

# ***Connections***

## **Faculty (FA) Standard**

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# FA-2

**FA-2. A medical education program must have a sufficient number of faculty members in the subjects basic to medicine and in the clinical disciplines to meet the needs and missions of the program.**

In determining the number of faculty needed for the medical education program, the program should consider the other responsibilities that its faculty may have in other academic programs and in patient care activities required to conduct meaningful clinical teaching across the continuum of medical education.

## DATABASE QUESTIONS

Complete the following tables for the indicated basic science and clinical departments. See the instructions for completing the database for the definition of full-time faculty.

### *a. Basic Science Departments*

#### *Faculty Numbers*

Department*	Full-Time Faculty					Part-Time Faculty
	Professor	Associate Professor	Assistant Professor	Instructor/Other	Vacant	
Anatomy						
Biochemistry						
Microbiology						
Pathology**						
Pharmacology						
Physiology						
Other (specify)						

\*Replace indicated department names with school-specific names, as needed.

\*\*Report Pathology data here only if the school reported Pathology as a basic science department in the faculty counts for Part A of this database section.

#### *Teaching Responsibilities*

Department**	Number of Courses Taught per Year*					
	Medical Students	Graduate Students	Dental Students	Nursing Students	Allied Health Students	Undergraduate (Baccalaureate)

						Students
Anatomy						
Biochemistry						
Microbiology						
Pathology**						
Pharmacology						
Physiology						
Other (specify)						

\*List only courses for which departmental faculty have primary and ongoing responsibility (e.g., for reporting final grades to the registrar)

\*\* Replace indicated department names with names used at the school, as needed.

\*\*\*Report Pathology data here only if the school reported Pathology as a basic science department in the faculty counts for Part A of this database section.

*b. Clinical Departments*

*Faculty Numbers*

Department*	<i>Full-Time Faculty</i>					Part-Time	Volunteer
	Professor	Associate Professor	Assistant Professor	Instructor/Other	Vacant		
Anesthesiology							
Dermatology							
Family Medicine							
Internal Medicine							
Neurology							
Obstetrics/Gynecology							
Ophthalmology							
Orthopedics							
Otolaryngology							
Pathology**							
Pediatrics							
Physical Medicine							
Psychiatry							
Pub Hlth/Prev Med**							
Radiology							
Surgery							
Urology							
Other (specify)							

\*Replace indicated department names with names used at the school, as needed.

\*\*Report data for these departments here only if the school reported them as clinical departments in the faculty counts for Part A of this database section.

*Teaching Responsibilities*

Department**	<i>Number of Courses/Clerkship Rotations Taught per Year*</i>					
	Medical Students from this Medical School	Dental Students	Nursing Students	Allied Health Students	Medical Students from Other Schools	Other Students (specify)
Family Medicine						
Internal Medicine						
Neurology						
Obstetrics/ Gynecology						
Pathology**						
Pediatrics						
Psychiatry						
Surgery						
Other (specify)						

\*List only courses or clerkships/clerkship rotations (for Canadian medical schools) for which departmental faculty have primary and ongoing responsibility (e.g., for reporting final grades to the registrar)

\*\*Replace indicated department names with names used at the school, as needed.

\*\*\*Report Pathology data here only if the school reported Pathology as a clinical department in the faculty counts for Part A of this database section.

- c. List the courses or clerkship rotations where the medical school has had to make use of part-time and volunteer faculty, graduate students, or residents in medical student education to compensate for the decreased availability of full-time faculty members to participate in teaching.
- d. List all faculty with substantial teaching responsibilities for courses or clerkships required for graduation who are on site for fewer than three months during an academic year.
- e. Provide the amount of protected time that course and clerkship directors and other individuals with major leadership responsibilities for the educational program have for the noted activity (i.e., list the specific percent of their salaries covered by the medical school based on their roles in the educational program).
  - i. Percent protected time for preclinical course directors (include range if not consistent)

- ii. Percent protected time for clerkship directors (include range if not consistent)
- iii. Percent protected time for the chair of the curriculum committee (if not an administrator)

*See also Part A for this section, and information for standard IS-12 in Section II: Educational Program for the M.D. Degree and standard ER-3 in Section V: Educational Resources.*

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### **SELF-STUDY QUESTIONS**

Assess the appropriateness of the current size, qualifications, and mix of faculty for the attainment of the medical education program's goals.

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### **SURVEY REPORT GUIDE**

Summarize trends in the total number of basic science and clinical faculty members since the previous survey visit. Evaluate whether the current size and composition of the faculty are appropriate for the educational and other missions of the medical school and whether the educational program is appropriately staffed. Indicate whether any decrease in the number of faculty is anticipated in the near future (e.g., through a significant number of retirements).

**Note:** The survey team report will have, as an appendices, tables showing the current numbers of full-time, part-time, and volunteer faculty members in basic science and clinical disciplines, by department and total, and the table of teaching responsibilities by department (from this Standard- FA-2) , provided by the school.

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# FA-3

**FA-3. A person appointed to a faculty position in a medical education program must have demonstrated achievements commensurate with his or her academic rank.**

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## **DATABASE QUESTIONS**

- a. Provide a brief description of each faculty employment track.
  - b. Briefly summarize, by employment track, the institution-wide (medical school or parent university) policies and procedures for the appointment, renewal of appointment, promotion, granting of tenure (if applicable), and dismissal for all faculty members. Include a copy of the written appointment, re-appointment, tenure and promotion, and dismissal guidelines or the Web site URL at which these policies are posted.
  - c. Explain any variation in the policies across tracks or in the application of policies across departments.
  - d. Describe how faculty members are informed about the various tracks and how they are assigned to a specific track. Note if a faculty member is able to change tracks at some point in his or her employment.
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## **SELF-STUDY QUESTIONS**

Assess the appropriateness of the current size, qualifications, and mix of faculty for the attainment of the medical education program's goals.

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## **SURVEY REPORT GUIDE**

Evaluate whether the current size and composition of the faculty are appropriate for the educational and other missions of the medical school and whether the educational program is appropriately staffed.

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# FA-4

**FA-4. A member of the faculty in a medical education program must have the capability and continued commitment to be an effective teacher.**

Effective teaching requires knowledge of the discipline and an understanding of curricular design and development, curricular evaluation, and methods of instruction. Faculty members involved in teaching, course planning, and curricular evaluation should possess or have ready access to expertise in teaching methods, curricular development, program evaluation, and medical student assessment. Such expertise may be supplied by an office of medical education or by faculty and staff members with backgrounds in educational science.

Faculty involved in the development and implementation of a course, clerkship rotation, or larger curricular unit should be able to design the learning activities and corresponding student assessment and program evaluation methods in a manner consistent with sound educational principles and the institution's stated educational objectives.

A community physician appointed to the faculty of a medical education program, on a part-time basis or as a volunteer, should be an effective teacher, serve as a role model for medical students, and provide insight into contemporary methods of providing patient care.

Among the types of evidence indicating compliance with this standard are the following:

- Documented participation of the faculty member in professional development activities related specifically to teaching and assessment.
- Attendance at regional or national meetings on educational affairs.
- Evidence that the faculty member's knowledge of his or her discipline is current.

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## DATABASE QUESTIONS

- a. Describe any centralized or departmental activities to assist faculty members in improving their skills in teaching and assessing medical students. For the formal programs that were offered, provide the number of faculty who participated in such activities during the most recently completed academic year and the sources of funding available to support such activities.
- b. Describe the elements of faculty teaching skills (e.g., content mastery, ability to lecture or lead a small group, professionalism) that are formally evaluated by medical students. Summarize the methods used by departments or the medical school to evaluate individual faculty teaching efforts (e.g., student course

evaluations, peer review, focus group meetings with students, etc.). Describe the means by which the results of such evaluations are communicated to faculty.

- c. Describe the means by which any problems identified by such evaluations are addressed. Describe the resources that are available to support the remediation of deficits in faculty teaching skills.
- d. Describe any centralized or departmental activities to assist faculty members in enhancing their skills in research and grant procurement. Include the number of faculty who participated in such activities during the most recently completed academic year and the sources of funding available to support such activities.

*See also information for standard ED-30 in Section II: Educational Program for the M.D. Degree and standard [FA-5](#) in this section.*

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### **SELF-STUDY QUESTIONS**

Describe and evaluate the availability of opportunities for both new and experienced faculty members (full-time, part-time, and volunteer) to improve their skills in teaching and assessment. Is institutional or departmental-level assistance, such as training sessions from education specialists, readily available? Comment on the level of faculty participation in such programs

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### **SURVEY REPORT GUIDE**

Describe whether and how the teaching skills of faculty members are evaluated by medical students and/or by peers. Note whether a formal evaluation of faculty members exists as part of the course and clerkship review process and whether faculty members are notified about the results of these evaluations.

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- c. Describe the institution's expectations for faculty scholarship. Is documentation of scholarship required for retention and promotion of all or some full-time faculty?

***See also information for standard IS-13 in Section I: Institutional Setting and Part A, item (e.) in Section V: Educational Resources.***

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### **SELF-STUDY QUESTIONS**

Do faculty engage in scholarly activities and receive appropriate support and mentorship related to scholarship? Are formal institutional programs available to support faculty research?

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### **SURVEY REPORT GUIDE**

Report on the extent to which the faculty maintains a commitment to scholarly productivity. Comment on the extent to which scholarship is valued and fostered by the medical school and the extent of mentoring programs to support the development of faculty skills in this area.

**Note:** The survey team report will have, as an appendix, the table on faculty scholarly productivity (from this Standard- FA-5 in the database), provided by the school.

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# FA-6

**FA-6. The faculty of a medical education program must make decisions regarding the admission, promotion, and graduation of its medical students and must provide academic and career counseling for medical students.**

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## DATABASE QUESTIONS

- a. List in the table below all major permanent committees of the medical school. Note whether each committee is charged with making recommendations (R), empowered to take action (A), or both (B).

Committee	Number of Members	Appointed or Elected by:	Reports to:	Authority (R/A/B)

- b. Describe the means by which the dean obtains input from department heads and faculty members regarding institutional planning and decision-making. Note how often the dean meets with department heads, members of the dean's staff, and other medical school leadership groups (e.g., Executive Committee, Faculty Council).

*See also information for standard IS-4 in Section I: Institutional Setting and for standards MS-4, MS-18, MS-19, and MS-33 in Section III: Medical Students.*

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## SELF-STUDY QUESTIONS

Evaluate the effectiveness of mechanisms for organizational decision-making. Are necessary decisions made in a timely and efficient manner with appropriate input from faculty and other concerned parties? Describe and assess the relative roles of committees of the faculty, department heads, and medical school administrators in institutional decision-making.

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## **SURVEY REPORT GUIDE**

Evaluate, in general, the medical school committee structure in terms of its functionality and the level of faculty participation. Comment, in general, on the sufficiency of individual faculty members' input into organizational decision-making, either through a committee structure or directly (e.g., through individual access to the dean or access at general faculty meetings).

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# FA-7

**FA-7. There must be clear policies in place at a medical education program for faculty appointment, renewal of appointment, promotion, granting of tenure, and dismissal that involve the faculty, the appropriate department heads, and the dean.**

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## **DATABASE QUESTIONS**

- a. Provide a brief description of each faculty employment track.
  - b. Briefly summarize, by employment track, the institution-wide (medical school or parent university) policies and procedures for the appointment, renewal of appointment, promotion, granting of tenure (if applicable), and dismissal for all faculty members. Include a copy of the written appointment, re-appointment, tenure and promotion, and dismissal guidelines or the Web site URL at which these policies are posted.
  - c. Explain any variation in the policies across tracks or in the application of policies across departments.
  - d. Describe how faculty members are informed about the various tracks and how they are assigned to a specific track. Note if a faculty member is able to change tracks at some point in his or her employment.
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## **SELF-STUDY QUESTIONS**

Evaluate the system for the appointment, renewal of appointment, promotion, granting of tenure, and dismissal of faculty members. Are the policies clear, widely understood, and followed? Are faculty aware what is required for retention and advancement, including participation in education?

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## **SURVEY REPORT GUIDE**

Indicate whether the policies for faculty appointment, renewal of appointment, promotion, granting of tenure, and dismissal are widely disseminated and understood by the faculty. If there are separate faculty tracks, note how well the policies related to these tracks are understood by the faculty.

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# FA-8

**FA-8. A medical education program should have policies in place that deal with circumstances in which the private interests of a faculty or staff member may be in conflict with his or her official institutional or programmatic responsibilities.**

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## DATABASE QUESTIONS

- a. Check each area in which the medical school or the university has a faculty conflict of interest policy. Include a copy of each policy in the Appendix or provide the Web site URL at which the policy can be viewed.

	Conflict of interest in research
	Conflict of private interests of faculty/staff with academic responsibilities
	Conflict of interest in commercial support of continuing medical education

- b. Summarize the institutional efforts or programs that address research ethics, scientific misconduct, conflicts of interest, and human subjects protection. Is participation in such programs required or optional for faculty?
- c. Describe the means by which adherence to the conflict of interest policies is monitored.
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## SELF-STUDY QUESTIONS

Assess the adequacy of institutional and departmental conflict of interest policies relating to faculty members' performance of their academic responsibilities.

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## SURVEY REPORT GUIDE

Comment on the presence of a medical school or parent university policy on faculty conflicts of interest.

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# FA-9

**FA-9. A medical education program should provide each faculty member with written information about his or her term of appointment, responsibilities, lines of communication, privileges and benefits, and, if relevant, the policy on practice earnings.**

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## **DATABASE QUESTIONS**

- a. Describe how faculty members are notified about the following items:
    - i. Term and conditions of employment
    - ii. Benefits
    - iii. Compensation, including policies on practice earnings
  - b. Describe the means by which and the times at which newly hired and existing faculty members are informed about their responsibilities in teaching, research, and, where appropriate, patient care.
  - c. If there is a faculty handbook, include a copy or provide the Web site URL at which the handbook can be viewed.
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## **SELF-STUDY QUESTIONS**

Describe the extent of feedback provided to faculty members about their academic performance and progress toward promotion and/or retention. Are faculty members regularly informed about their job responsibilities and the expectations that they must meet for promotion and/or retention? Is education included among the criteria for advancement and promotion?

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## **SURVEY REPORT GUIDE**

Evaluate whether faculty members in all tracks receive formal notification about their terms of appointment and their responsibilities in teaching and other areas. Note whether faculty members appeared aware of the availability of this information.

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# FA-10

**FA-10. A faculty member of a medical education program should receive regularly scheduled feedback on his or her academic performance and progress toward promotion and, when applicable, tenure.**

Feedback should be provided by departmental leadership or, if relevant, by other programmatic or institutional leadership.

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## DATABASE QUESTIONS

- a. Briefly describe any medical school or university policies ensuring that faculty members receive periodic feedback on their performance and their progress toward promotion and, if relevant, tenure.
- b. Describe the times at which and the means by which faculty members receive formal feedback from departmental leaders (i.e., the chair or division or section chief) on their academic performance and their progress toward promotion and, if relevant, tenure.

*See also information for standard [FA-4](#) and [FA-5](#).*

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## SELF-STUDY QUESTIONS

Describe the extent of feedback provided to faculty members about their academic performance and progress toward promotion and/or retention. Are faculty members regularly informed about their job responsibilities and the expectations that they must meet for promotion and/or retention? Is education included among the criteria for advancement and promotion?

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## SURVEY REPORT GUIDE

Describe the system for providing all faculty members with systematic feedback about their performance and their progress toward promotion. Note the presence of medical school or university policies that require that such feedback be given to faculty members.

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# FA-11

**FA-11. A medical education program must provide opportunities for professional development to each faculty member to enhance his or her skills and leadership abilities in education and research.**

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## **DATABASE QUESTIONS**

- a. Describe any centralized or departmental activities to assist faculty members in improving their skills in teaching and assessing medical students. For the formal programs that were offered, provide the number of faculty who participated in such activities during the most recently completed academic year and the sources of funding available to support such activities.
- b. Describe the elements of faculty teaching skills (e.g., content mastery, ability to lecture or lead a small group, professionalism) that are formally evaluated by medical students. Summarize the methods used by departments or the medical school to evaluate individual faculty teaching efforts (e.g., student course evaluations, peer review, focus group meetings with students, etc.). Describe the means by which the results of such evaluations are communicated to faculty.
- c. Describe the means by which any problems identified by such evaluations are addressed. Describe the resources that are available to support the remediation of deficits in faculty teaching skills.
- d. Describe any centralized or departmental activities to assist faculty members in enhancing their skills in research and grant procurement. Include the number of faculty who participated in such activities during the most recently completed academic year and the sources of funding available to support such activities.

*See also information for standard ED-30 in Section II: Educational Program for the M.D. Degree and standard [FA-5](#) in this section.*

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## **SELF-STUDY QUESTIONS**

Discuss the extent to which education is valued in the institution. How are the degree and quality of participation in medical student education factored into decisions about faculty retention and promotion?

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## **SURVEY REPORT GUIDE**

Describe any mechanisms that exist to remedy identified problems with faculty teaching or supervision skills. Note both informal and formal programs that are in place to assist faculty members and, if relevant, residents and others who teach medical students, in improving their teaching and assessment skills. Indicate whether the school provides faculty development programs focused on other areas (e.g., research enhancement, grant acquisition) and whether these programs are regularly utilized by faculty, residents, and others.

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# FA-12

**FA-12. At a medical education program, the dean and a committee of the faculty should determine policies for the program.**

The committee that, with the dean, determines policies for the medical education program typically consists of the heads of major departments and may be organized in any manner that brings reasonable and appropriate faculty influence into the governance and policymaking processes of the program.

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## DATABASE QUESTIONS

- a. List in the table below all major permanent committees of the medical school. Note whether each committee is charged with making recommendations (R), empowered to take action (A), or both (B).

Committee	Number of Members	Appointed or Elected by:	Reports to:	Authority (R/A/B)

- b. Describe the means by which the dean obtains input from department heads and faculty members regarding institutional planning and decision-making. Note how often the dean meets with department heads, members of the dean's staff, and other medical school leadership groups (e.g., Executive Committee, Faculty Council).

*See also information for standard IS-4 in Section I: Institutional Setting and for standards MS-4, MS-18, MS-19, and MS-33 in Section III: Medical Students.*

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## SELF-STUDY QUESTIONS

Evaluate the effectiveness of mechanisms for organizational decision-making. Are necessary decisions made in a timely and efficient manner with appropriate input from faculty and other concerned parties?

## SURVEY REPORT GUIDE

Individual committees (e.g., curriculum, admissions) should be described in the relevant sections of the report. Note the mechanisms in place by which the dean obtains input from department heads and faculty leadership groups.

**Note:** The survey team report will have, as an appendix, the table (from this Standard FA-12, in the database) showing the major medical school faculty committees, provided by the school.

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# FA-13

**FA-13. A medical education program should ensure that there are mechanisms in place for direct faculty involvement in decisions related to the program.**

Important areas in which direct faculty involvement is expected include admissions, curriculum development and evaluation, and student promotions. Faculty members also should be involved in decisions about any other mission-critical areas. Strategies for assuring direct faculty participation may include peer selection or other mechanisms that bring a broad faculty perspective to the decision-making process, independent of departmental or central administration points of view. The quality of an educational program may be enhanced by the participation of volunteer faculty in faculty governance, especially in defining educational goals and objectives.

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## DATABASE QUESTIONS

- a. List in the table below all major permanent committees of the medical school. Note whether each committee is charged with making recommendations (R), empowered to take action (A), or both (B).

Committee	Number of Members	Appointed or Elected by:	Reports to:	Authority (R/A/B)

- b. Describe the means by which the dean obtains input from department heads and faculty members regarding institutional planning and decision-making. Note how often the dean meets with department heads, members of the dean's staff, and other medical school leadership groups (e.g., Executive Committee, Faculty Council).

*See also information for standard IS-4 in Section I: Institutional Setting and for standards MS-4, MS-18, MS-19, and MS-33 in Section III: Medical Students.*

## **SELF-STUDY QUESTIONS**

Describe and assess the relative roles of committees of the faculty, department heads, and medical school administrators in institutional decision-making.

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## **SURVEY REPORT GUIDE**

Comment, in general, on the sufficiency of individual faculty members' input into organizational decision-making, either through a committee structure or directly (e.g., through individual access to the dean or access at general faculty meetings).

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# FA-14

**FA-14. A medical education program must establish mechanisms to provide all faculty members with the opportunity to participate in the discussion and establishment of policies and procedures for the program, as appropriate.**

Participation by all faculty members in the discussion and establishment of policies and procedures for the program may be facilitated, for example, by:

- Ease of access to committee meeting agendas and minutes;
- Program-wide dissemination of draft policies and procedures for faculty members' review;
- Provision of opportunities for faculty members to comment on draft policies and procedures to program leaders prior to their finalization and implementation; or
- Faculty meetings.

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## DATABASE QUESTIONS

- a. List the number and type of general faculty meetings held during the past academic year. Indicate whether these meetings were in person or "virtual" (e.g., Web cast) meetings. Describe the major agenda items for these meetings and the means by which faculty were made aware of meeting agendas.
- b. Describe the means by which faculty members are informed about upcoming meetings. Describe the means by which faculty who are not present learn about the discussions at and/or outcomes of these general faculty meetings (e.g., through the circulation of meeting minutes).
- c. Describe how copies of draft policies and procedures are distributed for faculty comment. Provide examples of opportunities made available during the past academic year for faculty members to comment on such drafts.
- d. In addition to meetings, describe any other mechanisms (e.g., written or electronic communications) that exist at the medical school to inform faculty members about medical school matters.

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## SELF-STUDY QUESTIONS

Assess the effectiveness of the methods used to communicate with and among the faculty. Do faculty perceive themselves to be well-informed about important issues at the institution? Do faculty believe that they have sufficient opportunities to make themselves heard?

## **SURVEY REPORT GUIDE**

Note the mechanisms the dean uses to communicate with the faculty at large, and indicate how often such communication occurs.

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