Clarifications of the **RTE Cap Proposal**

College of Veterinary Medicine (CVM)

October 1, 2020

Following an extremely helpful meeting with CAPP (May 28, 2020), the CVM respectfully submits this clarification of our proposal to change the existing cap on the RTE titles Clinical Professor and Professor of Practice.

1. This proposal maintains our current proportion of tenure track positions and in no way diminishes the number of tenure track faculty — it simply gives us the flexibility to use the most appropriate title for any individual RTE faculty member. We propose that all RTE titles at the CVM be capped at no more than 45% of the total faculty numbers, leaving a majority (55%) of the faculty in tenure track positions, at a minimum.

2. In terms of counting RTE faculty, these are the relevant titles: Lecturer, Senior Lecturer, Senior Extension Associate, Senior Research Associate, Clinical Professors (all ranks), Professors of the Practice (all ranks), and Research Professors (all ranks). Note that in the current system there is no limit on the number of faculty in lecturer, senior lecturer, senior extension associate, or senior research associate titles. Thus, the proposed cap policy addresses concerns about the TT-to-RTE ratio more broadly.

3. The proposed modification enables us to move some of the existing RTE faculty (mostly in lecturer titles) to other RTE titles that more accurately describe what they are actually doing. This improves morale and allows us to recruit without having to explain away the mismatches between an actual job description and the Faculty Handbook’s formal job description.

4. Our new public health program has been critical in the response to the current pandemic and in efforts to keep our university and surrounding community safe. As we recruit for this growing program, having the flexibility to hire experienced faculty as Professors of Practice—alongside new tenure track faculty—is essential. Going forward, new initiatives that involve additional RTE positions will always be complemented with additional TT positions.

5. As a professional school that runs clinical hospitals, a large diagnostic lab, and a public health program, our needs for clinical- and practice-track professorial titles are different than other units on campus. Thus, our request for a more flexible RTE cap policy is not a statement about what should be available to the other colleges.

6. The table in the proposal confirms that most of our peers have comparable if not higher percentages of RTE faculty (attached below). Very few use lecturer titles. The fact that we currently are forced to recruit into lecturer titles when our competitors can use clinical professor titles puts us at a severe disadvantage in terms of attracting and retaining the very
best faculty. This is particularly true in clinical veterinary medicine. An analogous situation holds true in public health when attempting to hire experienced practitioners without having adequate ability to use Professor of Practice titles.

7. The percentages we are proposing will always leave a majority in the TT lines, and have historically (last decade) worked to balance the clinical, outreach, teaching, extension, public health, and research missions of our college. Faculty in RTE titles have responsibilities, experiences, effort allocations, and outcome metrics that complement those of the TT faculty.

8. Having the cap based on college-wide totals rather than on department totals enables the CVM to put greater numbers of clinical-track and practice-track faculty in departments where they are most needed, notably, Clinical Sciences and Population Medicine.
# Peer Veterinary Colleges: TT/RTE Statistics*

<table>
<thead>
<tr>
<th>School (Rank)</th>
<th>#TT</th>
<th>#RTE</th>
<th>Ratio RTE:TT</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of California, Davis (1)</td>
<td>125</td>
<td>131</td>
<td>1.05</td>
<td>Notes on legislation below²</td>
</tr>
<tr>
<td>Cornell (2)</td>
<td>127</td>
<td>114</td>
<td>0.90</td>
<td></td>
</tr>
<tr>
<td>North Carolina State (T4)</td>
<td>116</td>
<td>57</td>
<td>0.49</td>
<td>Contact with Dept Chair at NCSU suggested no cap constraining RTE hires and widespread use of non-faculty instructors for clinical and teaching needs. These are NOT reflected in these numbers.</td>
</tr>
<tr>
<td>Ohio State (T4)</td>
<td>61</td>
<td>78</td>
<td>1.28</td>
<td>Notes on legislation below³</td>
</tr>
<tr>
<td>Texas A&amp;M (T4)</td>
<td>119</td>
<td>135</td>
<td>1.13</td>
<td>Senior faculty member there reports that they have no cap constraining RTE hires.</td>
</tr>
<tr>
<td>University of Pennsylvania (T4)</td>
<td>58</td>
<td>103</td>
<td>1.78</td>
<td>Notes on legislation and difference in scope below⁴</td>
</tr>
</tbody>
</table>

*Numbers obtained from the AAVMC 2019-2020 Comparative Data Report (Table 3, “Faculty Head Count,” published January 6, 2020)

¹ Note that across all the colleges and schools of veterinary medicine examined, the listing of “Lecturer” titles as faculty was rare. Note also that the scope of each college/school impacts percentages greatly. We are the only top 5 school that administers an MPH Program for its University, and some schools do not operate state diagnostic labs.

² Davis is part of the UC system. They have no limits on Professor of Residence titles. The Chancellor may set a “quota” for Clinical Professor titles for a school in consultation with the Senate. They do not have a cap or constraint on Clinical Professor titles, but a review can be triggered when the percentage in that title family exceeds 1/6th of all faculty (including RTE).

³ Ohio State’s legislation regarding relative percent of RTE faculty is as follows: “Unless an exception is approved by the university senate and the board of trustees, clinical/teaching/practice faculty may comprise no more than forty percent of the total tenure-track, clinical/teaching/practice and research faculty (as defined in rule 3335-5-19 of the Administrative Code) in each of the colleges of the health sciences.” They currently appear to be at 56%.

⁴ Unlike Cornell, Penn does not run a state diagnostic lab and therefore has far fewer RTE needed for practice/extension. Penn’s legislation places constraints on two RTE title families: Clinician Educators and Academic Clinicians. These are determined by each of their clinical schools (e.g. “Each school will set a cap for its Clinician-Educator track as a percentage of the Standing Faculty that aligns with its missions.”). Their caps are as follows (Note that “Academic Clinician” titles appear to be new.):

“School of Veterinary Medicine: The percentage of Clinician-Educators in the faculty may not exceed 50 percent of the number of Standing Faculty in the school.”

“School of Veterinary Medicine: The number of Academic Clinicians in the faculty may not exceed forty percent of the number of Standing Faculty in the school.”

Note that Colorado State University (ranked #3) is excluded from this table because their College of Veterinary Medicine and Biomedical Sciences is unique in offering multiple undergraduate majors (e.g. biomedical sciences, environmental public health, microbiology and immunology).