<table>
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<th>Major Focus *</th>
<th>Knowledge Development and Integration-Investigator/Scholar (MD, DDS, DNP or PhD)</th>
<th>Pedagogy/ Educational Leadership and Scholarship (MD, DDS, DNP or PhD)</th>
<th>Applied Healthcare and Public Health Sciences (MD, DDS, Dr PH, DNP or PhD)</th>
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</table>
| Description   | The scholarship of knowledge development consists of discovery and the generation of new knowledge derived from traditional inquiry methodologies. It also may include analysis, synthesis and novel applications of existing observations, as well as positioning knowledge within larger, interdisciplinary contexts. | The scholarship of education consists of promoting learning through effective application of the sciences of teaching and learning, leadership, and instructional design. This area of scholarship emphasizes the interdependence of theory, research, and practice in three related domains:  
  - Direct involvement in the process of promoting learning  
  - Support of infrastructure needed for learning  
  - Development of products used by others in learning | The scholarship of application consists of the interaction between knowledge and its practical use, shifting theory to practice and practice to theory. Translation of evidence to practice are examples of the scholarship of applied health sciences and public health sciences. This emphasizes the scholarly application of knowledge in three domains:  
  - Providing care  
  - Developing/implementing clinical programs  
  - Developing/implementing clinical programs used by others |
|               | The expectation for faculty with this area of focus will be a major investment of time in supported investigative work, which may include basic, translational, population based, clinical and educational research. Technology development and membership in multidisciplinary investigational teams with would also be appropriate. Research may be in any discipline related to health sciences, including but not limited to:  
  - Laboratory research  
  - Clinical and translational research  
  - Population based research  
  - Health services/Policy/Economics  
  - Outcomes research  
  - Biostatistics, Bioinformatics  
  - Novel applications of existing technologies or treatments  
  - Multidisciplinary research team membership with a critical, unique role  
  - Pedagogical research | The expectation for faculty with this area of focus will be a major investment of time in teaching, mentoring, evaluation, learning assessment; course or curriculum leadership; and the development of enduring educational materials. Examples, by domain, include:  
  - Involvement in the process of learning  
    - Lecturing,  
    - Facilitating small groups,  
    - Conducting laboratory tutorials,  
    - Precepting students, conducting teaching rounds,  
    - Mentoring trainees, serving on thesis committees,  
    - Preparing and administering knowledge or performance assessments  
  - Support of the infrastructure needed for learning  
    - Course development and leadership;  
    - Curricular development and leadership;  
    - Course, clerkship, program, or fellowship leadership  
    - Leadership on education governance committees and task forces  
    - Involvement on committees that set curriculum guidelines/standards  
    - Development of educational products used for learning  
  - Authorship (both paper and electronic) of textbooks, tutorials, problem sets, teaching cases, simulation scenarios, or image libraries | The expectation for faculty with this area of focus is superb performance as clinicians or practitioners within their discipline. Almost always faculty will also be expected to demonstrate excellence in selected educational activity as well, with an emphasis on excellence in teaching (i.e., the first of three domains in pedagogy track). Examples, by domain within this track, include:  
  - Providing Care  
    - Excellent reputation as an authority in a clinical or public health specialty and expert clinician or public health practitioner  
    - Leadership in clinical or public health professional societies or election to distinguished societies  
  - Developing/Implementing Clinical Programs  
    - Recognition by peers of clinical or public health leadership by participation in guideline writing, clinical quality assurance or development and application of clinical or public health interventions  
    - Participation in projects to monitor clinical or public health outcomes  
    - Participation in quality improvement programs  
    - Clinical or public health program development and leadership  
  - Developing/Implementing Clinical Programs Used by Others  
    - Clinical or public health reports, textbook chapters  
    - Providing care, running programs used by others |
### Knowledge Development and Integration-Investigator/Scholar (MD, DDS, DNP or PhD)

The value of individual faculty accomplishments will be based on the quantity and quality of the particular form of scholarship. Evidence of quantity will tend to focus on the number of products documented. Evidence of quality will tend to be based on peer review within meaningful communities of practice (e.g., editorial boards, funding study sections). Examples include:

- Publication of research findings, that contribute new observations or that synthesize existing knowledge in a way that enhances the discipline.
- Research presentations at national meetings, national recognition of leadership in a discipline by virtue of invited presentations.
- Research support from federal, foundation or industry derived or primarily in a collaborative role as part of a research team.
- Invited professorships, and lectures
- Development of innovative public health or clinical technology and/or interventions/treatments
- Membership on multidisciplinary or collaborative research teams, in which the faculty member’s contribution is substantive and recognizable.
- Membership on research advisory panels.
- Membership on editorial boards

### Pedagogy/ Educational Leadership and Scholarship (MD, DDS, DNP or PhD)

The value of individual faculty accomplishments within the three domains of the educator area of focus varies according to the degree of quantity, quality, and scholarship documented in submitted evidence of the accomplishment.

Evidence of quantity tends to be countable units such as contact hours, number of learners, numbers of pages, etc.

Evidence of quality tends to be based on learner or peer perceptions of process (i.e., learner ratings of teaching) or the degree to which objectives were achieved (i.e., student test scores). Evidence of scholarship is based on peer review and subsequent inclusion of the methods and/or outputs into a ‘shared understanding’ within meaningful communities of practice. These communities can be local (e.g., NYPH residency program directors), regional (e.g., geographically based subgroups within a professional society), national or international (interest group within a professional society).

While quantity and quality is manifest in all educational accomplishments, scholarship is usually manifest in those accomplishments where faculty have explicitly presented a product in a form that can be peer reviewed and made beneficial to others within the community. Examples include:

- Presentation of work at professional meetings.
- Development of teaching materials in both paper, electronic formats, and simulation technologies.
- New curricular offerings, and written syllabi.
- Development of educational methodology, educational assessment tools.
- Descriptions of educational innovations.
- Involvement on local or national committees that set curriculum or other educational guidelines/standards.

### Applied Healthcare and Public Health Sciences (MD, DDS, Dr PH, DNP or PhD)

The value of individual faculty accomplishments will be based on the faculty member’s recognition as an expert within a clinical or public health field. Evidence will tend to consist of the quantity and quality of specific documented events or products, with emphasis given to those that represent a form of scholarship (i.e., involve some form of peer review). Examples include:

- Recognition as an expert clinician.
- Invitations to give lectures, demonstrations, projects, training sessions.
- Case presentations.
- Participation in quality improvement/ practice guideline development.
- Clinical or public health evaluations or policy development.
- Leadership in national societies of clinical or public health discipline.
- Review publications related to clinical or public health specialty.
- Editorial board membership of discipline specific publications.
- Awards related to clinical or public health expertise.
- Influence on innovations in clinical or public health practice.
- Notable contributions of especial importance within CUMC related to the clinical or public health discipline.
### Metrics for Evaluation

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<tr>
<td>● Number of publications in peer reviewed journals of original research</td>
<td>● Educational innovations adopted locally, regionally or nationally</td>
<td>● Recognition as an expert by invited lectures, demonstration, projects, training sessions</td>
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<tr>
<td>● Membership on national and international committees for review of research in area of expertise</td>
<td>● Trainee/peer evaluations</td>
<td>● Case presentations, invited lectures in discipline</td>
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<tr>
<td>● Number and impact of presentations to academic institutions and professional societies.</td>
<td>● Participation/leadership in educational societies</td>
<td>● Participation in quality improvement/ practice guideline development</td>
</tr>
<tr>
<td>● Research funding record.</td>
<td>● Success of educational leadership measured by the success of new programs according to program goals.</td>
<td>● Clinical or public health evaluations or policy development</td>
</tr>
<tr>
<td>● Invited professorships, and lectures</td>
<td>● Participation in educational training programs</td>
<td>● Leadership in national societies of clinical or public health discipline</td>
</tr>
<tr>
<td>● Institutional research committee membership</td>
<td>● Participation in national educational leadership societies</td>
<td>● Publications related to clinical or public health discipline</td>
</tr>
<tr>
<td>● Evidence of participation in multidisciplinary or team based research</td>
<td>● Awards for teaching or educational leadership</td>
<td>● Innovative public health or clinical technology and/or interventions/treatments</td>
</tr>
<tr>
<td>● Editorial board membership</td>
<td>● Publications related to educational methods/assessment/policies</td>
<td>● Editorial board membership of discipline specific publications</td>
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<tr>
<td>● Special panel membership</td>
<td>● Educational products (print, electronic, simulation technologies)</td>
<td>● Awards related to clinical or public health expertise</td>
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<td></td>
<td>● Notable educational contributions of especial importance within CUMC</td>
<td>● influence on innovations in clinical or public health practice</td>
</tr>
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<td></td>
<td></td>
<td>● Notable clinical or public health contributions of especial importance within CUMC</td>
</tr>
</tbody>
</table>

*It is expected that most faculty will have a single major academic focus with accompanying evidence of competency in the appropriate type and quantity of teaching. However, there will be instances in which faculty make high quality substantive contributions in two areas of focus. It is expected that their contributions will be of excellent quality though perhaps quantitatively reduced in each focus area.*

**Scholarly products provide a sample of the kinds of materials which would be evidence of strength in a particular area of focus. A faculty member need not have evidence of all examples, but should provide evidence of excellence in those selected.**

***Educational contributions as described in the section Educational Portfolio are required for all faculty, through the type and quantity will vary with the academic focus.***