Chapter 3.1

A. Clinician Educator Role

The Clinician Educator role is defined by engagement in clinical care, teaching, administrative and/or scholarly activities that advance clinical medicine.

With four ranks and opportunities for reappointment and promotion, the Clinician Educator line is structured as a career path for both junior and more senior clinicians, educators, administrators and scholars who add value to the School by providing essential activities that advance the missions of the Stanford School of Medicine, Stanford Health Care and/or Lucile Packard Children’s Hospital. Individuals pursuing advanced training or non-ACGME Residents or Fellows who wish to maintain clinical skills and/or contribute to the teaching program in a way that is not part of his/her training program are appointed as a Clinical Scholar (see Chapter 9 of this Handbook). The Clinician Educator is normally a highly qualified, licensed M.D. (or equivalent medical degree), Ph.D. or holds a terminal degree in his/her field.

B. Definition of Clinician Educator

Clinician Educators are salaried employees of Stanford University, classified as exempt staff and are, in general, subject to and expected to comply with the University’s applicable policies and procedures, including (in general) the employment policies and procedures in Chapter 2 of Stanford University’s Administrative Guide.

While Clinician Educators are classified as staff, and therefore have benefits and privileges that may vary from faculty, many of their responsibilities, which focus on clinical care, teaching, administrative and/or scholarly activities, are similar to those held by members of the Professoriate. Therefore, as a result of their academic credentials and multifaceted contributions to the School’s educational mission, Clinician Educators are regarded colloquially as faculty and are referred to as such in everyday usage.

C. Programmatic Need, Position and Resource Allocation

Programmatic need, including financial viability, must be evaluated and established for each Clinician Educator appointment, reappointment and promotion.

Unlike the Professoriate, which is subject to a billet cap, there is no formal limit on the number of Clinician Educator positions in the School; rather, the number of positions is governed by a department’s programmatic need and funding capacity, and by School approval. Each regular (benefits-eligible) Clinician Educator position is assigned a unique position number for purposes of recordkeeping and reporting. Clinician Educators employed in contingent or casual capacity are assigned to shared position numbers.
In addition to salaries, other resources provided to Clinician Educators may include some of the following: administrative supplement, participation in departmental incentive plans, and moving expenses.

**D. Identification of Candidates, Diversity Considerations**

Clinician Educator positions are not normally subject to the posting and search procedures required for other exempt appointments to the University staff. Candidates currently affiliated with Stanford in some other capacity (e.g., Resident, Postdoctoral Fellow, Instructor) are often identified as potential Clinician Educators; other candidates may emerge as a result of networking conducted at peer institutions.

Occasionally, it may be appropriate for a department to conduct a national search for a Clinician Educator position. Under such circumstances, the search process should follow the guidelines in the School of Medicine’s *Guide to Faculty Searches* to the extent possible. It is recognized that the process may be somewhat different than that required for a new member of the Professoriate; for example, approval from the Office of Academic Affairs to initiate or conclude the search is not required.

In their identification of candidates, departments are expected to keep in mind Stanford’s commitment to diversity and to the recruitment of women and members of minority groups, as well as others who would bring additional dimensions to the University’s research, teaching and clinical missions.

**E. Licensure, Medical Staff Membership, Malpractice Insurance, and Authorization to Work**

1. Licensure and Medical Staff Membership

The Clinician Educator appointment, and therefore employment, is contingent upon and coterminous with the individual obtaining and maintaining in good standing (a) a professional medical license from the State of California and (b) the medical staff membership and privileges at Stanford Health Care and/or Lucile Packard Children’s Hospital as well as any other facilities necessary for the performance of the individual’s intended clinical role.

   a. Licensure

   Information about obtaining a professional license from the State of California may be obtained from the [Medical Board of California](https://www.mbc.ca.org), and from [Graduate Medical Education](https://www.gme.ca.gov).

   California Business and Professions Code Sections 2100 et seq. apply to the applications of graduates of medical schools located outside the United States or Canada. In particular, Section 2113 applies to a person who does not immediately qualify for a
physician and surgeon’s certificate and who is offered a full time Clinician Educator position by the dean of an approved medical school in the State of California. Section 2113 describes the requirements for applying for a certificate of registration to engage in the practice of medicine only to the extent that the practice is incident to and a necessary part of the person’s duties as approved by the Medical Board of California in connection with the Clinician Educator position. A clinical fellowship shall not be submitted as a faculty service appointment.

Section 2168.1 applies to a person who is offered either a full-time tenure-track clinical faculty appointment at the full professor level (or its equivalent) by a California medical school approved by the Board or to a person who is clearly outstanding in a specific field of medicine or surgery and is offered by the dean of a medical school in this state, a full-time academic appointment at the level of full professor or associate professor, and a great need exists to fill that position. Section 2168.1 describes the requirements for applying for a special faculty permit, authorizing the holder to practice medicine only within the medical school itself and any affiliated institution in which the permit holder is providing instruction as part of the medical school’s educational program and for which the medical school has assumed direct responsibility. The holder of a special faculty permit shall not engage in the practice of medicine except as provided above.

Additional information regarding this legislation is available from the Division of Consumer Affairs, Medical Board of California and from Graduate Medical Education (GME).

The “Notice of Separation Under Business and Professions Code Sections 2111, 2113, and 2168”, used to notify the Medical Board of California that the Clinician Educator appointment of a 2113 or 2168 registration holder has ended, is available on the GME’s web site.

b. Medical Staff Membership and Privileges

Information about medical staff membership and privileges at the School of Medicine may be obtained from the Medical Staff Office.

2. Malpractice Insurance

Information regarding malpractice coverage for providing services on behalf of the School of Medicine is available from The Risk Authority.

3. Authorization to Work, Visas for and Employment of Foreign Nationals

The Clinician Educator must be authorized to work as required by the Immigration Reform and Control Act, as explained on this page about the I-9 form.

The most up to date information on the School of Medicine Faculty Handbook, Chapter 3: Clinician Educators can be found on the Faculty Handbooks website, starting Fall 2019.
If the candidate for a Clinician Educator position is a foreign national, the candidate and the department must comply with the applicable policies and procedures appearing in Administrative Guide Memo 23.1, [http://adminguide.stanford.edu/ch2contents.html](http://adminguide.stanford.edu/ch2contents.html), and on the Bechtel International Center website, [http://icenter.stanford.edu/scholars/atstanford/classification.html - faculty](http://icenter.stanford.edu/scholars/atstanford/classification.html).

**F. Titles and Ranks**

The Clinician Educator ranks are:

- Clinical Instructor
- Clinical Assistant Professor
- Clinical Associate Professor
- Clinical Professor

The word “Clinical” must be included as part of the title for those holding a Clinician Educator appointment.

**G. Concurrent Appointments**

1. Joint Appointments (> 0%)

   a. Definition

   A joint appointment reflects major contributions to two or more departments/divisions in terms of time, effort and programmatic need. Clinician Educators may have a joint appointment with another department within the School of Medicine. In all joint appointments, even those that are divided evenly between two departments or divisions, one unit is designated as “primary” and the other(s) as “secondary.” The primary and secondary designations are made at the time the joint appointment is initiated and may be changed with the unanimous consent of the Clinician Educator and the relevant department chairs. Where operational needs warrant, the joint appointment can be modified at the discretion of the two chairs and may be terminated at the discretion of the chair of the secondary department.

   b. Resources

   Departments frequently share salary and/or other resources consistent with the distribution of time, effort and programmatic need.

   c. Titles

   Titles reflect the Clinician Educator’s primary and secondary departmental roles by using, for example, the following format: Clinical Professor of (subject of primary affiliation) and of (subject of secondary affiliation).
d. Terms

The joint appointment is generally made for the duration of the underlying appointment and is at the will of the chair of the secondary department.

e. Responsibilities

Clinician Educators holding joint appointments are expected to carry a normal load of clinical, teaching, administrative and/or scholarship responsibilities. The precise nature of those responsibilities will depend on the roles the Clinician Educators are expected to play in the departments to which they are appointed. Normally, such responsibilities are apportioned in accordance with FTE in each unit. The School or department has the authority to change a Clinician Educator’s responsibilities during the term of appointment at its discretion.

2. Joint Appointments (0%)

a. Definition

A joint appointment at 0% acknowledges a Clinician Educator’s active participation in a secondary department’s scholarly, educational, administrative and/or clinical activities. The title carries certain responsibilities and bestows certain privileges as outlined below. Joint appointments at 0% may be made between departments within the School of Medicine. Up to two joint appointments at 0% are permissible.

b. Resources

All resources (e.g., salary and/or research support) are provided by the Clinician Educator’s primary department at the time of the initial appointment and throughout the duration of the Clinician Educator’s appointment at Stanford.

c. Titles

Titles of those holding joint appointments at 0% reflect the Clinician Educator’s primary and secondary departmental roles by using, for example, the following format: Clinical Professor of (subject of primary affiliation) and of (subject of secondary affiliation).

d. Terms

The joint appointment is made for the duration of the current appointment and is at the will of the chair of the secondary department.
e. Responsibilities

It is expected that the responsibilities held by a Clinician Educator holding a joint appointment at 0% will include duties as determined by the department chair of the secondary department. It is expected that the department(s) will set a minimum threshold of responsibilities for conferral of the title and that this will be applied equitably.

3. Courtesy Appointments

a. Definition

A courtesy appointment is defined as one in which the Clinician Educator often makes a substantial contribution to departments or divisions other than their own, but in ways less formal than would justify a joint appointment. It is permissible for a Clinician Educator to hold more than one courtesy appointment. There is usually no commitment of salary, space, research or other support involved in a courtesy appointment.

b. Titles

Formally (that is, in all appointment documents), the title should read, for example, Clinical Professor of (subject of primary affiliation) and, by courtesy, of (subject).

c. Terms

The duration of a courtesy appointment may be less than or coterminous with the primary appointment, and the appointment is at the will of the chair of the department in which the courtesy appointment is held.

d. Responsibilities

Departments have discretion in determining the responsibilities associated with courtesy appointments, although it is expected that a minimum threshold will be established for conferral of the title, will be applied equitably, and will reflect the department’s specific programmatic need.

H. Duration of Appointments

All Clinician Educator appointments are for a term of years. In accordance with Administrative Guide Memo 2.1.9.5, candidates are notified in writing of the planned fixed term end date.

The usual duration of an appointment (subject to relatively rare exceptions granted by the Vice Dean for a good cause and on a case-by-case basis) for each rank is
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<table>
<thead>
<tr>
<th>Rank</th>
<th>Initial Appointment or Promotion</th>
<th>Reappointment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical Instructor</td>
<td>Up to 3 years</td>
<td>Up to 3 years (renewable, unlimited if less than 0.5 FTE)</td>
</tr>
<tr>
<td>Clinical Assistant</td>
<td>4 years</td>
<td>6 years (renewable, unlimited number of 6-year terms)</td>
</tr>
<tr>
<td>Professor</td>
<td>6 years (renewable, unlimited number of 5-year terms)</td>
<td></td>
</tr>
<tr>
<td>Clinical Associate</td>
<td>5 years</td>
<td>5 years (renewable, unlimited number of 5-year terms)</td>
</tr>
<tr>
<td>Professor</td>
<td>5 years</td>
<td>5 years (renewable, unlimited number of 5-year terms)</td>
</tr>
</tbody>
</table>

1. Term Appointments

Although term appointments are frequently made with the clear possibility of reappointment or promotion, there is no entitlement to such action at the end of the term, and it is not automatic. Instead, decisions on reappointment and promotion, like decisions on initial appointment, are subject to programmatic need and budgetary considerations, the satisfactory performance of the Clinician Educator as well as the exercise of professional and scholarly judgment and discretion by the School’s departmental faculty and the School’s academic leadership.

Promotion is not a requirement for continued affiliation; qualified candidates may generally be renewed at the same rank for an unlimited number of terms. However, Clinician Educators are encouraged to take advantage of career development opportunities to meet the criteria for advancement.

Reappointment and promotion reviews are generally (but not always) initiated approximately six months in advance of the appointment end date so that a decision is reached before the Clinician Educator’s current appointment ends. Extension of term appointments is discouraged. In the event that an extension is necessary, it is expected to be of short duration and supported by a reasonable explanation.

2. Outreach Site Assignment

If a Clinician Educator is assigned to an outreach site of Stanford Health Care, Lucile Packard Children’s Hospital, or the School of Medicine and the Clinician Educator’s (a) assignment ends or (b) the contract with the outreach site terminates, the Clinician Educator’s employment, and therefore appointment, with Stanford terminates.

3. Administrative Role at Stanford Health Care or Lucile Packard Children’s Hospital

If a Clinician Educator is assigned to administrative duties at Stanford Health Care or Lucile Packard Children’s Hospital (see, e.g., Section 3.2.E.2.c), such administrative duties are at
will subject to the agreement of Stanford Health Care or Lucile Packard Children’s Hospital as applicable, and the School of Medicine.

I. Offer Letters

It is the responsibility of the department chair to ensure that a candidate for appointment as a Clinician Educator is informed in writing of, and agrees to, the terms and conditions of his or her proposed appointment before hire. The approved offer letter template is available in the Toolbox on the Office of Academic Affairs’ website, http://med.stanford.edu/academicaffairs/tools/letter-templates.html. Oral commitments are not enforceable until they are reduced to writing and reviewed and approved as required.

An offer letter addendum is required if there are changes to a Clinician Educator’s percent time of appointment, assigned role and responsibilities, and/or compensation other than an increase occurring as a midyear salary adjustment or as part of the annual salary setting process. The approved addendum template is also available in the Toolbox on the Office of Academic Affairs website.

All offers are contingent upon final review and approval by the School of Medicine.

J. Notifying Clinician Educator Candidates of Appointment Terms

Administrative Guide Memo 2.1.9.5(1) requires that at the time of appointment, the department notify a fixed-term employee in writing of the planned termination date. This requirement is met with the issuance of an offer letter or addendum. It is the responsibility of departments to inform Clinician Educators in writing of any changes in their term of appointment resulting from reappointments or promotions.

Departments may provide a formal letter to the candidate with the following statement, as an example, “This will confirm your «Action Type» as «Rank» in the Department of «Department Name» at «Percent» FTE for the period «Appt Start Date» to «Appt End Date».” Alternatively, departments may notify the candidate of the dates of the fixed-term appointment by forwarding the Office of Academic Affairs’ approval notification email.

K. Resignations

For planning purposes, the University requests that employees notify department/division leadership as soon as possible of any intention to resign. At least four weeks’ prior notice is expected. Therefore, if a Clinician Educator resigns before his or her appointment ends, a written statement of resignation should be submitted to department/division leadership that includes the date of the resignation with a copy to the Vice Dean. The department retains the ultimate decision with respect to the effective date of the resignation if an earlier departure is consistent with operational or programmatic needs.
L. Termination and Nonrenewal

A Clinician Educator may be separated from employment prior to the planned termination date of his or her appointment as set forth in Administrative Guide Memo 2.1.9.6 and 2.1.17. Generally, such termination may be based on a change in programmatic need (including budgetary considerations) or for cause, such as unsatisfactory performance. In addition, if the Clinician Educator is assigned to an outreach site of Stanford Health Care, Lucile Packard Children’s Hospital or School of Medicine and that Clinician Educator’s (a) assignment ends or (b) the contract with the outreach site terminates, the Clinician Educator’s employment with Stanford terminates. (See Section 3.1.H.2 above.) Proper notice should be given in all circumstances, normally 90 days for programmatic reasons and 30 days for non-programmatic reasons. In some cases of cause, immediate termination may be warranted.

As noted above, although continued affiliation in the form of a reappointment or promotion may occur, there is no entitlement to such action at the end of a term, and it is not automatic. It is expected that discussions between a Clinician Educator and his or her department/division leadership will be held well in advance of the appointment end date regarding the possibility, if any, of renewal.

M. Personnel Files

The Personnel Files and Data policy found in Administrative Guide Memo 2.1.3, https://adminguide.stanford.edu/chapter-2/subchapter-1/policy-2-1-3 applies to the personnel files of Clinician Educators. Section 2.1.3.4, Access & Use, reflects Stanford’s policy of many years that an individual should be able to learn the general substance of the information contained in his or her personnel file.

However, material supplied to the University by a third party (whether inside or outside the University), or supplied by a member of the University to a third party, is presumed to be confidential unless otherwise stated and should not be shown to the individual. Because the quality of the University’s appointment, reappointment and promotion process depends on the candor of the participants of the process, Stanford’s policy is to protect vigorously the sources of information. Accordingly, materials in a Clinician Educator’s appointment file such as peer evaluations from outside and inside sources, letters from students, departmental or higher-level documents regarding the review process, and documents containing statements based on personal knowledge, judgments or opinions are regarded as confidential. Such material should, therefore, upon request, be summarized by a responsible School officer in a manner that preserves the confidentiality of the source of the information.

N. Records Retention

Records of former Stanford employees should be retained until the later of seven years following the date of termination or, if a claim is brought (e.g. grievance, lawsuit, or charge with state or federal agency), until the disposition of the claim is final. See Administrative Guide Memo 2.1.3.5.b.

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Chapter 3.2 Criteria for Appointments, Reappointments and Promotions

A. Criteria

The University recognizes that there are significant variations in how candidates qualify for and secure initial appointment, reappointment and promotion, according to field and discipline. Candidates come from different backgrounds and receive different educational training. In addition, there may be variation in emphasis among the components of activity (i.e., clinical care, teaching and, in some cases, scholarship and/or administrative duties). Given the many different activities in which Clinician Educators are engaged, such variations are expected and are appropriate. Nevertheless, all Clinician Educator appointments have in common the requirement of excellence, however measured.

The major criterion for appointment, reappointment and promotion for Clinician Educators is excellence in the overall mix of clinical care, teaching, administration and/or scholarship appropriate to the programmatic need the individual is expected to fulfill.

The criteria detailed below should be considered in concert with Sections 3.2.C., 3.2.D., and 3.2.E, which address specific criteria for Clinical Instructors, Clinical Assistant Professors, Clinical Associate Professors, and Clinical Professors, respectively.

B. Proportionality of Contributions

The department chair (or designate) determines the allocation of a Clinician Educator’s time in light of the strategic and programmatic needs of the department and School. Typically, Clinician Educators will spend the majority of their time on clinical care and teaching. Under certain circumstances, however, the highest proportion of time and effort may be dedicated to the performance of administration or scholarship in order to meet a specific departmental programmatic need. As noted above, in the Clinician Educator Line, appointments (and subsequent reappointments and promotions) are based upon a requirement of excellence in the overall mix of contributions in clinical care, teaching, administration and/or scholarship that advances clinical medicine. In determining whether this standard has been met, reviewing bodies should be guided by the expectation that Clinician Educators will nearly always be required to establish and maintain excellence in the area in which the highest proportion of their time and effort is dedicated; however, excellence in clinical care is required and a high degree of competency in all areas regardless of the proportion of commitment.

Performance that falls below this standard of excellence in clinical care will normally result in a negative appointment, reappointment or promotion decision. For further information, see Section 3.2.E.1.

C. Regional and National Recognition

Depending on their rank, Clinician Educators are expected to have attained regional or national recognition in their field. In addition to recognition garnered from clinical care, teaching.
administrative and/or scholarly activities, regional or national recognition may be gained through and evidenced by such activities as major administrative or committee assignments, community service related to the candidate’s professional work, participation in professional societies, service on editorial boards, scholarly publications, presentations at regional, national and/or international conferences, or the development of software, websites, computer applications or scholarly digital creations.

For appointment, reappointment or promotion to the rank of Clinical Associate Professor, there should be evidence that the candidate has attained regional recognition (relative to the candidate’s location) as a superior clinician, educator, administrator or scholar. The definition of “regional” may vary among clinical specialties but is generally considered to be outside of the School of Medicine--Stanford Medicine community (Stanford Health Care and Stanford Children’s Health, their affiliated hospitals and outreach sites) and within a radius of 200 miles of the candidate’s assigned location. Candidates for initial appointment at this rank who have previous meritorious academic service on the faculty of a comparable medical school will be considered favorably. In special cases, candidates for promotion to this rank who do not have regional recognition may be considered by other factors, including extraordinary contributions in such broadly defined areas as teaching and clinical excellence, innovation, program building, scholarship and/or administrative activities.

For appointment, reappointment or promotion to the rank of Clinical Professor, there should be evidence that the candidate has attained national recognition as a superior clinician, educator, administrator or scholar, or as a national leader of a health care system or of organizational change and measurement of health care systems. In special cases, candidates for reappointment to this rank who do not have national prominence, may be considered by other factors, including extraordinary contributions in such broadly defined areas as teaching and clinical excellence, innovation, program building, scholarship and/or administrative activities.

D. Timing of Promotions

Promotions may be initiated at any time when there is unequivocal evidence that the quality of the Clinician Educator’s contributions meets the criteria for promotion to the higher rank.

Chapter 3.3 Application of the Criteria for Appointments, Reappointments and Promotions

A. Standards of Excellence, Acceptable or Unacceptable Performance

In determining excellence in the overall mix of contributions, the following definitions should be used as a general guide:

Excellence is defined as achieving a level of distinction that is consistent with the high standards of Stanford University and the mission of the School of Medicine, that is, to be a premier research-intensive medical school that improves health through leadership, diversity and collaborative approach to discovery and innovation in patient care, education and research.

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School of Medicine expectations for acceptable performance will typically be understood to be less than excellence (as described above), but to exceed the basic professional competence standards of the general clinical and scholarly communities. Areas where performance is found to be acceptable, but with room for improvement, should receive appropriate attention through discussions with the candidate or through the counseling memorandum that is part of the reappointment or promotion review process.

Unacceptable performance denotes a quality of activity that is below the standard for acceptable performance expected of a Stanford Clinician Educator. In rare instances, such a situation may be mitigated if, in the opinion of reviewing bodies (informed by compelling evidence), the unacceptable performance is predicted to improve significantly through the counseling process.

B. Factors in Applying the Criteria

Determination of satisfaction of applicable criteria is based on material accumulated during the appointment, reappointment or promotion review process; documentation that explicitly and tangibly supports both the quality of performance and the quantity of contributions is required.

The professional judgment of those assessing these data is the critical factor in determining whether the Clinician Educator’s accomplishments meet or surpass the standard of excellence in the overall mix of contributions.

Evaluation should be of total performance. Taking into consideration the proportionality of contributions, appropriate weight should be given to the quality and quantity of work in the following categories:

1. Clinical Care

Excellence in clinical practice or clinical care is a requirement for those Clinician Educators whose duties include such practice. Factors considered in assessing clinical performance may include (but are not limited to) the following:

General Clinical Proficiency: maintains up-to-date knowledge base appropriate to scope of practice; maintains current technical/procedural proficiency; applies sound diagnostic reasoning and judgment; applies sound therapeutic reasoning and judgment; applies evidence from relevant scientific studies; seeks consultation from other care providers when appropriate; maintains appropriate clinical productivity; and demonstrates reliability in meeting clinical commitments.

Communication: communicates effectively with patients and their families, physician peers, trainees, and other members of the health care team (for example, nurses, nurse practitioners, respiratory therapists, pharmacists); and maintains appropriate medical documentation.

Professionalism: treats patients with compassion and respect; serves as patient advocate (puts the patient first); shows sensitivity to cultural issues; treats physician peers, trainees,
and other members of the health care team (for example, nurses, nurse practitioners, respiratory therapists, pharmacists) with respect; is available to colleagues; responds in a timely manner; and respects patient confidentiality.

Systems-Based Practice: effectively coordinates patient care within the health care system; appropriately considers cost of care in medical decision-making; participates in quality improvement activities; and demonstrates leadership in clinical program development and administration.

The Clinician Educator Line may include individuals who contribute indirectly to patient care in clinical environments that heavily emphasize technology and/or a multidisciplinary approach. For example, a radiation physicist may play an integral role in treatment planning for individual oncology patients or a biomedical engineer may work closely with a surgeon or interventional cardiologist to develop and implement new treatment strategies. In such cases, factors considered in assessing clinical performance may include (but are not limited to) applicable factors described above.

2. Teaching

A standard of excellence or of acceptable performance in teaching is essential for appointment, reappointment and promotion in the Clinician Educator Line. Teaching is broadly defined to include such areas as clinical “bedside” teaching, didactic instruction, presentations, career mentoring and advising, program building, and development of written, audio, video and digital materials. Factors considered in assessing teaching performance may include (but are not limited to) the following: knowledge of the material; clarity of exposition; positive style of interaction with trainees; availability; professionalism; institutional compliance and ethics; effective communication skills; helpfulness in learning; ability to stimulate further education; and ability to work effectively as part of the teaching team.

Teaching is broadly defined as activities that further medical knowledge and/or promote health. Teaching may target traditional trainees, medical personnel, special interest groups or lay populations. Teaching may, for example, be of undergraduates, medical students, residents, clinical and postdoctoral fellows, nurses and ancillary staff, other physicians, or non-medical individuals or groups.

3. Administration

Administration (including what might be called institutional citizenship) may at times be a factor in appointment, reappointment and promotion decisions. For example, many administrative duties critical to all aspects of the operation of the School of Medicine require input from, or direction by faculty and/or Clinician Educators. Thus, Clinician Educators are encouraged to participate in administration of the School’s programs, and both the scope and the quality of administrative performance may be considered in their reappointment and promotion. Those with significant ongoing administrative duties, such as Service Line
Directors, IT Leaders, Quality Officers, Division Chiefs and others involved in the operation of Stanford Health Care and Lucile Packard Children’s Hospital, are understood to have less time for clinical care and teaching compared to colleagues without such duties (though administrative duties per se may lead to unusual opportunities for advancement of clinical medicine). In such cases, the quality of performance may be considered in the reappointment and promotion process. In addition, assignment to such administrative duties is at will and subject to termination upon the agreement of Stanford Health Care or Lucile Packard Children’s Hospital, as applicable, and the School of Medicine.

4. Scholarship

Scholarship is not a requirement in the Clinician Educator Line. However, in some cases, scholarly activities will flow naturally from the Clinician Educator’s clinical responsibilities and, in turn, scholarly work may lead to innovative approaches in the care of patients, the education of trainees, and/or advances in medicine. As such, it may be a factor in appointment, reappointment and promotion decisions; in such cases written scholarship that advances the field will almost always be required. Factors considered in assessing scholarship may include (but are not limited to) the following: scholarly activity and productivity, impact, innovation and creativity; recognition in the field; ability to work effectively as part of a research team; effective communication with colleagues, staff and students; and professionalism, institutional compliance and ethics. Clinician Educators who engage in scholarly activities should, at a minimum, meet a standard of acceptable performance as defined in Section 3.2.E.1.

5. Principal Investigator Waivers

Clinician Educators appointed in the School of Medicine are eligible to apply for Principal Investigator waivers. The Research Management Group’s website http://med.stanford.edu/rmg/piwaiver.html provides details on the permitted research activity, waiver eligibility criteria and request procedures.

6. Respectful Workplace

The School of Medicine is committed to providing a work environment that is conducive to teaching and learning, research, the practice of medicine and patient care. Stanford’s special purposes in this regard depend on a shared commitment among all members of the community to respect each person’s worth and dignity. Because of their roles within the School of Medicine, Clinician Educators, in particular, are expected to treat all members of the Stanford Community with civility, respect and courtesy and with an awareness of the potential impact of their behavior on staff, students and other faculty members.

As detailed earlier in this section, application of criteria for evaluating the quality of clinical care and teaching include specific expectations regarding a Clinician Educator’s professional behavior in the workplace. They are reiterated here to emphasize their importance as factors in appointment, reappointment and promotion actions.
In clinical care activities, such factors relevant to evaluation of whether the standards for clinical performance have been met may include: professionalism, institutional compliance and ethics; humanism; ability to work effectively as part of the health care team; and effective communication with colleagues, staff, students and patients.

In teaching activities, such factors relevant to whether the standards for teaching have been met may include: a positive style of interaction with students; availability; professionalism; institutional compliance and ethics; effective communication skills; helpfulness in learning; and ability to work effectively as part of the teaching team.

In addition, for those Clinician Educators who engage in scholarly activities, such factors relevant to whether the standards for scholarship have been met may include the ability to work effectively as part of a research team; effective communication with colleagues, staff and students; and professionalism, institutional compliance and ethics.

Results from the distribution of clinical excellence and teaching evaluation forms, as well as from referee letters, will aid reviewing bodies in assessing a Clinician Educator’s performance in the workplace.

C. Specific/Supplemental Criteria for Clinical Instructors

1. Appointment as Clinical Instructor

The Clinical Instructor appointment is intended primarily to be an initial position following completion of graduate medical education, but may also be appropriate for *locum tenens* appointments needed to meet temporary clinical need and for part-time positions (less than 0.5 FTE). The initial term of appointment may be up to three years.

Clinical Instructors should have demonstrated exceptional qualities and promise to become outstanding clinicians, teachers, institutional contributors and/or scholars. If the candidate has not had formal teaching experience, he or she should have demonstrated a commitment to develop the skills necessary for outstanding teaching. He or she must have demonstrated excellence or promise of excellence in a combination of clinical performance and clinical teaching appropriate to the programmatic need upon which the appointment will be based.

2. Reappointment as Clinical Instructor

Clinical Instructors are assessed for reappointment on the basis of their performance and achievements in the areas of clinical care, teaching, administration and/or scholarship (as applicable). They may be reappointed based on evidence of progress, high-level performance and continuing programmatic need. There should be evidence that the candidate will continue to successfully fill the programmatic need for which the reappointment is made and to make meritorious contributions to his or her discipline and to the School.
The term of reappointment will be for up to three years and may be renewed (based on fulfillment of the applicable criteria and subject to continuing programmatic need) for an unlimited number of subsequent terms. Clinical Instructors (>0.5 FTE) should be considered for advancement to Clinical Assistant Professors after their initial three-year term in most circumstances.

D. Specific/Supplemental Criteria for Clinical Assistant Professors

1. Appointment as Clinical Assistant Professor

Individuals appointed as Clinical Assistant Professors should have demonstrated exceptional qualities and promise to become outstanding clinicians, teachers, institutional leaders, and/or scholars. If these individuals have not had formal teaching experience, they should have demonstrated a commitment to develop the skills necessary for outstanding teaching. They must have demonstrated excellence or promise of excellence in a combination of clinical performance, teaching, administration and/or scholarship appropriate to the programmatic need upon which the appointment will be based.

The initial term of appointment will generally be for four years.

2. Reappointment as Clinical Assistant Professor

Clinical Assistant Professors are assessed for reappointment on the basis of their performance and achievements in the areas of clinical care, teaching, administration, and/or scholarship. They may be reappointed based on evidence of progress, high-level performance, and continuing programmatic need. There should be evidence that the candidate will continue to successfully fill the programmatic need for which the reappointment is made and to make meritorious contributions to his or her discipline and to the School.

The term of reappointment will generally be for six years and may be renewed (based on fulfillment of the applicable criteria and subject to continuing programmatic need) for an unlimited number of subsequent terms.

3. Promotion to Clinical Assistant Professor

Promotion to the rank of Clinical Assistant Professor will be considered for those who have demonstrated excellence in the overall mix of clinical care, teaching, administrative and/or scholarly activities during their terms of appointment as Clinical Instructor. There should be evidence that the candidates will successfully continue to fill the programmatic need for which the appointment is made and to make meritorious contributions to the discipline and to the School.

The term of appointment for this promotion will generally be for four years.
E. Specific/Supplemental Criteria for Clinical Associate Professors

1. Appointment as Clinical Associate Professor

Appointment to the rank of Clinical Associate Professor in the Clinician Educator Line will be considered for those who have demonstrated excellence in the overall mix of clinical care, teaching, administrative and/or scholarly activities. There should be evidence that candidates have attained regional recognition as superior clinicians, teachers, institutional leaders and/or scholars. There should be evidence that the candidates will successfully fill the programmatic need for which the appointment is made and will make meritorious contributions to their discipline and to the School. Previous meritorious academic service on the faculty of a comparable medical school will be considered favorably when evaluating qualifications for initial appointment as Clinical Associate Professor.

The term of appointment will generally be for five years.

2. Reappointment as Clinical Associate Professor

Clinical Associate Professors are assessed for reappointment on the basis of demonstrated excellence in the overall mix of clinical care, teaching, administrative and/or scholarly activities. There should be evidence that candidates have attained regional recognition as superior clinicians, teachers, institutional leaders and/or scholars. There should be evidence that the candidates will successfully continue to fill the programmatic need for which the appointment is made and to make meritorious contributions to their discipline and to the School.

The term of reappointment will generally be for five years and may be renewed (based on fulfillment of the applicable criteria and subject to continuing programmatic need) for an unlimited number of subsequent terms.

3. Promotion to Clinical Associate Professor

Promotion to the rank of Clinical Associate Professor will be considered for those who have demonstrated excellence in the overall mix of clinical care, teaching, administrative and/or scholarly activities during their terms of appointment as Clinical Assistant Professor. There should be evidence that candidates have attained regional recognition as superior clinicians, teachers, institutional leaders and/or scholars. There should be evidence that the candidates will successfully continue to fill the programmatic need for which the appointment is made and to make meritorious contributions to their discipline and to the School. In special cases, other factors may be considered for promotion for those individuals who do not have regional prominence, including extraordinary contributions in such broadly defined areas as teaching and clinical excellence, innovation, program building, scholarship and/or administrative activities.
The term of appointment will generally be for five years and may be renewed (based on fulfillment of the applicable criteria and subject to continuing programmatic need) for an unlimited number of subsequent terms.

F. Specific/Supplemental Criteria for Clinical Professors

1. Appointment as Clinical Professor

Appointment to the rank of Clinical Professor will be reserved for individuals who have demonstrated exceptional performance in clinical care, teaching, administration and/or scholarship and who are widely recognized as leaders in their field. There must be evidence that these individuals have attained national recognition as superior clinicians, teachers, institutional leaders and/or scholars, that they have demonstrated continuing excellence and progressive maturation as physicians and teachers, and that they will successfully fill the programmatic need for which the appointment is made and will continue to make outstanding contributions to their discipline and to the School. They may be recognized nationally as leaders of the health care system or of organizational change and measurement of health care systems.

The initial term of appointment will generally be for five years.

2. Reappointment as Clinical Professor

Reappointment at the rank of Clinical Professor will be reserved for individuals who have demonstrated exceptional performance in clinical care, teaching, administrative and/or scholarly activities during their term of appointment as Clinical Professor and who are widely recognized as leaders in their field. There must be evidence that these individuals have attained national recognition as superior clinicians, teachers, institutional leaders and/or scholars, that they have demonstrated continuing excellence and progressive maturation as physicians and teachers, and that they will successfully continue to fill the programmatic need for which the appointment is made and to make outstanding contributions to their discipline and to the School. They may be recognized nationally as leaders of the health care system or of organizational change and measurement of health care systems.

The term of reappointment will generally be for five years and may be renewed (based on fulfillment of the applicable criteria and subject to continuing programmatic need) for an unlimited number of subsequent terms.

3. Promotion to Clinical Professor

Promotion to the rank of Clinical Professor in the Clinician Educator Line will be reserved for individuals who have demonstrated exceptional performance in clinical care, teaching, administrative and/or scholarly activities during their terms as Clinical Associate Professor and who are widely recognized as leaders in their field. There must be evidence that these individuals have attained national recognition as superior clinicians, teachers, institutional
leaders and/or scholars and that they have demonstrated continuing excellence and progressive maturation as physicians and teachers, and that they will successfully continue to fill the programmatic need for which the appointment is made and to make outstanding contributions to their discipline and to the School. They may be recognized nationally as leaders of the health care system or of organizational change and measurement of health care systems. In special cases, other factors may be considered for promotion for individuals who do not have national prominence, including extraordinary contributions in such broadly defined areas as teaching and clinical excellence, innovation, program building, scholarship and/or administrative activities.

The term of appointment for this promotion will be for five years and may be renewed (based on fulfillment of the applicable criteria and subject to continuing programmatic need) for an unlimited number of subsequent terms.

G. Specific/Supplemental Criteria for Staff Emeritus or Staff Emerita

1. Appointment as Clinical Associate Professor or Clinical Professor, Staff Emeritus or Staff Emerita

Upon retirement and upon meeting certain qualifications, Clinician Educators may request Staff Emeritus or Staff Emerita status. Such status is not automatic; it must be officially requested and reviewed on a case-by-case basis. Staff Emeritus or Staff Emerita status may be considered for Clinician Educators who hold the rank of Clinical Associate Professor or Clinical Professor at the time of their retirement. The Clinician Educator must qualify to be a regular retiree (the Benefits Office confirms eligibility), and must have completed 20 or more years of Stanford service. Requests should be submitted in writing to the Associate Dean of Human Resources, School of Medicine and should include the name and full academic title of the Clinician Educator, confirmation that he/she is eligible to be an official retiree, the retirement date, and reasons for requesting Staff Emeritus or Staff Emerita status. Requests are reviewed by the Dean of the School of Medicine, who shall make his or her decision as to whether to forward the request with his or her positive recommendation to the President of the University. For questions about eligibility or if an exception is desired, please call the Assistant to the Associate Dean for Human Resources, School of Medicine, at (650) 723-5975. Clinician Educators (Affiliated) are not eligible for Staff Emeritus or Staff Emerita status.

Chapter 3.4 Evaluation Processes at the Department and School Levels

A. Overview

The purpose of the appointment, reappointment or promotion evaluation is to appraise, on the record to date, the candidate’s standing in his or her field. Decisions on appointment, reappointment and promotion are subject to the exercise of professional and scholarly judgment and discretion by departmental faculty and academic leadership at the School level. The criteria
and guidelines outlined in Chapter 3.2 of this Handbook should be read and applied by all those who cast a vote on an appointment, reappointment or promotion action.

The University recognizes that there are significant variations in how candidates qualify for and secure appointment according to field and discipline. Candidates come from different backgrounds and receive different educational training. In addition, there may be great variation in emphasis among the components of activity (i.e., clinical care, teaching, administrative and/or scholarly activity). Nevertheless, all appointments have in common the requirement of excellence, however measured.

Procedures for the evaluation process at the department and School levels are described below. Departures from these guidelines should be rare and for good reason. Procedural questions should be addressed to the Office of Academic Affairs.

Instructions for assembly of each component of the appointment, reappointment or promotion form, including the process for compiling a list of proposed evaluators (referees and trainees) is available on the Office of Academic Affairs website

B. Confidentiality

The entire appointment, reappointment or promotion proceedings during which specific candidates are discussed are to be held in strict confidence by all participants. The opinions expressed by the School or department faculty or by internal or external referees shall not be discussed with the candidate or with other parties. This policy ensures that the candidacy of each person is treated with utmost confidentiality. It also provides an opportunity for those making the evaluation to have the freedom to provide written evaluation or to discuss the candidates during committee meetings without fearing that their comments will be shared outside the deliberations.

A breach of confidentiality by a participant in an appointment, reappointment or promotion case is a serious breach of professional ethics and may subject the individual to discipline.

The Vice Dean of the School of Medicine or the chair of the department (or his or her designate) will convey whatever information needs to be transmitted to the candidate.

C. Role of the Department chair

The department chair is responsible for compliance with School guidelines regarding Clinician Educator appointments, reappointments and promotions. He or she ensures that those conducting Clinician Educator evaluations are fully informed about these guidelines in order to avoid delays and other problems due to deficiencies in procedure and documentation.
The ultimate decision on whether to forward the appointment, reappointment or promotion to the Vice Dean of the School of Medicine with a positive or negative recommendation is made by the department chair in his or her judgment and discretion.

D. Timing of Evaluations

After a candidate has been identified, the department chair, or his or her designate, is responsible for seeing that the appointment file is completed in a timely manner. Departments are advised to allow the minimum time period specified on the Office of Academic Affairs website in advance of the effective date for completion of school review and to be informed of special submission deadlines posted on the Office of Academic Affairs’ website. For this reason, under normal circumstances, reappointment and promotion reviews for Clinician Educators are initiated approximately six months in advance of the appointment end date.

E. Departmental Review

Departments vary in their practices regarding preparation and approval of Clinician Educator appointment, reappointment and promotion files. Several departments have established a departmental Clinician Educator Appointments and Promotions Committee that advises the department chair. At a minimum, the department chair (and division chief, if applicable) must approve a recommendation.

F. Review by the Office of Academic Affairs

The appointment, reappointment or promotion file is submitted by the department chair to the Office of Academic Affairs for review by the Vice Dean of the School of Medicine (or a designate). The Vice Dean may, in his or her judgment, make a negative decision on the file or take such other action as deemed appropriate, including request additional information or remand the action to the department.

After having received such review by the Office of Academic Affairs and after any suggested revisions have been incorporated or other issues have been resolved, the file is then submitted to Academic Affairs for distribution to the appropriate Clinician Educator Appointments and Promotions Committee. The Committee considers all actions with the exception of Clinical Instructor appointments and reappointments, which are approved by the Vice Dean for Academic Affairs (or his or her designate).

G. The Clinician Educator Appointments and Promotions Committee and Vice Dean

The School of Medicine Clinician Educator Appointments and Promotions Committees are standing committees, advisory to the Vice Dean of the School of Medicine, and appointed to review and assess the academic credentials of Clinical Assistant Professors, Clinical Associate Professors and Clinical Professors, in the Clinician Educator line. For information regarding the
committees and procedures, please visit: http://med.stanford.edu/academicaffairs/faculty/promotion-reappointment/decision-makers.html#ce-roles.

Upon receipt of a recommendation (whether positive or negative) from the Clinician Educator Appointments and Promotions Committee, the Vice Dean of the School of Medicine, in his or her judgment and discretion, will make his or her decision as whether to approve or overturn a positive recommendation, approve or overturn a negative recommendation, remand the file with further instructions, or take such other action as in his or her judgment is deemed appropriate.

The Vice Dean’s decisions on all actions are provided to the department. It is the responsibility of departments to inform Clinician Educators of all decisions and changes in their terms of appointment resulting from reappointments. Reconsideration of a negative decision by the Vice Dean will occur only if the department provides convincing evidence that new and material information bearing on the case exists, such as information that could not have been available in the original evaluation. Reconsiderations are rare and may be avoided by consultation between the department chair and the Vice Dean at appropriate intervals in the process.

Chapter 3.5 Compensation and Benefits

A. Compensation

Salary is set annually, with changes based on merit, performance, department resources, and in accordance with the overall annual salary programs promulgated by the Provost and the School of Medicine. Changes in salary occur annually and are effective for the start of the fiscal year.

The Dean of the School of Medicine (or his or her delegate) approves a Clinician Educator’s salary on recommendation from the department chair in advance of any commitment to the candidate. Compensation consists of a base salary and may have a performance-based incentive subject to eligibility and performance. Departments must utilize equitable pay practices, including salaries aligned with an approved Department Salary Step Progression table, if applicable, when determining compensation. Departments are to ensure individual differences in pay for Clinician Educator doing substantially similar work are appropriately based on seniority, merit, the quantity or quality of work and/or other bona fide factors such as education, training and experience applicable to the business requirements of the position, as well as considering if the Clinician Educator meets the funding expectations appropriate for their rank and line. If proposed total compensation (base plus any administrative supplement) or total annual incentive equals or exceeds the limits set by the Stanford University Board of Trustees Compensation Committee, advance approval by the Provost and that Committee is required.

If a Clinician Educator is concurrently employed by Stanford University and by the Veterans Affairs Palo Alto Health Care System (“VAPAHCS”), the Stanford base salary will be prorated by the University and paid based on the percentage of the School of Medicine appointment. The VAPAHCS will pay the Clinician Educator at its rate for the VAPAHCS portion of employment.

Updated June 2019
B. Benefits

Clinician Educators who meet the eligibility criteria have access to certain Stanford exempt regular staff comprehensive benefits after employment begins, including medical, dental, vision, life and disability insurance, professional development opportunities, retirement plans, and a college tuition grant program for eligible dependents.


The University also provides expert assistance with childcare, elder care and other work and family support. Information is available from the WorkLife Office website, http://www.stanford.edu/dept/worklife/cgi-bin/drupal/.

C. Housing and Relocation

Housing and relocation information and assistance is available regarding rental resources, information on the housing market, cities, neighborhoods, schools, moving vendors, etc. Additional information is available from the School of Medicine’s relocation office, http://med.stanford.edu/relocation.

In recognition of the high cost of living in the Bay Area, the University provides Clinician Educators at the rank of Clinical Assistant Professor or above and meeting certain conditions of appointment with generous housing programs designed to assist in the purchase of a home. Additional information is available from the Stanford University Faculty and Staff Housing Office, http://www.stanford.edu/dept/fsh/CE/.

Housing benefits are available to eligible Clinician Educators at the time of application for such benefits and are subject to continuing eligibility and program guidelines, which are subject to change from time to time. Reductions in percent time and/or duration of appointment may affect eligibility for housing benefits.

D. Identification Cards and Privileges

Clinician Educators are eligible for a Stanford University Faculty/Staff machine-readable photo identification card that allows use of Department of Athletics, Physical Education and Recreation and library facilities and services.

E. SUNetId

The SUNet ID is a unique account name that identifies an individual as a member of the Stanford community, with access to the Stanford University Network of computing resources and services. The SUNet ID is a permanent and visible part of the individual’s Stanford identity. More information is available at http://accounts.stanford.edu/

Chapter 3.6 Absences, Time Off with Pay, Professional Development Leave Opportunities

A. Paid Absences

1. Paid Sick Leave Law

Clinician Educators are eligible for 3 days of paid sick leave. Please refer to admin guide https://cardinalatwork.stanford.edu/benefits-rewards/time-away/paid-time/sick-time.

2. Time Off with Pay

Clinician Educators are not eligible for vacation and do not accrue vacation time. Clinician Educators are eligible for time off with pay from regularly scheduled service (not including time off due to holiday closure) that can be scheduled throughout the year with departmental approval based on clinical needs, clinical and/or teaching commitment and responsibilities. Time off with pay may be granted up to 22 days per year, pro-rated for the Clinician Educator’s percent time of appointment and start date. Time off with pay is available at the beginning of the calendar year and may not be carried forward from year to year. Pay in lieu of time off is not possible, except in unusual circumstances justified by clinical needs of the department. The department chair must approve such exceptions, in advance in writing. Time off with pay has no cash value, and is not paid out in any fashion at the time that employment ends. Departments are responsible for tracking time off with pay.

3. Paid Conference Leave

Benefits-eligible Clinician Educators are eligible for paid conference leave that may be taken for the purpose of attending professional development conferences or for participating in similar professional development opportunities.

Paid conference leave is not automatic and must be applied for and approved by the department in advance. Clinician Educators should work with their service chiefs and department chairs to assure adequate coverage of their clinical services while they are on paid conference leave.

The most up to date information on the School of Medicine Faculty Handbook, Chapter 3: Clinician Educators can be found on the Faculty Handbooks website, starting Fall 2019.
4. Family Care and Medical Leaves

Clinician Educators are eligible for time off due to their own serious health condition (including pregnancy disability), the serious health condition of a family member, to bond with a new baby or in connection with military service. For information regarding types of leaves, criteria for each leave and duration, including those available under the Family Medical Leave Act, the California Family Rights Act and California’s Pregnancy Disability Leave law, see Administrative Guide Section 2.3.5. Specific questions should be directed to University Human Resources, Disability and Leave Services. https://hr.stanford.edu/processes/disability-and-leave-services

If a Clinician Educator is disabled, he/she is expected to file for short-term disability benefits. In connection with certain leaves, Clinician Educators may be eligible to receive a supplement in the form of reduced salary to coordinate with any disability benefits or Paid Family Leave benefits they receive and in order to maintain their regular salary for a portion of their leave. For more information, the Clinician Educator should contact his/her department about the Salary Supplement Policy for Clinician Educators. Clinician Educators also may use any available sick leave or time off with pay to supplement disability benefits.

5. Professional Development Leave Program

The Clinician Educator Professional Development Leave Program (“the Program”) was established on July 1, 2004. Its purpose is to free Clinician Educators from their normal clinical and teaching duties, enabling them to pursue training and/or educational-related projects or opportunities that will enhance their patient care and teaching activities at Stanford. Professional development leave should not be used for maternity-related leave.

Clinical Assistant Professors, Clinical Associate Professors and Clinical Professors who are benefits eligible (that is, appointed at 50% full time effort (FTE) or more and for an appointment of six months or longer duration) are eligible for the Program.

Professional development leave is with salary from Stanford University and benefits continue for a Clinician Educator on a professional development leave. A Clinician Educator may not take a regular or administrative position at another hospital, clinic or academic institution during the leave.

Additional information about the Program is available on the Office of Academic Affairs’ Clinician Educator page, http://med.stanford.edu/academicaffairs/CEs/.

6. Additional Assistance for Professional Development

Clinician Educators may have two categories of professional development assistance available to them, as follows:
The most up to date information on the School of Medicine Faculty Handbook, Chapter 3: Clinician Educators can be found on the Faculty Handbooks website, starting Fall 2019.

STAP (Staff Training Assistance Program) funds of up to a certain amount per year may be used for job-related training. For instance, they may be used to pay registration fees for conferences.

STRP (Staff Tuition Reimbursement Program) funds of up to a certain amount per year may be used for undergraduate or graduate degree programs.

These funds are pro-rated based on FTE. Further information about these programs may be found on the Education Assistance Programs website.

B. Unpaid Absences

During an unpaid absence a Clinician Educator does not receive pay from the University. Administrative Guide Section 2.1.8, Miscellaneous Authorized Absences, covers various types of leave from the University. Section 2.1.8.2 describes several types of leave of absence without salary and addresses benefits continuation during an unpaid leave of absence. In determining whether to grant a request for unpaid leave, consideration will be given to the type of absence, the impact on programmatic need, and whether the absence is to be partial or complete, and the duration of the absence; approval of an absence exceeding 12 months should be rare. A Clinician Educator may be placed on personal leave without pay at a department's discretion and with advance approval from the Office of Academic Affairs. An unpaid leave of absence must be for a definite period with specific starting and ending dates and cannot extend beyond the end of a fixed-term appointment. General policies for Leaves of Absence appear in Administrative Guide Section 2.1.8.3.

Chapter 3.7 Other Policies

A. Clinical Care Activities and Revenue

The Faculty Practice Policy for clinicians in the School of Medicine governs all clinicians in the School of Medicine involved in clinical care activities and the revenue generated by them. Compliance with this policy is a condition of employment. The policy is available in the Other Guidelines section of the Toolbox on the Office of Academic Affairs website http://med.stanford.edu/academicaffairs/tools/tables-checklists.html.

B. Patent and Copyright

All employees are required to sign a Stanford University Patent and Copyright Agreement. The policies at http://doresearch.stanford.edu/policies/research-policy-handbook/intellectual-property apply to all individuals who work at Stanford, or who come here to engage in research.
C. Data Security

The School of Medicine Data Security Program mandates enterprise backup and encryption of all computers and mobile devices used for Stanford business by faculty, staff, students and other affiliates, if the device might store or access Protected Health Information (PHI) or other High Risk Data. This requirement applies to both Stanford-owned and personally owned equipment. All individuals in the School of Medicine must complete a Data & Device Attestation to Identify whether they are exposed to High Risk Data and, if so, the kinds of devices they use. All Clinician Educators must submit a Data & Device Attestation at https://med.stanford.edu/datasecurity within seven days of his or her initial appointment start date.

D. Conflicts of Interest and Commitment

1. Applicability of the Stanford University Faculty Policy on Conflicts of Interest and Commitment

The Stanford University Faculty Policy on Conflicts of Interest and Commitment and the policies pertaining to consulting and other outside professional activities by members of the professorate apply to Clinician Educators, http://doresearch.stanford.edu/policies/research-policy-handbook/conflicts-commitment-and-interest. If a situation raising questions of conflict of interest or commitment arises, a Clinician Educator is urged to discuss the situation with his or service chief or department chair and contact the Director of the School of Medicine Conflict of Interest Review Program at (650) 723-7226.

2. Training and Disclosure

All new Clinician Educators members must complete the training tutorial titled Avoiding Financial Conflicts of Interest. This is a self-paced, web-based module designed to provide an overview of the high-risk situations that can lead to financial conflicts of interest for Clinician Educators. Additional information about the module can be found at the COI website http://stanford.edu/group/coi/training/training.html. It is available to all members of the Stanford community with SUNetIds through the Stanford Training and Registration System (STARS).

In addition, all new and continuing Clinician Educators must disclose any outside professional activities that could reasonably be seen to be related to their Stanford responsibilities in research, teaching, administrator, or clinical care activities in Stanford's Outside Professional Activities Certification System (OPACS), https://opacsprd.stanford.edu.

3. Stanford Industry Interactions Policy (SIIP)

Clinician Educators are expected to comply with the Stanford Industry Interactions Policy (SIIP) that governs interactions, largely in the clinical and educational arenas, with the pharmaceutical, biotech, medical device, and hospital and research equipment and supplies...
industries. Additional information is available School of Medicine website, http://med.stanford.edu/coi/siip/.

4. Academic Appointments at Other Institutions

A concurrent academic appointment at another institution is not permitted for a Clinician Educator holding a full time appointment at Stanford. If a Clinician Educator’s Stanford appointment is to be full time and he/she holds an appointment at another academic institution, regardless of whether it is a paid position or an unpaid position, he/she must resign from it before his/her Stanford appointment begins. Any exceptions to this policy require the approval of the Vice Dean.

E. Use of Stanford Name or Marks

The Stanford University or School of Medicine name or marks may only be used only in direct relation to Stanford-related duties, activities and responsibilities.

See the following for guidance:
- Administrative Guide Memo 1.5.4
- Stanford Trademark and Name Use Guidelines: https://trademarks.stanford.edu/name-use-guidelines
- School of Medicine Brand Identity Guide: http://med.stanford.edu/identity.html

Questions about the appropriate use of the Stanford name are to be directed to the School of Medicine’s here: sombranding@stanford.edu

F. Mandatory Reporting of Child Abuse and Neglect

California law requires certain individuals at Stanford to report known or reasonably suspected child abuse or neglect to the authorities. These individuals are known under the law as "Mandated Reporters". Information about mandatory reporting and links to the California penal code provisions are available at http://uhr.stanford.edu/mandatory-reporting-child-abuse-and-neglect. Employees and others who have been identified as Mandated Reporters for Child Abuse are required to sign the online "Acknowledgment of Mandated Reporter Status" form following instructions on http://uhr.stanford.edu/form-instructions.

G. Blood Borne Pathogens

The California Blood Borne Pathogen (BBP) Standard requires than an employee who has been determined to come into contact with human blood and/or other potentially infectious materials (OPIM) participate in an initial training and an annual update training session for as long as he or she remains exposed to those materials. In addition, the employee is required to either be vaccinated with the Hepatitis B vaccine within ten working days of his or her initial assignment or sign a declination statement if he or she chooses not to be vaccinated.
H. Health Insurance Portability and Accountability Act (HIPAA)

The Health Insurance Portability and Accountability Act (HIPAA) regulations provide significant privacy protections for the health information of patients and research subjects. As an academic medical center, School of Medicine—Stanford Medicine has implemented training for all staff to address the management of health data in research, education and clinical care. All new employees with the School of Medicine are required to complete HIPAA training within thirty days of the employment date, but, in any case, before the employee begins any work that requires handling of patient health information (PHI) or human subjects' health information. The training provides guidelines and requirements regarding handling of PHI, privacy, security, and other aspects of HIPAA. Compliance with School of Medicine policy, https://acp.stanford.edu/hipaa/hipaa, regarding HIPAA training and handling of confidential/private PHI is required and a condition of employment; failure to complete training, or any inappropriate handling and/or disclosure of PHI may be grounds for termination.

I. Sexual Harassment

Stanford University's sexual harassment policy appears in Administrative Guide Memo 1.7.1. California AB1825 mandates that all Clinician Educators and supervisory staff must complete at least two hours of sexual harassment prevention training at least every two years. Newly hired or promoted Clinician Educators and supervisors must complete this training within six months of employment or promotion. The University cannot exempt any supervisors -- faculty or staff -- from this legal obligation. Failure to complete the training by the deadline date will be reported to the Dean and the employee may not be able to remain in a supervisory role.

Chapter 3.8 Clinician Educator (Affiliated)

A. Definition of Clinician Educator (Affiliated)

A Clinician Educator (Affiliated) is employed by another institution with whom the School of Medicine, Stanford Health Care, and/or Lucile Packard Children’s Hospital has a master affiliation agreement which provides for teaching, patient care, administration, scholarship or other duties that advance the missions of School of Medicine, Stanford Health Care and Lucile Packard Children’s Hospital, as well as the Clinical Educator (Affiliated)’s own institution. (Individuals in private practice or employed by institutions having no affiliation agreement with School of Medicine, Stanford Health Care or Lucile Packard Children’s Hospital are appointed as Adjunct Clinical Faculty (see Chapter 6 of this Handbook).)

Clinician Educator (Affiliated) is an academic title only, and the service provided by a Clinician Educator (Affiliated) to School of Medicine, Stanford Health Care and/or Lucile Packard Children’s Hospital is voluntary. It is an at-will arrangement and either party may withdraw any time and for any reason. A Clinician Educator (Affiliated) is not employed by Stanford University and does not receive compensation by or through Stanford University.
Stanford School of Medicine department chairs and division chiefs, in consultation with their counterparts at affiliated institutions, determine the appropriateness of an academic appointment as Clinician Educator (Affiliated) for attending physicians, other medical providers or collaborators who have frequent and sustained interaction with Stanford students and trainees, or have key roles in Stanford collaborative projects with clinical relevance. An academic appointment may not be deemed necessary for individuals with casual or infrequent student/trainee interaction. However, a Stanford academic appointment as a Clinician Educator (Affiliated) is appropriate for persons holding administrative positions at the affiliated institution, e.g., department chair, chief of service.

**B. Clinician Educator (Affiliated) Role**

The Clinician Educator (Affiliated) role is defined by engagement in teaching, clinical care, administrative and/or scholarly activities that advance clinical medicine.

With four ranks and opportunities for reappointment and promotion, the Clinician Educator (Affiliated) line is structured as a career path for both junior and more senior clinicians, educators, administrators and scholars who are employed elsewhere but who add value to the School by providing essential activities that advance the missions of the School of Medicine, Stanford Health Care and Lucile Packard Children’s Hospital. The Clinician Educator (Affiliated) is normally a highly qualified, licensed M.D. (or equivalent medical degree), Ph.D. or holds a terminal degree in his/her field.

**C. Programmatic Need and Position**

Programmatic need must be evaluated and established for each Clinician Educator (Affiliated) appointment, reappointment and promotion.

**D. Licensure, Malpractice Insurance, and Authorization to Work**

Clinician Educator (Affiliated) appointment is contingent upon the Clinician Educator (Affiliated) having and maintaining professional licensure, medical staff privileges, and malpractice insurance appropriate to their duties at the affiliated institution(s) and, in certain circumstances, at Stanford Health Care and/or Lucile Packard Children’s Hospital, as required.

**E. Titles and Ranks**

The Clinician Educator (Affiliated) ranks are:

- Clinical Instructor (Affiliated)
- Clinical Assistant Professor (Affiliated)
- Clinical Associate Professor (Affiliated)
- Clinical Professor (Affiliated)
The word “Affiliated” must be included as part of the title for those holding a Clinician Educator (Affiliated) appointment.

The appointment, reappointment and promotion criteria, duration, evidentiary requirements and review processes are generally the same for Clinician Educators (Affiliated) as for Clinician Educators who are employed by Stanford. Please see Chapter 3.2 and Chapter 3.3 above.

**F. Concurrent Appointments**

Clinician Educator (Affiliated) may have a concurrent appointment. Please see Chapter 3.1 (G) above for additional guidance.

**G. Duration of Appointments**

All Clinician Educator (Affiliated) appointments are for the same term of years as Clinician Educator. The appointment is dependent upon and coterminous with his or her employment by the affiliated institution and the existence of the affiliation agreement. If his or her employment ends, or the affiliation agreement ends, before the Clinician Educator (Affiliated) appointment term end date, then the appointment ends as well. In addition, as stated above in Section (A), Clinician Educator (Affiliated) is an at-will arrangement and either party may withdraw any time and for any reason. Therefore, even if the Clinician Educator (Affiliated) employment with the affiliated institution and the existence of the affiliation agreement continue, the School of Medicine may terminate the appointment at any time and in its sole discretion. Please see Chapter 3.1 (H) above for additional guidance.

**H. Letters of Invitation**

It is the responsibility of the department chair to ensure that a candidate for appointment as a Clinician Educator (Affiliated) is informed in writing of, and agrees to, the terms and conditions of his or her proposed appointment. This requirement is met with the issuance of a letter of invitation. The approved letter of invitation template is available in the Toolbox on the Office of Academic Affairs’ website, http://med.stanford.edu/academicaffairs/tools/letter-templates.html. All letters of invitation are contingent upon final review and approval by the School of Medicine.

It is the responsibility of departments to inform Clinician Educators (Affiliated) in writing of any changes in their term of appointment resulting from reappointments or promotions. Departments may provide a formal letter to the candidate with the following statement, as an example, “This will confirm your «Action Type» as «Rank» in the Department of «Department Name» for the period «Appt Start Date» to «Appt End Date».” Alternatively, departments may notify the candidate of the dates of the fixed-term appointment by forwarding Office of Academic Affairs’ approval notification email.

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I. Resignations

For planning purposes, it is helpful to the Office of Academic Affairs if Clinician Educators (Affiliated) notify their department/division as soon as possible of any intention to resign. Therefore, if a Clinician Educator (Affiliated) resigns before his or her appointment ends, a written statement of resignation should be submitted to department/division leadership that includes the date of the resignation with a copy to the Vice Dean. The department retains the ultimate decision with respect to the effective date of the resignation if an earlier departure is consistent with operational and programmatic needs.

J. Termination and Nonrenewal

A Clinician Educator (Affiliated) may be separated from his or her appointment prior to the planned termination date. No set period of notice is required for termination or nonrenewal of an appointment. Notice of nonrenewal or termination should be in writing from the department chair to the Clinician Educator (Affiliated) with a copy to the Vice Dean. There are no formal grievance or appeal processes available to Clinician Educators (Affiliated) who have received a notice of nonrenewal or whose appointment has been terminated, but the individual may communicate with the department chair or with the Vice Dean (or a designate) concerning the matter.

As noted above, although continued affiliation in the form of a reappointment or promotion may occur, there is no entitlement to such action at the end of a term, and it is not automatic. Renewal of appointment will depend on availability of the Clinician Educator (Affiliated) to fulfill the department’s pedagogical obligations and the match between their teaching and interpersonal skills and the department’s needs at the time. At the end of a Clinician Educator (Affiliated)’s appointment term, he or she may be offered a renewal for the same or a different term at the sole discretion of the School of Medicine. Renewal is not guaranteed.

K. Appointment Files

The Personnel Files and Data policy found in Administrative Guide Memo 2.1.3, https://adminguide.stanford.edu/chapter-2/subchapter-1/policy-2-1-3 applies to the personnel files of Clinician Educators (Affiliated). Section 2.1.3.4, Access & Use, reflects Stanford’s policy of many years that an individual should be able to learn the general substance of the information contained in his or her personnel file.

However, material supplied to the University by a third party (whether inside or outside the University), or supplied by a member of the University to a third party, is presumed to be confidential unless otherwise stated and should not be shown to the individual. Because the quality of the University’s appointment, reappointment and promotion process depends on the candor of the participants of the process, Stanford’s policy is to protect vigorously the sources of information. Accordingly, materials in a Clinician Educator (Affiliated)’s appointment file such as peer evaluations from outside and inside sources, letters from students, departmental or

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higher-level documents regarding the review process, and documents containing statements based on personal knowledge, judgments or opinions are regarded as confidential. Such material should, therefore, upon request, be summarized by a responsible School officer in a manner that preserves the confidentiality of the source of the information.

L. Stanford Privileges Available to Clinician Educator (Affiliated)

1. Identification Cards and Privileges

Clinician Educators (Affiliated) are eligible for a Courtesy Card that allows use of library facilities and services, including Lane Library borrowing privileges. Off-campus access to online databases requires the appointing Stanford department to sponsor the Clinician Educator (Affiliated) for a base SUNet ID for computing services, as long as the person to be sponsored meets basic eligibility requirements. More information is available at http://itservices.stanford.edu/service/sponsorship.


2. SUNet ID

The SUNet ID is a unique account name that identifies an individual as a member of the Stanford community, with access to the Stanford University Network of computing resources and services. The SUNet ID is a permanent and visible part of the individual’s Stanford identity. A SUNet ID requires department sponsorship. More information is available at http://accounts.stanford.edu/

M. Other Policies Applicable to Clinician Educator (Affiliated)

In addition to complying with federal and state laws and regulations, and the policies and procedures of the Clinician Educator (Affiliated)’s employer, Clinician Educator (Affiliated) are also required to:

- obtain and maintain unrestricted privileges at his/her affiliated institution as required by his or her assigned duties and at any other facility to which the Clinician Educator (Affiliated) may be assigned by his/her employer; and
- comply with the Clinician Educator (Affiliated) employer’s policies and procedures concerning the Health Insurance Portability and Accountability Act (HIPAA), blood borne pathogens (BBP), prohibited health information (PHI), data security, respectful workplace, sexual harassment, mandatory reporting of child abuse and neglect, and conflict of interest, including industry interactions.
1. Patent and Copyright

All persons participating or intending to participate in research projects at Stanford must also sign a Stanford Patent and Copyright Agreement.

2. Conflicts of Interest and Commitment

   a. Stanford Industry Interactions Policy (SIIP)

   Clinician Educators (Affiliated) are expected to comply with the Stanford Industry Interactions Policy (SIIP) that governs interactions, largely in the clinical and educational arenas, with the pharmaceutical, biotech, medical device, and hospital and research equipment and supplies industries. Additional information is available School of Medicine website, http://med.stanford.edu/coi/siip/.

   b. Academic Appointments at Other Institutions

   A concurrent academic appointment at another institution is not permitted for a Clinician Educator (Affiliated) and he/she must resign from it before his/her Stanford appointment begins. Any exceptions to this policy require the approval of the Vice Dean.

3. Use of Stanford Name or Marks

Membership in the Clinician Educator (Affiliated) line entitles a Clinician Educator (Affiliated) to identify himself or herself as such and to include his or her Clinician Educator (Affiliated) title on stationery, email signature blocks, business cards, and (with advance approval and in limited circumstances, such as those rare occasions when the research relates specifically to the Clinician Educator (Affiliated) member’s Stanford-related duties, activities and responsibilities) in certain publications. When using their Clinician Educator (Affiliated) titles, appointees must include the word “(Affiliated)”, for example “Clinical Assistant Professor (Affiliated)”. Because the production of written scholarship is not, in general, a requirement of a Clinician Educator (Affiliated) appointment, the use of the title on publications may only be included when the use has advance, written approval from the department chair.

The Stanford University or School of Medicine name or marks may only be used only in direct relation to Stanford-related duties, activities and responsibilities.

See the following for guidance:

- Administrative Guide Memo 1.5.4
- Stanford Trademark and Name Use Guidelines: https://trademarks.stanford.edu/name-use-guidelines
- School of Medicine Brand Identity Guide: http://med.stanford.edu/identity.html

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Questions about the appropriate use of the Stanford name are to be directed to the School of Medicine at: sombranding@stanford.edu