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

School of Occupational Therapy & Physical Therapy

Physical Therapy Program Guidelines
Revised May 2008 and Amended August & December 2009
to include Program Director’s criteria and Director of Clinical Education’s criteria

April 10, 2014 PSC approved deletion of Section VI

Physical Therapy Program
University of Puget Sound
Tacoma, Washington

Occupational Therapy Program Guidelines
Revised and Amended August, December 2009, April 2010
to include Program Director’s Criteria
Occupational Therapy Program
University of Puget Sound
Tacoma, Washington

Approved by the Professional Standards Committee May 7, 2010

Inter-program participation Revised August 2012 Approved by PSC September 26, 2012
Preamble to Faculty Evaluation Criteria for Occupational Therapy and Physical Therapy

Occupational therapy and physical therapy are dynamic health professions based on continually growing and evolving scientific bodies of knowledge. Students in physical therapy or occupational therapy must be prepared to integrate a strong foundation in principles of clinical practice, and a broad-based understanding of social and individual human factors with rigorous scientific analysis of evidence in order to promote best practice of the respective discipline. Health professionals must engage in self-evaluation and practice a lifelong habit of inquiry. Occupational therapy and physical therapy faculty members must demonstrate both an ability to remain current in their fields of expertise, and a strong understanding of the concepts of liberal education in order to lead students in such an educational endeavor. The liberal arts community, therefore, becomes an ideal setting for professional education, by creating a learning environment which provides not only applied science and definable professional skills, but broad exposure to such human factors as ethics, motivation, cultural diversity, and social integration which make therapeutic interventions truly effective on an individual human level. In this way, the physical therapy and occupational therapy programs represent the realization of a meaningful and socially responsive liberal arts education.

Graduates in occupational therapy or physical therapy must be prepared to take leadership roles in healthcare. Health care is by nature multidisciplinary, and most effectively delivered by an informed team of diverse professionals. The importance of understanding the role of various members of the healthcare team and the importance of being able to function as an effective collaborative health care provider cannot be understated. Hence, the physical therapy and the occupational therapy programs strongly value their association with each other which allows each program to provide students with rich opportunities to learn about collaboration in health care delivery.

Physical therapists are health care practitioners who are licensed to examine, evaluate, and test individuals with developmental and acquired physical impairments, functional limitations, disabilities, and other health or movement-related conditions in order to determine a diagnosis, prognosis, and plan of treatment intervention, and to assess the ongoing effects of intervention. Physical therapists also use published evidence to determine movement-related public health needs, then design and implement programs for health promotion related to those needs. Specific therapeutic exercise, manual therapy, and patient education are common forms of treatment choices among a wide variety of possible interventions. Most entry-level physical therapy programs, including our program at Puget Sound, lead to the Doctor of Physical Therapy degree. After graduation and a period of focused practice, physical therapists may seek specialty certification in areas such as neurologic rehabilitation, orthopedics, sports, geriatrics, pediatrics, and cardiopulmonary practice.

Occupational therapists are licensed health care providers who make therapeutic use of everyday life activities (occupations) with individuals or groups who have developmental or acquired disabilities, for the purpose of fostering participation in roles within various settings such as home, school, workplace and community. Based on evaluation and intervention planning, occupational therapy services are provided to those who have or are at risk for developing impairments in participation as a result of illness, disability, or activity limitation. Occupational therapy addresses the physical, cognitive, psychosocial, sensory, and other aspects of performance in a variety of contexts to support engagement in everyday life activities that affect health, well-being, and quality of life. Entry level occupational therapy programs, including our Puget Sound program, lead to an Occupational Therapy masters degree.

After graduation and a period of focused practice, occupational therapists may seek board certification in areas such as pediatrics, gerontology, physical disability and mental health practices.
Evaluation criteria specific to each program are written in accordance with the guidelines in the *Faculty Code*, the *Professional Standards Committee Faculty Evaluation Criteria and Procedures* and the requirements of the specific professional accreditation body relevant to each Program.
Procedures for the Evaluation Process for Faculty Members in the Occupational Therapy and Physical Therapy Departments

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 (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 timing of their submission
- Process and associated deadlines for inclusion of letters from colleagues outside the department
- Pattern and documentation of class visitation 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

Program-Specific Evaluation Criteria:

- Physical therapy faculty members will be evaluated using the Physical Therapy Program Guidelines only.
- Occupational therapy faculty members will be evaluated using the Occupational Therapy Program Guidelines only.
- Each respective program has the right to revise their program-specific guidelines independently and present those revisions to the Professional Standards Committee without input from the opposite program.
- Revision of the Preamble and Procedures require joint consensus of the OT and the PT programs.

Inter-program participation

The process for departmental faculty evaluation within the Occupational Therapy and Physical Therapy Programs 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 thorough evaluation of the prepared evalee file, teaching observations, careful review of the evalee’s department evaluation criteria, providing an independent evaluation letter and participating in the deliberation meeting.

• Observations of teaching will normally be conducted by all participating faculty unless concurrent teaching scheduling does not allow it. Usually each participant will have a minimum of two teaching observations.

• A minimum of one and maximum of two members of the inter-program department will participate in each faculty evaluation. The participant/s will be selected by faculty colleagues in the inter-program department. In evaluations involving a change of status, the inter-program department should be represented by at least one tenure line faculty member.

• Faculty members on sabbatical are not expected to participate in any aspect of the evaluation process, although they may choose to do so.
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 such as Occupational Therapy.

**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. 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 Programs of Physical Therapy and Occupational 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
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<th>APPENDIX I: CHARACTERISTICS OF SCHOLARSHIP (CAPTE DOCUMENT)</th>
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<td><strong>If the scholarly work</strong></td>
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| Contributes to the development or creation of new knowledge (Scholarship of Discovery) | • Primary empirical research  
• Historical research  
• Theory development  
• Methodological studies  
• Philosophical inquiry | • 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 | • Bibliographic citation of the accomplishments  
• Positive external assessment of the body of work |
| 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 (Scholarship of Integration) | • 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 | • 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 | • Bibliographic citation of the accomplishments  
• Positive external assessment of the body of work  
• Documentation of role in editorial/ review processes |
| Applies findings generated through the scholarship of integration or discovery to solve real problems in the professions, industry, government, and the community (Scholarship of Application/Practice) | • Development of clinical knowledge  
• Application of technical or research skills to address problems | • 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 | • 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 |
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<th>Contributions to the development of critically reflective knowledge about teaching and learning (Scholarship of Teaching)</th>
<th>Contributions to the identification, understanding and resolution of significant social, civic, or ethical problems and includes systematic data collection, analysis, interpretation and impact. (Scholarship of Engagement)</th>
<th>Bibliographic citation of the accomplishments</th>
<th>Documentation of scholarly role in creation of multi-authored evaluation reports</th>
<th>Positive external assessment of the body of work</th>
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<td>• Application of knowledge of the discipline or specialty applied in teaching-learning</td>
<td>• Collaborative partnerships involving faculty, community members and organizational representatives (community-based research or interventions)</td>
<td>• 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</td>
<td>• Peer-reviewed/invited publications or professional presentations related to development of community-based intervention, curriculum development</td>
<td>• Bibliographic citation of the accomplishments</td>
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<td>• Development of innovative teaching and evaluation methods</td>
<td>• Educational effectiveness studies such as those found in comprehensive program reports</td>
<td>• Successful applications of technology to teaching and learning</td>
<td>• Grant awards in support of community-based intervention</td>
<td>• Positive external assessment of the body of work</td>
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<td>• Program development and learning outcome evaluation</td>
<td>• Positive peer assessments of innovations in teaching</td>
<td>• Published textbooks or other learning aids</td>
<td>• 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</td>
<td>• Documentation of role in multi-authored products</td>
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<td>• Professional role modeling</td>
<td>• Peer-reviewed/invited professional presentations related to teaching and learning</td>
<td>• Grant awards in support of teaching and learning</td>
<td>• Grant awards in support of community-based intervention</td>
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Occupational Therapy Program
Evaluation Criteria for Faculty Advancement:
Explanation of Areas Evaluated and Requirements for Documentation of the Areas

Prologue: The Individual Plan

Each faculty member will write a plan that includes long-range goals and short-term objectives in all five evaluated areas. The plan for professional growth will be developed in consultation with the program director or designee in an individualized manner in order to take into account developments within the profession, plus departmental, curricular and University needs. The plan will become a part of the faculty member's file, so that colleagues who participate in evaluations can be clear about the expectations that have been articulated for the individual faculty member. Progress must be demonstrated from previous evaluations in order to receive a positive assessment. The faculty member should update the plan annually in consultation with the department chair or designee.

I. Teaching

The Occupational 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 accreditation requirements imposed by ACOTE, and requirements for professional licensure of graduates. Course content, assignments and expectations should reflect curricular goals.

Students in the Occupational Therapy Program, like those throughout the University, come with varied educational and life experiences. They have varied 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 instill in students an attitude which values continued lifelong learning.

Course structure, presentations, activities, and materials should be well organized. 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 in their overall academic development toward becoming effective clinicians. Clinical reasoning and judgment, based upon values and priorities, must be addressed as appropriate.
Graduates of the Occupational Therapy Program must be able to provide quality treatment to the clients/patients with whom they will work. The teaching clinics require a form of teaching that is distinctly different from classroom didactic teaching. Faculty in the teaching clinics must be able to facilitate the student's metamorphosis from classroom learner to independently thinking clinician. The faculty member must be able to provide guidance without providing answers. Feedback must be provided in a timely fashion. 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 opportunity to develop skill in clinical reasoning and judgment based upon priorities and values related to patient care. Respectful, ethical, psychologically and culturally sensitive patient care is the ultimate comprehensive examination for the students, and is the realization of the goals of a professional and liberal arts education.

Criteria for teaching excellence include, but may not be limited to, all of the following:

1. Demonstrates mastery of the field
2. Demonstrates excellent classroom presentations and management
3. Conveys enthusiasm for the discipline
4. Employs teaching methodology appropriate to the content and goals of the course and to the curricular goals
5. Establishes clear and measurable course requirements
6. Uses behavioral objectives appropriate to the goals of the course and the School curricula
7. Publishes course objectives
8. Carefully evaluates student work and makes appropriate distinctions between levels of achievement and how these impact individual readiness to progress to the next level of educational activity within the clinical preparation curriculum.
9. Provides feedback in a timely manner
10. Encourages students in lifelong attainment of knowledge and skills
11. Modifies course content/methodology based upon faculty/student feedback and developments within the discipline. (When courses are team taught, or primary responsibility for a given course lies with another faculty member, modifications of course content and/or methodology must be carried out in close consultation with the faculty member who bears primary responsibility for the course.)
12. Communicates with other faculty members to ensure concurrent and sequential organization of content within department.
13. Posts office hours and exhibits some flexibility in scheduling time in addition to regularly scheduled office hours when necessary
14. Promotes student independence
15. Exemplifies a role model for the profession.

II. Professional Development

Given the applied nature of the discipline of occupational therapy, professional development takes many forms. Differential expectations for tenure-line faculty and non-tenure-line faculty, where they exist, are delineated below. Scholars in the Occupational Therapy Program are committed to demonstrating their professional development through some combination of the following elements.
Continued or advanced study

Occupational therapy faculty members must be both producers of new information in our fields, and lifelong learners. Indeed, by Washington state law, occupational therapists must prove continuing competency by substantiating their engagement in continuous lifelong learning. Thus, attendance at workshops or courses which deal with new treatment techniques as they are elaborated, apprenticeships with master clinicians or expansion of clinical skills and knowledge is seen as relevant professional development. There are many such experiences for sale in the continuing education marketplace of varied quality. The program’s faculty evaluates the usefulness of these forms of study for meeting the individual faculty member's need for professional growth and the curricular needs of the school.

For tenure-line faculty hired in academic year 1991-1992 or later, the post-entry level doctoral degree shall be earned prior to the three-year review in order to be tenured and promoted beyond the Assistant Professor rank. For non-tenure-line faculty, academic study beyond the clinical entry level degree (since entry level preparation for clinical practice occurs at a variety of degree levels) is always considered to be an appropriate, though not the only choice for relevant and sufficient professional development.

Scholarly Activity

Our profession is applied sciences built on the social, biological and physical sciences. We value publication not only in our own professional journals but also in those of related fields. The clinical nature of the field of medicine creates a situation of dynamic change, and the vanguard of clinical trends in practice are often presented at professional conferences prior to, or in lieu of, publication. Presentations to professionals (clinicians and scholars) at the regional, national or international levels are also highly valued. In addition, scholarly writing in the form of editorials, software development, audio-visual materials, book reviews, laboratory manuals, textbooks or chapters in textbooks are also avenues that can be evaluated as indicative of professional development. Methods of formalized critical inquiry, such as the collection and analysis of clinical data, that test the tenets of the therapy professions or the efficacy of treatment techniques, are also highly valued forms of professional development.

In general, tenure-line faculty are expected to be initiators of the various types of scholarly activities mentioned above. According to the PSC interpretation (contained in Faculty Code 1997 Appendix B – Chapter 3 section 3-2), “instructors are expected to remain current in the relevant parts of the discipline and to keep abreast of those developments in the discipline which bear upon their teaching duties”, however, “they are not required to engage in scholarly research and writing.” Non-tenure-line faculty members hold the rank of instructor, thus those who choose to engage in these particular forms of professional development should be recognized for efforts that exceed the expectations of their rank.

Consultation and Practice
Providing consultation to physicians, corporations, school systems, hospitals, community agencies and other occupational therapy programs is one method of maintaining intellectual vitality, contributing to the larger purposes of scholarship, and positively representing the University as a place of learning. Consultation includes, but is not limited to, providing work site assessments, evaluating therapy education programs, and serving as a clinical research mentor.

The cornerstone of occupational therapy is providing patient care. Treating patients requires knowledge of appropriate evaluation and intervention strategies and techniques; an ability to educate patients regarding diagnoses, treatment, and prevention of illness; compassion and high regard for others, and a strong interest in lifelong learning. Faculty members responsible for treatment oriented courses serve as mentors and, therefore, must maintain their role in demonstrating excellence in patient care.

In general non-tenure-line faculty members act as clinical mentors and are expected to provide both indirect patient care, through supervision of students in clinical treatment sessions, and direct patient care through work in the community. This work may be paid or unpaid, but must serve to maintain and further clinical mastery. Tenure-line faculty who choose to maintain clinical practice may also consider this one avenue of professional development.

Participation in Professional Organizations

Our professional organization has the power to legislate certain aspects of practice and to influence educational policy. Activity in the American Occupational Therapy Association (AOTA), its respective commission or section on education, and the Washington Occupational Therapy Association are avenues for professional growth. Through leadership in these organizations we can impact the directions of growth of our profession and the priorities and regulations set by them for education in the field.

III. Advising

Advising responsibilities in the Occupational Therapy Program is identical for both tenure-line faculty and non-tenure-line faculty. Beginning in the second year of full time continuing service at the University, all faculty members in the program must show a readiness to advise, make themselves available to students at reasonable times, welcome students’ questions and concerns, and make appropriate referrals.

The specific advising assignment for any given individual may differ. Those who specifically advise graduate students need a clear understanding of University and departmental policies relative to graduate students, a clear understanding of the appropriate curriculum, and an understanding of University resources available to graduate students. Because students of occupational therapy are working toward assumption of a specific professional role, these advisors must have an understanding of the complexities of advising individuals regarding their ultimate integration into the practicing clinical community, and skill in mentoring that process.

A few faculty members act as undergraduate advisors for students who anticipate graduate work in either occupational therapy or physical therapy. These undergraduate advisors need a good
understanding of undergraduate policies and University services available to undergraduates, plus good familiarity with the structure of various majors and courses of academic study throughout the undergraduate institution. In addition, these advisors need to be well versed in OT and PT admissions policies (both specific to Puget Sound and generalizable to the broader range of potential professional preparation sites) and in the process of proper guidance for individuals who hope to successfully gain admission to a PT or OT program. When admission to a PT or OT program is no longer the goal for whatever reason, it is necessary for these advisors to be able to assist in the exploration of acceptable alternatives, and in the process of transitioning to an alternative course of study.

At times the advising role of certain faculty members involves advising potential transfer students who anticipate application to the program after graduation from institutions other than Puget Sound. These advisors need clear understanding of Puget Sound OT admissions policies, plus policies and procedures for evaluation of transfer credit. When advising potential transfer 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.

IV. University Service

Faculty members in the Occupational Therapy Program are expected to take part in some form of University service, departmental and University governance, co-curricular activities, activities that contribute to a stimulating educational atmosphere, and/or activities that convey the nature and purpose of the University to people outside of the University. In addition, faculty may serve the university through their work in 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 occupational therapy faculty members with an invaluable opportunity to maintain the vitality of the relationship between the School of Occupational Therapy and Physical Therapy and the University as a whole.

In general, the expectation for University service for non-tenure-line faculty is limited to the departmental level, and non-tenure-line faculty who exceed that expectation by significant service at the University level should be recognized for exceeding the expectations of their rank. Tenure-line faculty members are expected to serve both at the departmental level and at the University level.

V. Community Service

According to the 1999 revision of University Evaluation Criteria, “consideration should be given to service outside the university that is related to professional interest and expertise, and which enhances a person’s value to the University, or enriches teaching.” For the purpose of occupational therapy and 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.
The following are evaluation criteria for the Occupational Therapy Program Director. They specifically outline the administrative duties of the position, which are in addition to requirements for teaching, scholarship, advising, university service and community service.

The Director is responsible for, or will delegate, the following activities, and ensure their completion at the criterion specified:

- Effectively managing the Occupational Therapy Program Strategic Plan - creating, implementing, updating
- Effectively setting the overall tone and ethos of the working and learning community in the Occupational Therapy Program
- Accreditation and curriculum review: effectively overseeing the ACOTE re-accreditation process (annual data report, biennial update report, cyclical self-study and visit) and managing the university curriculum review and university re-accreditation report in a timely fashion.
- Curriculum: hiring of regular faculty (with colleagues and Deans), planning adjunct coverage including hiring and orientation; scheduling courses (with Director of PT), managing the implementation of and changes to the curriculum; ensuring quality control, all to a timely and effective degree
- Recruitment: effectively supervising the part-time recruitment coordinator; arranging attendance at in-state and out-of-state graduate fairs and information events in a timely fashion; effectively communicating with academic advisors at community colleges and four-year institutions about the discipline of occupational therapy and about the program at Puget Sound; effectively overseeing and keeping current recruitment materials including the web page, brochures and other mailings; communicating effectively with prospective students.
- Admissions process: overseeing and keeping current admissions forms and protocols; overseeing admissions decision making and process; communicating with applicants before and after acceptance decisions, all effectively and in a timely fashion.
- Oversees offers of financial aid via fellowships, scholarships and "clinical serviceship" program to newly admitted students effectively and in a timely fashion
- Effectively serves as initial advisor to incoming students, includes planning and overseeing orientation
- Alumni Relations: communicating departmental updates via annual newsletter; facilitation of connections among prospective students, current students and alumni; providing clinical research information or sources to alumni who inquire, all effectively and in a timely fashion
- Faculty evaluation and support: serving as head officer in tenure-line and clinical line faculty evaluations; evaluating visiting faculty annually; monitoring adjunct faculty student evaluations; collaborating with colleagues on their own professional development goals; faculty mentoring, all effectively and in a timely fashion
- Organizing faculty meeting and retreat agendas and leading the meetings; attending campus chair meetings, effectively and in a timely fashion
- Staff supervision: Sharing supervision of School staff with PT director; supervising the OT Academic Fieldwork Coordinator, effectively and in a timely fashion
- Fiscal management: creating annual budget; monitoring departmental accounts composing reports and requests for renewal or funding changes, accurately, effectively and in a timely fashion
- Maintaining facility oversight: building safety, access, security, grounds, effectively and in a timely fashion
- Attending national program director meetings and staying posted on developments (recruitment, curriculum, accreditation standards, certification exam) in the field that will influence all of the above, communicating them effectively to colleagues and students
- Communicating effectively to fieldwork supervisors and other practitioners with information on enrollments, local, state and national employment profiles
- Effectively overseeing outcome measurement for the program
- Effectively communicating with numerous parties throughout campus (such as the Dean of Students, Office of Academic Advising, etc.) as needed
- Effectively promoting interdepartmental collaboration between the Occupational Therapy Program and other departments in order to foster the learning environment for students in the programs.

Note: The amount of time spent on each of these areas will depend on the demands of the academic year. For example, for years in which program re-accreditation occurs, more time will be dedicated to managing the strategic plan and accreditation review.