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For which type of faculty member does the Academic Role Category (ARC) Form apply?

It only applies to Full Time Clinical Academics, and it excludes Limited Duties Adjunct Professors.

What are the new Academic Role Categories meant to do?

Academic Role Categories are a general ratio of how you spend your time, recognizing that some of the activities will happen concurrently and inform each other.

What effective date should be used?

The effective date should be the current date that the ARC is being updated and signed off on. For new appointments, it should coincide with the start date of the appointment.

If I have questions about the ARC, who should I contact?

Please contact your Department/Division Chair and/or Administrative Officer.

Tips on completing the Academic Role Category form

The Academic Role Category Form identifies the category and provides information about the specific faculty member including department, rank, effective date of role category, etc.

There is also a section for each Academic Role Component within each Category:

- Clinical Service
- Teaching
- Research
- Administration
- Health Care Leadership/Role Model/General Contributions.

Each academic role component that is applicable to the specific category must be completed. A range is provided for each component and a defined number for the actual percentage of time allocated to that component must be completed. The actual percentage must fall within the specified range.

In addition, the expectations (i.e. specific job activities) as well as performance indicators must be identified for each applicable role component within the academic role category.

The completed Academic Role Category form is attached to the Department/Hospital letter as well as Western’s Academic Appointment letter. The ARC form is referred to in both letters, and; therefore, there is no need to repeat the expectations in the letter.
How do I assign percentages when a physician works well over 45 hours per week?

The intention of the percentages in the ARC is to indicate what ratio of a physician’s time overall is spent in each category. It might be helpful to think of it over the course of a year rather than a week as time spent in a particular area weekly may fluctuate significantly from one week to another. Overall, what % of their time should be spent in each category based on their role and the Department’s expectations.

What is the difference between Teaching that is counted under Clinical Service versus Teaching that is counted under Teaching in the Academic Role Category form?

**Clinical Service Teaching:**

Clinical Service teaching includes any clinical activity which involves trainees such as:

- Bedside teaching with undergraduate, postgraduate and graduate trainees
- Daily ward rounds which focus on the patients on the clinical service with trainees present
- Observation of trainees interviewing or completing physical examinations in faculty member’s presence.

When completing the Academic Role Category form under Clinical Service, the expectations should include the clinical service activities, types of trainees (e.g. undergraduate, postgraduate and graduate), and the type of clinical teaching (e.g. Bedside teaching, daily rounds, etc.).

Provide the overall % of time allocated to Clinical Service under the Actual Percent for the Clinical Service role component within the range specified for the particular role category (e.g. Clinician Teacher 50%-70%). Then include a note that indicates the % of clinical teaching that is included within the clinical service which can be up to 20% overall. For e.g. an individual may have 65% clinical service and 15% of that may be allocated to clinical teaching which is in addition to the teaching role component.

**Teaching:**

This category of teaching describes a variety of other teaching activities in which the faculty member is the teacher/educator/facilitator such as:

- Independent teaching sessions with trainees around a clinical topic e.g. congestive heart failure, diverticulitis, panic disorder
- Small group teaching sessions on clinical topics e.g. clerkship small group teaching, module lectures
- Didactic lectures e.g. in the first and second year medical school curriculum, lectures at conferences
- Small group teaching in undergraduate curriculum e.g. Clinical Methods, PCCCIA
- Delivery of Continuing Professional Development* e.g. symposium, workshops
- Development of curriculum e.g. learning objectives, content of curriculum, online modules
- Evaluation e.g. Test Committees, development of multiple choice questions, short answer questions, OSCE stations
- Examiner of trainees
- Educational Administration e.g. Course Chair, Program Director, Continuing Professional Development Director

*Continuing Professional Development includes continuing medical education and faculty development.

When completing the Academic Role Category Form under Teaching, the faculty member should document the type of trainees (e.g. undergraduate, postgraduate), the type of teaching activity and the percentage of time involved in teaching within the range specified for the particular role category (e.g. Clinician Teacher 15%-40%).

NOTE: For a faculty member who is tracking to promotion based on strength of teaching in the Provost Stream, the percentage of Clinical Teaching allocated within the Clinical Service component of the Academic Role Category and the percentage of teaching within the teaching component of the Academic Role Category must be a minimum of 30% (i.e. amount of clinical teaching allocated in the Clinical Service role component, up to 20%, plus the amount of teaching activity in Teaching role component would add up to no less than 30%).

How do I define expectations and performance indicators on the Academic Role Category (ARC) Form?

**Expectations and Performance Indicators:** When setting faculty Expectations and Performance Indicators within the ARC, we recommend using the S.M.A.R.T.S criteria.

Effective expectations and indicators should be:
- **Specific:** help the faculty member understand exactly what is expected
- **Measurable:** measurements help the faculty member and leader understand when the expectation is achieved
- **Achievable:** expectations and indicators should be realistic
- **Results Orientated:** expectations should focus on end results
- **Time Bound:** deadlines should be identified where applicable
- **Stretch:** some but not all expectations should be a challenge to reach. Stretch expectations should be realistic. Stretch expectations support the development of the faculty member. Achieving stretch expectations usually equates to high, exemplary performance.

Reference: [http://www.hr.upenn.edu/staffrelations/performance/atipsheet.aspx](http://www.hr.upenn.edu/staffrelations/performance/atipsheet.aspx)
What time period does the Academic Role Category cover?

The Academic Role Category typically would cover a 3 year period, but should be reviewed annually during the Career Development Plan process to ensure that any significant changes are captured.

How does the ARC (Academic Role Category) differ from the CDP (Career Development Plan)?

The ARC is prospective. It includes expectations and performance indicators for your defined role. The ARC is formative.

The CDP is retrospective and details the accomplishments completed, contributions made, and goals achieved in the past academic year. The CDP is summative. The CDP is also a tool used for career development and involves a discussion of the resources needed.

How is the ARC related to remuneration?

The ARC is not specifically tied to remuneration but can be used at a department’s discretion to inform a department specific merit based program.

How is the ARC related to the promotion as outlined in the Conditions of Appointment?

The purpose of the Academic Role Categories (ARC) framework is to ensure Clinical Academics have clear expectations and performance indicators regarding their academic activities. Therefore, while the ARC document is used to track faculty members progress towards promotion, the Conditions of Appointment document defines how faculty members are promoted.

What are the key differences between a Clinician Teacher and a Clinician Educator

Clinician Teacher:
A clinician teacher is a clinical academic whose primary role is in clinical services, and whose major academic contributions are in teaching and in creative clinical activities.

Typical requirements of this role include:
- A clinical teacher may be hired directly following RCPSC/CFPC (or equivalent) certification.
- During the first 3 years of appointment to this role, professional development in education, health care delivery or research is expected.
Clinician Educator:
A clinician educator is a clinical academic whose **primary role is in education**. Clinical service is usually restricted to permit this academic role. Educational research is strongly encouraged. Additional research activities are optional. Performance as a clinical role model is expected.

Requirements of this role include:
- Additional post-certification training (Masters or equivalent) in education is expected.
- An advanced degree in education is desirable.

What are the key differences between a Clinician Researcher and a Clinician Scientist

Clinician Researcher:
Clinician Researcher is a clinical academic **with major roles in both research and clinical service**. An additional substantial teaching role is possible.

A clinician hired in this category will normally have received the following relevant training and appointment arrangement:

- Two years or more of relevant additional research training after completing clinical training;
- Appropriate research training performance and research career plans
- Recruitment supported by an existing (SSMD) research group
- Cross appointed to a research institute and usually to a basic science department

Clinician Scientist:
A clinician scientist is a clinical academic whose **primary role is in research**, with clinical service restricted to maintenance of competence, and with linkage to a research theme.

Typical entry level training and support for individuals in this category include:

- Research training sufficient for an independent research career (normally 3 years or more post-MD);
- Formal cross appointment to basic science department, concurrent with joining the clinical department;
- An advanced degree e.g. MSc, PhD in an area related to research field is desirable.

What are the key differences between a Clinician Educator and a Clinician Researcher?

Clinician Educator:
A clinician educator is a clinical academic whose **primary role is in education**. Clinical
service is usually restricted to permit this academic role. Educational research is strongly encouraged. Additional research activities are optional. Performance as a clinical role model is expected. Typical requirements of this role include:
- Additional post-certification training (Masters or equivalent) in education is expected.
- An advanced degree in education is desirable.

**Clinic Researcher:**
Clinic Researcher is a clinical academic with major roles in both research and clinical service. An additional substantial teaching role is possible.

A clinician hired in this category will normally have received the following relevant training and appointment arrangement:
- Two years or more of relevant additional research training after completing clinical training;
- Appropriate research training performance and research career plans;
- Recruitment supported by an existing (Schulich) research group;
- Cross appointed to a research institute and usually to a basic science department.

**What is the definition of `Role Model’ as used in the Academic Role Category framework document?**

Role Model (from Conditions of Appointment, sec. 4.2.6.3):
Clinical or laboratory practice which contributes to the academic missions of the University. Performance in this category may include but is not limited to the following:
(i) Expert/excellent clinical or laboratory practitioner dedicated to provision of quality patient care;
(ii) Development of innovative techniques;
(iii) Introduction of new techniques to the University medical community;
(iv) Improvements in clinical or laboratory practice; and
(v) Recognized regular contributor of patients and data to clinical trials.

**What is the definition of ‘Health Care Leadership’ as used in the Academic Role Category framework document?**

Health Care Leadership (from Conditions of Appointment, sec. 4.2.6.4):
Performance in this category may include but is not limited to the following:
(i) Health care administration which involves policy development and implementation of change;
(ii) Participation in programs, projects, committees, or consulting roles which have an impact on health care; and
(iii) Health care communication/education of patients and the community.
What is the definition of ‘General Contributions’ as used in the Academic Role Category framework document?

General Contributions in Service or Leadership Within the University, Profession, and/or the Community Which Contribute to the Teaching and Research Missions of the University (from Conditions of Appointment, sec. 4.2.6.4 AND 4.9.1.3):

Performance in this category may include but is not limited to the following:
(i) Major administrative responsibilities;
(ii) Editorial duties;
(iii) Memberships on boards;
(iv) Leadership roles in professional organizations; and
(v) Leadership and participation in University committees.

How much protected time is required for a Clinician Scientist who holds a Canada Research Chair?

There is no minimum or maximum percentage of research required of a Canada Research Chair, however, there is an expected range of 60-75%.

Who is the completed ARC to be sent to for existing Department members?

All completed and signed ARC’s for existing Department members should be sent to the clinical full time academic, the Department, Schulich Human Resources and Medical Affairs in the hospital.