

**DEPARTMENT OF OTOLARYNGOLOGY HEAD AND NECK SURGERY**

**MENTORING AND  
FACULTY DEVELOPMENT PLAN**

**DEPARTMENT OF OTOLARYNGOLOGY- HEAD AND NECK SURGERY  
MENTORING AND  
FACULTY DEVELOPMENT PLAN**

Table of Contents

I. Introduction and Departmental Mentorship/Faculty Development Goals .....

II. Mentorship/Faculty Development Committee.....

III. Candidates for Mentorship (Mentees) .....

IV. Role of Mentor.....

V. Annual Evaluation.....

VI. Outcome Measures for the Mentoring Program.....

VII. Description of Promotion and Tenure Process Within the Department .....

VIII. Resources Available for Faculty Development.....

Appendix A. Mentee Mentorship/Faculty Development Plan  
and Evaluation Report.....

Appendix B. Mentor/Mentee Relationship Evaluation.....

Appendix C. Evaluation of Mentorship/Faculty Development Plan.....

Appendix D. Faculty Promotion Matrix.....

## **I. Department Mentorship/Faculty Development Goals**

The Department of Otolaryngology – Head and Neck Surgery recognizes that opportunities for mentoring, professional and personal development are critical to the successful recruitment and retention of the highest quality faculty.

The goal is for all faculty members in the department to achieve their individual full potential as faculty members of the Medical University of South Carolina and to be rewarded for that achievement. Since the University is a place where everyone is learning, it is vital that each member of the faculty see tangible evidence of that professional growth, whether it be in the easily measured domains of writing papers for publication, writing and receiving grants, or preparing and presenting lectures for students and trainees of our colleges, or in the less easily measured aspects of teaching students, residents and fellows, mentoring young investigators and junior faculty, or developing clinical expertise by specializing in some area of clinical medicine. It is incumbent on faculty members, their mentors, department chairs, and the university leadership to see that tangible progress is being made and documented. This mentoring plan is designed to assist in this process.

A structured mentorship and faculty development program reflective of the mission and culture of the department, yet flexible to the goals of the individual faculty member was developed in the fall of 2005 by a *provisional* committee composed of junior and senior faculty members who provided input based on their experiences and perceptions of the critical elements necessary to cultivate the success of junior faculty members in an academic medical setting. A *standing* Mentorship/Faculty Development Committee (MFD) composed of six senior faculty was formed and charged with ensuring the successful implementation of the plan that was formally implemented in January, 2006. The details of the Mentorship/Faculty Development Plan are outlined below and may be reviewed on the Department of Otolaryngology Education site at <http://ent.musc.edu>.

## **II. Mentorship/Faculty Development Committee**

Current Members: Chair/*Champion* – Bonnie Martin-Harris, Ph.D., Terry Day, M.D., Judy R. Dubno, Ph.D., M, Boyd Gillespie, M.D., Rodney Schlosser, M.D., David White, M.D.

The roles of the MFD standing committee include:

- *Champion* will be part of a University Mentor Leadership Council that meets at least quarterly to troubleshoot about ways to enhance mentoring in the University
- monitor, review and modify the MFD plan on an as-needed basis and at least *bi-annually*
- advise the mentee on the appropriateness of the designated tenure track  
(<http://academicdepartments.musc.edu/com1/faculty/index.htm>)

- assist the mentee in selection of mentor(s) and ensure that the mentor(s) match the junior faculty members' academic, clinical, and/or research interests
- evaluate the mentee - mentor relationship
- assist the mentee in professional goal development that includes the areas of clinical practice, teaching, and research
- evaluate mentee progress toward established goals on an annual basis(**APPENDIX A**)
- provide timely feedback to the mentee so that he/she can align activities in ways that will increase the likelihood of future success
- share consensus evaluation of mentee's progress toward goals with the Chair for review and consideration during the mentee's annual review
- serve as liaison between the mentee and Chair regarding mentee progress
- interact and participate with other groups on campus (e.g., Women's Scholars Group, Faculty Senate, University Leadership Council) to share MFD initiatives and issues

### **III. Candidates for Mentorship (Mentees)**

The Department of Otolaryngology - Head and Neck Surgery recognizes that the annual evaluation meeting or even periodic meetings with the Departmental Chair are insufficient for facilitating timely and necessary career directions that facilitate and support successful professional development in the unique area of interest of the junior faculty member. Junior faculty members are therefore required to seek and identify a senior faculty member to serve as primary mentor. The primary mentor will assist the mentee in the selection of additional mentors, if necessary, depending on the unique interests of the mentee, and may include interdisciplinary senior members from other departments.

All Assistant professors will be required to participate in the mentorship/faculty development plan. The mentee will:

1. Review and demonstrate knowledge of MFD plan containing specific goals as measured by successful completion of MFD objectives.
2. Select one or more interested senior (associate or full professor) faculty members (e.g. identified by the MFD committee) from the Department and/or any other appropriate areas of the University with whom they will establish a mentoring relationship
3. Present the selected mentor(s) to the MFD Committee for discussion and approval within 3 months of date of hire
4. Request a change of mentor and document the rationale for the change to the MFD committee
5. Establish 1, 3, and 5 year professional development goals in collaboration with mentor(s)
6. Maintain a MFD portfolio The components of the portfolio include:

- The MFD plan and evaluation report (**APPENDIX A**)
- An updated MUSC formatted CV
- A record of written correspondence that attest to the clinical, education related, and research endeavors of the mentee
- All departmental, COM and institutional policies that pertain to promotion and tenure
- Mentor/mentee relationship evaluation report (**APPENDIX B**)

7. Participate in the evaluation of the MFD plan (**APPENDIX C**)

#### **IV. Role of Mentor**

The selected mentor, if he/she agrees to serve, will be evaluated for their performance as mentor during the *annual* performance evaluation with the departmental Chair. He/she will complete the following:

- provide expert guidance in the development of target areas of professional focus including clinical, teaching, and research content
- establish 1, 3, and 5 year professional development goals in collaboration with mentee
- assist mentee in strategizing and seeking opportunities for intra- and extramural funding
- assist mentee with manuscript preparations and publications
- serve as a sounding board for mentee's research ideas and share experiences on how to handle difficult situations that may arise in the academic life. The mentor shall take great care not to push the mentee into a scientific direction that might be beneficial to the mentor but rather to aid the mentee in becoming an independent clinician, educator, and/or researcher.
- familiarize junior faculty with the promotion process at MUSC and update junior faculty with any changes in MUSC policy
- assist junior faculty in developing a system to document teaching accomplishments, scholarly work, and service to the Department, University, and community, and other activities that will be useful at the time of promotion or tenure consideration
- meet with their assigned junior faculty members at least quarterly to set goals and review progress towards meeting promotion/tenure goals
- maintain documentation of the progress of each mentee and report on progress (**APPENDIX A**) of junior faculty in meeting the goals for promotion and tenure to the MFD committee

- participate in the annual evaluation of the MFD plan (**APPENDIX C**)

## **V. Annual Evaluation**

Annual, formal MFD plan reviews are conducted between the mentee and the MFD Committee in the months of May and June. The Mentee submits the following portfolio 30 days prior to the review to the MFD Chair:

1. Designated Promotion Track
2. MUSC Formatted Curriculum Vitae  
<http://academicdepartments.musc.edu/com1/faculty/index.htm>
3. Promotion and Tenure Checklist  
<http://academicdepartments.musc.edu/com1/faculty/index.htm>
4. Mentee Mentorship/Faculty Development Plan and Evaluation Report (**APPENDIX A**)
5. Mentor/Mentee Relationship Evaluation (**APPENDIX B**, Parts 1 and 2)

The committee meets and assesses the progress of the mentee and reconciles their plan with the College Promotion and Tenure Criteria. Any deficiency or barriers to progress are identified. The Committee's assessment of the mentee's progress will be presented verbally to the mentee during the annual MFD review. The Committee also submits a written assessment to the Department Chair for consideration and discussion with mentee during the annual performance evaluation.

Although the annual performance evaluation conducted for all faculty members by the Department Chair includes all aspects of faculty performance, the Department Chair also focuses on the mentee's progress towards faculty development and promotion. The chair will carefully consider the evaluation of the mentee performed by the MFD committee in his/her assessment. The Chair will review and offer input into the mentee's portfolio to ensure that areas of concentration facilitate the mentee's successful MFD development and departmental strategic plan. The Chair may also suggest and facilitate a change of mentor(s) if the relationship is not deemed beneficial for either participant.

## **VI. Outcome Measures for the MFD Program Success:**

Departmental Outcome Measures for Mentorship Success:

1. Surveys of faculty on their satisfaction with the plan and their job overall
2. Attrition of faculty within the department
3. Percentage of eligible faculty promoted within a 5 year period.
4. Number of faculty promoted ahead of schedule (generally 6 years in grade)
5. Total funding from all mentored activities
6. Total number of publications overseen by mentors
7. Honors and awards by faculty
8. Recruitment of top students, residents, clinical and research fellows, postdoctoral fellows

9. Successful recruitment of faculty candidates

Mentee Outcomes Measures for MFD Program Success:

1. Achievement of Short and Long Term Goals (APPENDIX A)
2. Positive Responses or Positive Modifications in MDF (APPENDIX B)
3. Maintenance of Comprehensive, MUSC Formatted vitae and NIH Biosketch

Research related metrics:

1. Number of grants submitted by mentee under the mentor's guidance
2. Number of these grants funded
3. Number of original publications under the mentor's guidance
4. Importance of original publications under the mentor's guidance (e.g., journal quality, impact factor, editorial written on paper)
5. Career development progress of mentee while guided by the mentor, e.g., presentation of research at national / international meetings, invited
6. Presentations at meetings or other universities, election to study sections or specialty societies, promotion of mentee
7. Research awards of mentee under the mentor's guidance

Teaching related metrics:

1. Teaching accomplishments of mentee under mentor's guidance, e.g., formal courses taught, course materials developed, innovative teaching methods developed
2. Number of educational publications under the mentor's guidance
3. Importance of educational publications under the mentor's guidance (e.g., journal quality, impact factor, editorial written on paper)
4. Number of educational grants submitted by mentee under the mentor's guidance
5. Number of these grants funded
6. Career development progress of mentee while guided by the mentor, e.g., presentations at national / international meetings, invited presentations at meetings or other universities, membership on education committees in or outside of the institution, promotion of mentee
7. Honors and awards for teaching to the mentee under the mentor's guidance

Clinical related metrics:

1. Number of presentations at institutional, national, or international meetings by trainees (students, residents, and fellows) or junior clinical faculty under the mentor's guidance
2. Number of publications by trainees (students, residents, and fellows) or junior clinical faculty under the mentor's guidance
3. Innovative clinical care developed by junior faculty under mentor's guidance
4. Career development progress of trainees and junior clinical faculty while

- guided by the mentor, e.g., graduation from clinical training program
5. Honors and awards for clinical care to the junior faculty member under the mentor's guidance

## **VII. Description of Promotion and Tenure Process Within the Department**

Each College at MUSC has different tracks and ranks and a process through promotion in which faculty progress is documented. The Faculty Promotion Matrix is also provided as **APPENDIX D**. The various ranks in our Department and College and the description of how the Department's Promotion and Academic Committee operators can be found in the links below with guidelines for achieving them.

- a. Faculty affairs website:  
<http://academicdepartments.musc.edu/com1/faculty/index.htm>
- b. College of Medicine  
<http://www.musc.edu/com>

## **VIII. Resources Available for Faculty Development**

Resources are required for optimal faculty development and may be found in the department, at the institutional level, and at the state or national level. The Department of Otolaryngology provides the following:

- Clinical support (nurses, physician assistants)
- Research support (postdoctoral fellows, research assistants, student stipends)
- Enrollment in MSCR
- Start-up package (supplies, travel, equipment)
- Protected time for research
- Clinical trials administrative support
- Part-time administrative assistant
- Part-time grants manager
- Professional development account (for meeting travel, other)
- Professional dues
- Academic accounts



**APPENDIX A. Mentee Mentorship/Faculty Development Plan and Evaluation Report (To be filled out by mentee and mentor together, and reviewed annually by the department Chair).**

**Faculty Name:** \_\_\_\_\_

**Mentor Name:** \_\_\_\_\_

**Date of Hire:** \_\_\_\_\_

**Date of Evaluation:** \_\_\_\_\_

**List of Goals (Faculty development game plan)**

**1) Short-term goals (1 year from hire, in priority order)**

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

**2) Medium term goals (3 years from hire, in priority order)**

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_

**3) Long term goals (5+ years from hire, in priority order)**

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_

**List obstacles to obtaining Goals (if applicable):**

- 1.
- 2.
- 3.

**List resources to overcome obstacles (if applicable):**

- 1.
- 2.
- 3.

**Changes to previous list of goals (and reason for modification):**

- 1.
- 2.
- 3.

**Appendix B. Mentor/Mentee relationship evaluation.  
Part 1. TO BE COMPLETED BY MENTEE.**

**Mentee:** \_\_\_\_\_

**Mentor:** \_\_\_\_\_

<b>ITEM</b>	<b>Excellent</b>	<b>Fair</b>	<b>Poor</b>		
<b>1. The mentor is available on a regular basis and approachable.</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>2. The mentor helps define goals</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>3. The mentor has respect for the mentee</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>4. The mentee has respect for the mentor</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>5. The mentor is an appropriate role model for the mentee</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>6. The mentor has a good understanding of the challenges presented to the mentee.</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>7. The mentor has been helpful in guiding the mentee through the challenges presented</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>8. The mentor provides both support and constructive criticism of the mentee.</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>9. The mentee Maintains a portfolio of publications, lectures, clinical development, faculty/university service for periodic review with mentor(s) and annual review with chair</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

**Appendix B. Mentor/Mentee relationship evaluation.  
Part 2. TO BE FILLED OUT BY MENTOR.**

**Mentee:** \_\_\_\_\_

**Mentor:** \_\_\_\_\_

<b>ITEM</b>	<b>Excellent</b>	<b>Fair</b>	<b>Poor</b>		
<b>1. The mentee is available on a regular basis and approachable.</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>2. The mentee has developed a reasonable set of goals</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>3. The mentor has respect for the mentee</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>4. The mentee has respect for the mentor</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>5. The mentee exhibits understanding of the requirements, policies, and procedures for promotion and tenure</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>6. The mentee has a good understanding of the challenges presented to the mentee.</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>7. The mentee has developed established relationship(s) with a mentor(s) in the areas of teaching, research, clinical service, and faculty development</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>8. The mentee takes criticism/suggestions from the mentor and reacts appropriately</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>

## **APPENDIX C: Department Evaluation of Mentorship/Faculty Development Plan**

The primary goal of the MFD plan is to promote faculty development by establishing mentor/mentee relationships between senior and junior faculty. Assessment of success of the MFD plan in attaining this goal is performed *annually* within the department and *every three years* by three faculty or administrators from outside of the department. The success of the MFD plan will be determined based on the following criteria:

### *1. Departmental growth and productivity*

Departmental growth and productivity is necessary to support and cultivate faculty development. The following parameters should be considered representative of faculty development:

- Clinical scope and diversity of practice within the department
- Abundance of research publications and grants
- Faculty involvement in teaching activities throughout the university
- Departmental contribution to community education and service
- Administrative involvement of faculty within the university
- Growth and stability of departmental financial resources
- Faculty involvement in local, regional, and national academic and professional societies
- Local, regional, and national recognition of faculty and departmental excellence

### *2. Faculty understanding of policies regarding advancement, promotion and tenure*

- All faculty should be able to demonstrate awareness and understanding of the departmental and university requirements for advancement, promotion and tenure
- Departmental and university requirements for advancement, promotion and tenure should be distributed to and reviewed with all faculty annually

### *3. Faculty success in attaining goals outlined in 1, 3, 5 year professional development goals*

- Successful faculty development should result in achievement of short- and long-term goals
- Practicality of professional development goals shall be representative of effectiveness of faculty mentorship
- Departmental provision of adequate “start-up” resources to junior faculty should be reviewed annually

### *4. Integration of faculty goals into departmental long-term growth plan*

- The departmental growth plan should include achievement of faculty professional development goals to maximize faculty satisfaction and departmental productivity

### *5. Faculty satisfaction*

- Overall faculty satisfaction, ability to retain new faculty, and ability to successfully recruit new faculty
- Successful recruitment of top quality residents

6. *Collaboration between junior and senior faculty*

- Successful mentorship should result in collaboration between junior and senior faculty in developing new clinical and research initiatives for the department

## APPENDIX D: Promotion Matrix

R=Required S=Suggested

<b>COM FACULTY RANKS CRITERIA</b>				
<i>Under exceptional circumstances, promotions may be recommended when the candidate does not meet all of the basic criteria. These will be unusual cases.</i>				
<b>Professor</b>	<b>Academic Inv</b>	<b>Academic Inv/Ed</b>	<b>Academic CI</b>	<b>Clinician Ed</b>
Continues to meet all the criteria for Associate Professor with major accomplishments in research, teaching, and/or clinical service	R	R	R	R
Distinguished career exemplifying scholarship. Excellence & productivity in research, outstanding success as a teacher, and/or outstanding service contributions are required.	R	R	R	R
Principal investigator on significant research grants	R	S	S	
Co-investigator on research grants.		R	R	
Direct involvement in research.	R	R	R	R
Key individual in training of students and/or post-graduates.	R	R	R	R
Serves as Course Director for one or more major courses		R		
Continues to carry a heavy clinical or teaching load		R		R
Continued publication of reviews, chapters, textbooks, peer reviewed papers, and/or innovative teaching materials (new curricula, educational programs, syllabi, video materials, computer programs, etc.) that influence the science and practice of medicine at the regional & national levels	R	R	R	R
Continued publication of important and original clinical and/or laboratory investigations with significant authorship.	R		R	
Publications with significant authorship since promotion to Associate Professor (line 1), and in total (line 2)	≥10 ≥30		≥10 ≥30	
Publications with authorship since promotion to Associate Professor (line 1), and in total (line 2)		≥5 ≥10		≥5 ≥10
National recognition, as evidenced by election to generalist or specialty societies, service on national committees, study sections, editorial boards, visiting professorships and/or invitations to speak in CME courses.	R	R	R	R
Leadership roles in appropriate department, hospital and college		R	R	R
<b>Associate Professor</b>				
<b>Associate Professor</b>	<b>Academic Inv</b>	<b>Academic Inv/Ed</b>	<b>Academic CI</b>	<b>Clinician Ed</b>
Continues to meet all the criteria for Assistant Professor with a record of achievement in research, teaching, and/or clinical service	R	R	R	R
Record of excellence in high quality patient care, teaching and/or research	R	R	R	R
Established independent investigator with major impact in planning/development of research project	R		R	
Principal investigator on significant research grants	R		S	
Co-investigator on research grants.		R	R	
Local, regional or national grant support for independent		S		S

<b>COM FACULTY RANKS CRITERIA</b>				
research or development of teaching methods, or health care delivery methods, or clinical care systems				
Peer recognition for research activities including invitations to present work at other universities, workshops and scientific conferences.	R		R	
Direct involvement in research.	R	R	R	R
Organization of clinical services to provide a setting for medical education and a data base for clinical research.				R
Active in training of students and/or post-graduates.	R	R	R	R
Involved in teaching activities, including formal lectures, grand rounds, and/or continuing medical education.		R		R
Serves as Course Director for one or more major professional courses		S		
Important contributor to course development or course direction.		R		S
Superior evaluations of teaching by students, residents, peers, course directors, dept. chairs.	S	R	S	R
Nominated for or recipient of teaching awards.		S		S
Presentations at national/international meetings.	R	R	R	R
Continued publication of reviews, chapters, textbooks, peer reviewed papers, and/or innovative teaching materials (new curricula, educational programs, syllabi, video materials, computer programs, etc.) that influence the science and practice of medicine at the regional & national levels	R	R	R	R
Continued publication of important and original clinical and/or laboratory investigations with significant authorship.	R	R	R	
Total publications with significant authorship since last promotion	≥10		≥10	
Total publications with authorship since last promotion		≥5		≥5
Development of new teaching materials, such as curricula, educational programs, textbooks, syllabi, computer programs and video tapes.		R		R
Established reputation inside and outside local institution as an authority in a clinical specialty or for leadership in primary care			S	R
Contributions to committees at department, college, university, community, state, regional, national and international levels	R Univ Level	R Univ Level	R State Level	R State Level
Leadership role in department and hospital as a section or division head, or program director			S	S
Active involvement in local and national professional organizations	R	R	R	R
Organization of clinical services to provide a setting for medical education and a data base for clinical research				R
Election to scientific organizations in discipline.	S	S	S	S
<b>Assistant Professor</b>				
	<b>Academic Inv</b>	<b>Academic Inv/Ed</b>	<b>Academic Cl</b>	<b>Clinician Ed</b>
Clear commitment to an academic career in research, teaching and/or clinical care.	R	R	R	R
Commitment to and potential for performing independent laboratory and/or clinical research.	R	R	R	
Receipt, active pursuit or development of the skills necessary to apply for local, regional and national grants.	R	R	R	
Developing skills for directing or contributing to publications related to research, teaching and/or clinical	R	R	R	R



<b>COM FACULTY RANKS CRITERIA</b>				
care.				
Active in training of students and/or post-graduates.	R	R	R	R
Strong interest in teaching		S		
Contributions as first author on refereed publications.	R	R	S	
Contributions as author on refereed publications.			R	S
Capable of managing most clinical problems in the appropriate discipline, but may seek assistance from senior faculty when dealing with complex problems.			R	R
Carry a heavy clinical load				R
Establishing recognition through candidacy or membership in appropriate professional and scientific organizations.	R	R	R	R
<b>Instructor</b>				
	<b>Academic Inv</b>	<b>Academic Inv/Ed</b>	<b>Academic Cl</b>	<b>Clinician Ed</b>
Completion of educational requirements necessary to enter a career in academic research, teaching and/or clinical care.	R	R	R	R
Aptitude for an academic career based upon recommendations of mentors.	R	R	R	R
Career goal to function independently in an academic environment as an investigator, teacher, and/or clinician.	R	R	R	R
Developing experience with preparation of research protocols and grant applications.	R	R	R	
Demonstrated interest in teaching.	R	R	R	R
Early experience with preparation of publications and presentations related to research.	R	R	R	
Fulfilled educational requirements for certification by appropriate specialty board.			R	R
Demonstrated interest in high quality clinical care.				R