical Professor: Most commonly, a person entering a clinical track academic career path is given a three-year appointment at the Assistant Clinical Professor level. The faculty member must review his or her progress each year with the department chairperson or designate and should receive written feedback. In the third year, a thorough performance review that includes endorsement of the departmental faculty (all associate and full clinical and tenured professors) by vote is conducted. For this review the candidate will provide a statement outlining accomplishments in teaching-including a portfolio if appropriate-, research and service and curriculum vitae. The Chair will forward the vote and his or her recommendation to the Dean. If the outcome is positive, it is normal for renewal for a second three-year term to be recommended by the chair for approval by the Dean.

If the outcome of the three-year review is negative the faculty member must be given notice and allowed to serve a terminal appointment from the date of the notice of non-renewal of two full academic semesters. If the faculty member clearly is not meeting expectations, the notice not to renew the appointment may be given earlier than the third year and the required two academic semesters notice must be provided.

B. Appealing a decision not to reappoint: Procedures for appealing a decision not to reappoint a faculty member after an initial 3 year probationary appointment will follow those in [Appendix Three](#) of the Faculty Handbook (*Procedures for Appealing a Decision*

Not to Renew a Non-tenure Appointment) with the exception that the appeals process ends at the college level.

Part 6: Appointment to Associate or Full Clinical Professor

The initial appointment to the faculty of a highly qualified person who is already credited with significant achievements may be at the rank of Associate Clinical Professor or even Full Clinical Professor. Such appointments will be for five years with a formal review at 3 years. Basic criteria and specific criteria are set by each department but must include specialty board certification if applicable/available and recognized by either the American or European Board of Veterinary Specialties. Specialty board certification indicates a designated level of achievement and proficiency in a specialty area.

Part 7: Promotion to Associate Clinical Professor

Basic criteria and specific criteria for promotion are set by each department but they include specialty board certification, if applicable/available, and recognized by either the American or European Board of Veterinary Specialties. An overview of the promotion guidelines includes:

- A. **Basic criteria:** The basic criteria for promotion are excellence in carrying out the responsibilities of the position and promise of continued achievement. Faculty evaluation will take into account the specific position's responsibilities (particularly the division of effort between professional service, teaching, research, and service to the College, University and the public) described in the faculty member's appointment letter, as modified during periodic reviews. All clinical professors will have an obligation to contribute to their discipline and to the wellbeing of the academic community through college and university service.

Promotion to the rank of Associate Clinical Professor usually occurs after completion of the probationary period as an Assistant Clinical Professor. In most cases, the candidate will be reviewed for promotion during the sixth year in the clinical track, typically during the third year of the second term of appointment as an Assistant Clinical Professor. The length of the probationary period can be shorter, depending on the experience of the individual before the initial appointment as Assistant Clinical Professor, with approval of the Dean.

- B. **Specific criteria:** Evidence of excellence must be present in all aspects of the person's academic clinical practice, teaching, research/scholarly work, and university community service. The relative amounts of classroom, clinical, postgraduate, and outreach teaching will vary among individuals and departments. More details of the specific criteria follow:
 1. **Academic clinical practice.** Documentation of excellence in the area of academic clinical practice shall include evidence of the candidate's achievement in the areas listed below. Clinical track faculty are expected to contribute to the broader advancement of their clinical discipline. Successful candidates for promotion or appointment to Associate Clinical Professor should demonstrate significant contributions to the advancement of their

clinical discipline through the creation and the dissemination of new knowledge.

- i. Demonstrate expertise in their clinical discipline.
- ii. Demonstrate a commitment to providing professional service as reflected by:
 - a. timely, professional communication with clients and others
 - b. adherence to hospital and/or college policies and
 - c. demonstrate a strong sense of professional ethics

Note: In the area of academic clinical practice, promotional documents may include a list of the number of weeks the candidate was assigned to clinical duty in previous years, and a brief discussion of the staffing level in the relevant hospital section during those years. Peer evaluation of academic clinical practice performance and solicited letters (internal and external) evaluating clinical performance shall be provided from appropriate individuals (e.g., service chief, supervisor).

2. **Teaching**

This should include a list of all courses taught (including the credit hours allocated). Accordingly, this would include any supervision of individual projects. Also relevant is any role the candidate has played in curriculum development. Department peer-review teaching evaluations should be included if available. All student evaluations should be in a summary format and included in the promotion dossier.

- i. Classroom teaching
Classroom teaching may include lectures, seminars, laboratories, discussion sessions, and workshops. Special consideration should be given to new and innovative teaching methods. Included in this section is a summary of the candidate's involvement in classroom teaching and presenting continuing education for veterinarians and other professionals, if appropriate.
- ii. Clinical teaching
Clinical teaching may involve lecture, demonstration, and one-on-one teaching of professional degree students in a clinical setting. Student evaluations, if available, should be included.
- iii. Postgraduate teaching.
Postgraduate teaching may include coordination of an internship or residency program, resident training, and graduate student or fellowship training. Documentation of the excellence of the candidate's postgraduate teaching should be provided by residents, interns, other clinical trainees and graduate students, if applicable. Such evaluation of the candidate by trainees should

concentrate on the candidate and their role as a mentor for clinical and scholarly activities.

iv. **Outreach Teaching/ Educating the Stakeholders.**

This category applies to teaching duties performed outside Cornell University. All College faculty, regardless of the nature of their appointments, share in the responsibility to make their expertise available to the larger community to the greatest extent that is reasonable. In most cases, it is appropriate to list those outside teaching-related activities under the documentation required for excellence in Academic Clinical Practice and Classroom Teaching (for continuing education lectures). However, there may be clinical appointees whose significant involvement in outreach teaching activities goes considerably beyond what is routinely expected. In such cases, excellence in this area may be used as the basis for a candidate's appointment or promotion. Evidence of excellence in Outreach Teaching may include:

- a. A detailed description of the candidate's outreach efforts including a statement of the goals for the program and a description of the audience served.
- b. Documentation of materials or publications (e.g., continuing education material, computer software programs, material distributed via the media) developed in promotion of the outreach program.
- c. Organization and/or coordination of a conference should be documented in this section.

Note: Additional supporting documentation of teaching activities:

- e. Published materials. For each publication in this category (e.g. American Journal of Veterinary Medical Education), a brief statement should be added in the teaching narrative section explaining the relationship of the publication to the candidate's teaching program and/or candidate's contribution to the project/publication.
- f. Invited presentations related to teaching.
- g. Grants and awards related to teaching.
- h. Other. Any other documentation of teaching merit including role as a student advisor should be added. This should be organized clearly and concisely, and could include a limited selection of such information as course descriptions, examination and grading techniques, or other items that demonstrate the high quality of the candidate's teaching record.

3. **Research and scholarly work**

Clinical appointees seeking promotion are expected to generate or disseminate new knowledge in their field of clinical expertise as described above. In some cases, a clinical track faculty member may have pursued additional lines of scientific inquiry outside and not directly in support of his or her academic clinical practice. This activity may constitute an area of scholarly achievement in support of promotion or appointment to Associate Clinical Professor. Unlike tenure track professors, clinical professors will not be expected to develop independent leadership roles in research. The extent of research activities is normally limited to those of a collaborative or consultative nature. Clinical professors may, however, apply for research grants as principal investigators as long as the time commitment is less than 25%, and the total research effort is compatible with the significant clinical and teaching expectations of clinical professors. Clinical professors will be expected to achieve excellence in all aspects of their appointment and to produce scholarship that reflects this excellence. There should be evidence of a significant contribution by the candidate. Scholarly activity in research may include:

- i. A bibliography of publications resulting from this research, including the following types of publications:
 - a. Papers published in, or accepted by, refereed journals.
 - b. Papers published in, or accepted by, non-refereed journals.
 - c. Invited papers published in conference proceedings.
 - d. Monographs or books published.
 - e. Chapters in books.
 - f. Books or conference proceedings edited. Specific role should be included.
 - g. Contributed papers and/or abstracts.
 - h. Technical reports and other publications.
 - i. Patents.
- ii. Chronology of past and present research support.
- iii. List of invited research presentations.

4. **College and Other Service**

It is expected that candidates for promotion will have performed service, as described below. Although service is not usually a primary or secondary basis for promotion and typically has a limited effort assignment, it is important to document that a candidate has engaged in good citizenship.

- i. College service/governance
 - a. Present and past administrative assignments in the department or college. If administrative service is considered the basis of a strong service contribution, there must be supporting evidence, by peer

- and supervisor evaluation, of outstanding quality and importance of this activity to the college.
 - b. Participation in college committees.
- ii. Professional service
 - a. Service on state, regional, and national organizations, review panels, study sections, committees, and public service groups insofar as these services provide evidence of competence in an area of the biological/medical sciences.
 - b. Service to specialty board national organizations such as acting as a committee member or other roles.
 - c. Appointments or election to editorial boards of scientific journals and to office in national scientific and educational societies.
 - d. *Ad hoc* reviewer for journals and granting agencies.

Part 8: Review Process for Promotion to Associate Clinical Professor

The processes for review for promotion from Assistant Clinical Professor to Associate Clinical Professor will be closely modeled upon those used for the equivalent promotion in tenure track.

Assistant Clinical Professors will be reviewed for promotion within 6 years, if so desired. In the candidate's fifth year, the chairperson of the department convenes a meeting of associate and full tenure and non-tenure track Professors to decide whether a formal review for promotion should be initiated. If the associate and full Professors and associate and full Clinical Professors decide not to initiate a review, the chairperson will discuss their decision with the candidate. The candidate may request a formal review at that time, and his or her request will be granted automatically. If the candidate agrees to postponement, the chairperson will, at the beginning of the following year, consult the associate and full Professors and associate and full Clinical Professors again, and initiate a formal review unless the candidate requests that the review be postponed. If the candidate has not been reviewed at least once after serving as an Assistant Clinical Professor for seven years, the chairperson will consult the candidate at least every 3 years and will initiate a formal review unless the candidate does not want one.

If a candidate has received a formal review that has not culminated in a recommendation of promotion, the candidate may, after two or more years have elapsed, request a second review, and this request will be granted. (If the first review was unsuccessfully appealed, the two years are measured from the time of the decision on the appeal.)

A dossier is compiled by the candidate, including curriculum vitae, list of publications, in some cases a teaching portfolio, and a narrative describing accomplishments and plans. Letters of evaluation from selected DVM professional students, interns, residents, post-graduate veterinarians, graduate students or other trainees, colleagues in the University and outside experts are collected by the Department Chair. Assembled documentation is made available to tenured faculty members and associate and full Clinical Professors of the department. A meeting of these department faculty is then held to discuss the performance and potential of the candidate and a vote on promotion is conducted. The chairperson represents the department in making and explaining to the Dean the department's recommendation and vote for or against promotion.

A negative review is communicated first to the candidate prior to the Dean, and the candidate has an opportunity to request reconsideration by the department. The procedures for this will be modeled on those in [Appendix Five](#) of the Faculty Handbook (*Procedures for Appealing a Negative Tenure Decision*) with the exception that the appeals process ends at the college level. Even if the department's recommendation is negative, the candidate can still request that the Dean appoint an *ad hoc* committee.

After the department's initial review and any reconsideration are completed, the Dean reviews the decision at the college level. If the department's recommendation is positive, the Dean must appoint an *ad hoc* committee of faculty members from departments other than the home department of the candidate, to study the evidence and advise him or her in reaching a decision. If the Dean's final decision is positive, then Promotion to Associate Clinical Professor is made with an appointment of up to 5 years.

Part 9: Appealing negative promotion decisions

The faculty member may appeal a decision not to conduct a promotion review. The procedures for such an appeal will be modeled on [Appendix Four](#) of the Faculty Handbook (*Procedures for Appealing a Decision Not to Conduct a Tenure Review at the End of the Ordinary Tenure Probation Period on the Basis of Factors Other Than Candidate Performance*) with the exception that the formal appeals process ends at the college level.

If the promotion dossier reaches the Dean's office and the Dean reaches a tentative decision that is negative, the Dean communicates it to the candidate and the department, to provide an opportunity for rebuttal of the reasons and a request for reconsideration at the college level. The candidate has an opportunity to appeal at the college level. The procedures for this will be modeled on those in [Appendix Five](#) of the Faculty Handbook (*Procedures for Appealing a Negative Tenure Decision*) with the exception that the formal appeals process ends at the college level. At all times during the appeals process the faculty member has access to the University Ombudsman.

Part 10: Time Period for review for promotion

Associate Clinical Professors will be reviewed for promotion within 6 years, if so desired. In the candidate's fifth year, the chairperson of the department convenes a meeting of full Professors and full Clinical Professors to decide whether a formal review for promotion should be initiated. If the Professors and Clinical Professors decide not to initiate a review, the chairperson will discuss their decision with the candidate. The candidate may request a formal review at that time, and his or her request will be granted automatically. If the candidate agrees to postponement, the chairperson will, at the beginning of the following year, consult the full Professors and full Clinical Professors again, and initiate a formal review unless the candidate requests that the review be postponed. If the candidate has not been reviewed at least once after serving as an Associate Clinical Professor for seven years, the chairperson will consult the candidate at least every 3 years and will initiate a formal review unless the candidate does not want one.

If a candidate has received a formal review that has not culminated in a recommendation of promotion, the candidate may, after two or more years have elapsed, request a second review, and this request will be granted. (If the first review was unsuccessfully appealed, the two years are measured from the time of the decision on the appeal.)

Part 11: Reappointment as Associate Clinical Professor

Most commonly, an Associate Clinical Professor is given a five-year appointment at the Associate level. The faculty member must review his or her progress each year with the department chairperson. If the outcome is positive, as indicated in the "Proposal for implementation of the title Clinical Professor by the College of Veterinary Medicine" approved by the University Faculty Senate on December 14, 2011, a renewal term of up to five years for an Associate Clinical Professor would be recommended. If the outcome of the annual review is negative, the faculty member will receive a notice of renewal under "probationary status" and will continue in the remainder of the appointment in such status, pending outcome of future annual reviews with the Chair (i.e. the five-year rolling appointment stops). Should the faculty member receive consistent favorable annual reviews during the remainder of the probationary period, they will then undergo an in-depth review by the department chair with input from the department, including a vote by the tenured faculty and the associate and full clinical professors, and reappointment will be contingent on a positive outcome. Should a second negative annual review occur within the probationary period or during any future reappointments, the department chair will conduct an in-depth review with input of the department, including a vote, at that time. Should the outcome of this review be negative, the faculty member will be given a notice of non-renewal and will be allowed to serve the remainder of their appointment.

A negative in-depth review with non-renewal is communicated first to the candidate prior to the Dean, and the candidate has an opportunity to request reconsideration by the department. The procedures for this will be modeled on those in [Appendix Five](#) of the Faculty Handbook (Procedures for Appealing a Negative Tenure Decision) with the exception that the appeal process ends at the college level.

After the department's initial review and any reconsideration are completed, the Dean reviews the decision at the college level, with the appointment of an *ad hoc* committee. If the Dean's decision is positive, the candidate is reappointed for up to 5 years. If the Dean's decision is negative, the candidate may serve the remainder of their appointment.

This process should be documented in writing and a copy provided to the Associate Clinical Professor.

Part 12: Promotion or appointment to Full Clinical Professor

To be considered for appointment as a full Clinical Professor, candidates shall have a primary commitment to assist the College in meeting its programmatic need for clinical expertise, teaching (which may include outreach), scholarly activity/research, and service. Required degrees, qualifications, or experience shall be determined by the appointing department. Candidates for appointment or promotion to the rank of full Clinical Professor should have local and national recognition in their field, which may include demonstrated leadership roles in

professional organizations, if applicable, and demonstrate excellence in Academic Clinical Practice, Teaching, Research/Scholarly Activity, and University Service, as their FTE dictates. Clinical professors will not be expected to develop major independent leadership roles in research. The extent of research activities is normally limited to those of a collaborative or consultative nature. Clinical professors may, however, apply for research grants as principal investigators, as long as the time commitment is less than 25% and the total research effort is compatible with the significant clinical and teaching expectations of clinical professors. Clinical professors will be expected to achieve excellence in all aspects of their appointment and to produce scholarship that reflects this excellence. The relative amounts of classroom, clinical, postgraduate, and outreach teaching will vary among individuals and departments.

Examples of evidence include invited presentations at local, regional, and national meetings, editing or writing books on specialty areas, scientific publications, and national teaching awards. Other examples include being a section chief or unit director, peer review of teaching, and serving as a clinical mentor.

- A. **Review Process:** The process for review for promotion from Associate to Full Clinical Professor will be closely modeled upon those used for this promotion of faculty in tenure track.

A departmental review is conducted, and a detailed rationale for the promotion must be submitted to the Dean along with the vote of the full Professors and full Clinical Professors in the department.

The department procedures applicable to the promotion to full Clinical Professor are the same as those outlined above for promotion to Associate Clinical Professor, except that the vote is limited to the full Professors and full Clinical Professors in the department. The documentation need not be as extensive as it is for promotion to Associate Clinical Professor, and the charging of an *ad hoc* committee is at the Dean's discretion unless the recommendation of the department is negative and the candidate requests such a committee.

The Dean is not bound by the recommendation of the department as expressed by the chairperson. If the Dean disagrees with the judgment of the department, the Dean will, if this has not already been done, set up an *ad hoc* committee and receive its input before making a decision regarding the department decision. Appeal at the departmental and College level will be modeled on those in [Appendix Six](#) of the Faculty Handbook (*Procedures for Appealing a Negative Decision on Promotion to Full Professor*) with the exception that the appeals process ends at the college level. At all times during the appeals process the faculty member has access to the University Ombudsman.

Part 13: Reappointment as Full Clinical Professor

Most commonly, a full Clinical Professor is given a five-year reappointment. The faculty member must review his or her progress each year with the department chairperson. If the outcome is positive, as indicated in the "Proposal for implementation of the title Clinical Professor by the College of Veterinary Medicine" approved by the University Faculty Senate on

December 14, 2011, a renewal term of up to five years for a full Clinical Professor would be recommended for approval by the Dean. If the outcome of the annual review is negative, the faculty member will receive a notice of renewal under "probationary status" and will continue in the remainder of the appointment in such status, pending outcome of future annual reviews with the Chair (i.e. the five-year rolling appointment stops). Should the faculty member receive consistent favorable annual reviews during the remainder of the probationary period, they will then undergo an in-depth review by the department chair with input from the department, including a vote by the tenured and clinical full professors, and reappointment will be contingent on a positive outcome. Should a second negative annual review occur within the probationary period or during any future reappointments, the department chair will conduct an in-depth review with input of the department, including a vote by the tenured and clinical full professors, at that time. If the Dean's decision is positive, the candidate is reappointed for up to 5 years. If the Dean's decision is negative, the candidate may serve the remainder of their appointment.

A negative review with the department chairperson is communicated first to the candidate prior to the Dean, and the candidate has an opportunity to request reconsideration by the department. The procedures for this will be modeled on those in [Appendix Five](#) of the Faculty Handbook (*Procedures for Appealing a Negative Tenure Decision*) with the exception that the appeals process ends at the college level.

After the department's initial review and any reconsideration are completed, the Dean reviews the decision at the college level. If the Dean's decision is positive, the candidate is reappointed for up to 5 years. If the Dean's decision is negative, the candidate may serve a terminal appointment from the date of the notice of non-renewal of two full academic semesters.

This process should be documented in writing and a copy provided to the full Clinical Professor in a timely manner.

Part 14: Voting and Other Rights

Clinical Professors of all ranks are members of the College faculty and eligible to serve on University, College and Department committees. In addition, they have voting privileges at the department and college levels, with the exception of renewal and promotion of tenure track and research track faculty, and the exceptions described in this document.

Consulting activities of Clinical Professors will have oversight according to policies of the College and University. Associate Clinical Professors and Full Clinical Professors will be eligible for professional development leave subject to available funding, the ongoing academic needs of the Department, and related considerations. The Department Chair may approve, in writing, two weeks or less of professional development leave. The Dean may approve, in writing, leaves of up to two months. If the Dean approves a leave in excess of two months but less than one year, the leave must be recorded in the university system (see [Appendix III](#), New Draft of Resolution A (III.A of NTTF report of 8/4/05 --Professional development opportunities) passed by the Faculty Senate on 9 March 2005 and [Appendix B](#), page 29, Human Resources Policy 6.2.1 Leaves for Professors and Academic Staff (11/20/09).

Part 15: Grievance and Appeals

Clinical professorial faculty will have access to established faculty grievance and appeals procedures within the College of Veterinary Medicine except with the limitations described in this document.

The College Academic Grievance Procedures provide the means whereby any member of the faculty or academic professional staff of the College who believes him or herself to be aggrieved can obtain consideration for redress of his or her grievance. Grievable matters include, but are not limited to the following: reward (salary or other benefits); academic freedom; work assignment; working conditions; discrimination; sexual harassment; and the existence of, adequacy of, and adherence to equitable grievance procedures. The General Committee of the Faculty is the College Grievance Committee and the grievance procedures are available at <http://web.vet.cornell.edu/college/RMSS/documents/grievanceprocedureswebsite.pdf>. [Chapter 5](#) of the Faculty Handbook describes expectations for College-Level Grievance Procedures and provides a link to the relevant part of the University Policy website. College grievance procedures are not applicable to complaints with respect to appointment, reappointment and promotion, which are dealt with by a special process described in Part 5B and Part 9 of this document. The procedures that should be followed, at the University level, when academic misconduct is thought to have occurred are described in [Chapter 5](#) Academic Policies and Responsibilities of the Cornell Faculty Handbook (pp. 79-83).

A grievant may also wish to consult the University Ombudsman's office. The ombudsman "hears complaints from any source within the university community or directed against anyone in the university exercising authority and attempts to assist in obtaining a resolution of the problem. To the extent permitted by law and consistent with other university policies, confidentiality and anonymity will be provided to any grievant who requests such protection. When appropriate, the office investigates and reports findings and conclusions without restriction other than to protect the rights of individuals. The office does not exercise powers of decision but may accept the role of arbitrator when requested to do so by parties to a dispute. Their web address is <http://ombudsman.cornell.edu/>." See Cornell Faculty Handbook, [Chapter 7](#), Services and Facilities, page 153.

Appeals processes that apply to reappointment and promotion are described in Part 5B and Part 9 of this document.

Addendum

Recommendations for resources to ensure success of faculty in Clinical Professor titles:

Persons holding the title of Clinical Professor (all levels) should be entitled to certain guaranteed faculty privileges that will enhance their capabilities to perform their job to the best of their abilities. These include:

1. Private office space: A private office is considered necessary because clinical professors are often counseling students, interns and/or residents and need a private place for confidential discussions. This private space will also improve productivity of individuals in these positions.
2. Start-up funds: These funds help the Clinical Professor purchase software for a given course, obtain preliminary data for a research project, hire students to assist in course management and research projects, etc. These funds depend upon the commitment of the position, as outlined in the letter of appointment, and the needs of the individual and the department.
3. Annual discretionary funds: The request for annual discretionary funds may cover the cost of items such as (but not limited to) a new computer every 5 years and appropriate updated software, new textbooks, journals, dues for national and international professional organizations, preliminary data for a research project, and travel to national meetings when appropriate and depending on department resources.
4. Continuing Education: In order to keep up with the latest clinical research and information in their respective disciplines, persons holding the title of Clinical Professor should be entitled to attend national meetings. For individuals who are veterinarians this is particularly important in order to maintain their licensure. Funding will be dependent on available resources.
5. Mentorship: Clinical Professors should be given a copy of the [CVM Mentoring Policy](#) and should select one or more mentors early in their appointment, in consultation with their Department Chair.
6. Professional Development Leave: Such leaves are approved at the discretion of the Department Chair and the Dean and are subject to available funding, the ongoing academic needs of the Department, and related considerations. A professional development leave of over two months must be recorded in the university system. (see [Appendix II](#), New Draft of Resolution A (III.A of NTTF report of 8/4/05 --Professional development opportunities); see [Appendix B](#), page 29, Human Resources Policy 6.2.1 Leaves for Professors and Academic Staff (11/20/09).
7. Other leaves: “The University may allow academic staff, including Clinical Professors, to take leave from appointed responsibilities under certain circumstances, including arrangements that support balance between family life and university responsibilities. Cornell policy promotes academic leave management, which is a collegial approach intended to foster, within appropriate limits, situations of mutual benefit to the academic employee and the university’s academic program.” (See Faculty Handbook, [Chapter 3](#), section 3.3 for complete discussion of university policy on leaves of absence and professional development leaves for professors and academic staff).

APPENDIX A

Definitions

Clinical Professor:

The primary function of the clinical professor will be to provide clinical or diagnostic service to the College in the context of clinical/hospital/laboratory teaching. The clinical professor helps the College meet its educational and service missions with efforts ranging from 65-80% allocated to clinical service and clinical teaching. The ranks of assistant, associate or full professor are applicable to this title. For further definition see Parts 1 and 2 of this document.

Clinical Teaching:

Clinical teaching may involve lecture, demonstration, and one-on-one teaching of professional degree students in a clinical setting. The clinical teaching performed in this context is distinct from classroom teaching.

Classroom Teaching:

Classroom teaching may include lectures, seminars, laboratories, discussion sessions, and workshops.

Dean:

Where “Dean” is used in this document without other descriptors, it means the Dean of the College of Veterinary Medicine.

Postgraduate teaching:

Postgraduate teaching may include coordination of an internship or residency program, resident training, and graduate student or fellowship training.

Outreach/extension teaching:

Outreach teaching applies to teaching duties performed outside Cornell University. All College faculty, regardless of the nature of their appointments, share in the responsibility to make their expertise available to the larger community to the greatest extent that is reasonable. In most cases, it is appropriate to list those outside teaching-related activities under the documentation required for excellence in Academic Clinical Practice and Classroom Teaching (for continuing education lectures). However, there may be clinical appointees whose significant involvement in outreach teaching activities goes considerably beyond what is routinely expected.

Clinical Service:

Clinical service includes “teaching by doing” and is done in accordance with the needs of the department in which the position is appointed.

University Service:

University service is administrative assignments in the department, college, or university. Other examples include but are not limited to: participation in College and/or University committees and mentoring and peer evaluation of faculty.

Professional Service:

Professional service may include any of the following:

- a. service on state, regional, national, and international organizations, review panels, study sections, committees, and public service groups insofar as these services provide evidence of competence in an area of the biological sciences.
- b. service to specialty board national organizations such as acting as a committee member and other leadership roles.
- c. appointments or election to editorial boards of scientific journals and to office in national and international scientific and educational societies.
- d. *ad hoc* reviewer for journals and granting agencies
- e. timely, professional communication with clients and other veterinarians
- f. timely completion of medical records and correspondence
- g. appropriate attention to fiscal considerations
- h. adherence to hospital policies
- i. demonstrating a strong sense of professional ethics
- j. serving as Service/Section Chief or unit director
- k. taking a leadership role in management of the service and clinical innovation

Credentials completed to be able to apply for board certification:

Holding the degrees, education, or experience making one eligible to apply for and potentially achieve board certification in a specialty discipline with an accredited American or European organization where this is applicable/available to the specialty or discipline.

Board-certified:

Certification in a specialty discipline with an accredited American or European organization.

Clinical discipline:

Clinical discipline can include creation and dissemination of new knowledge or making presentations outside the university as well as publishing on one or more of the following topics:

- a. spontaneously occurring diseases
- b. clinical techniques
- c. diagnostic methods
- d. therapeutic procedures
- e. clinical trials
- f. uses of new technologies

Presentations may be at seminars, continuing education programs, national conferences, etc. Written publications may be case reports, technical reports, papers presented at conferences, conference proceedings in journals, monographs, books, invited chapters, review articles.

Academic Clinical practice:

Academic clinical practice may include the following:

- a. providing patient care and ancillary care of the highest quality
- b. developing or maintaining a unique clinical specialty or service for the region
- c. demonstrating impact on patient care within the service at large or within the hospital (e.g. new Standard Operating Procedures or guidelines for patient care directly resulting from action on the part of the candidate)
- d. developing new policies resulting in more cost-effective patient care (without sacrificing quality of care), or growth of caseload and clinical innovation.

Students:

Those individuals enrolled in the professional curriculum; engaged in post-graduate internship, residency or fellowship training; or participating in continuing education programs.