

## McGill Department of Medicine Annual Academic Performance Dialogue Guide

This guide lays out in granular detail expectations and performance metrics to allow a fair, transparent, and equitable annual performance dialogue process across McGill DOM.

Expectations are tied to McGill DOM career path/position profiles which have been harmonised with affiliated hospital Departmental Rules to optimise clarity/congruence in an individual's hospital and university roles.

### CAREER PATH/POSITION PROFILES

Based on a minimum 40hour work week with an upper reasonable limit of 60 hours per week (i.e. if a Faculty member is working more than 60 hrs per week a re-assessment of roles/responsibilities should be discussed).

NB that percentage ranges are provided to allow some flexibility in time allotment within a career path category (e.g. clinician teacher X may devote 70% of their time to clinical work, 15% of their time to teaching 15% of their time to administrative responsibilities and clinician teacher Y may devote 50% of their time to clinical work, 25% of their time to teaching 25% of their time to administrative responsibilities- both aligning with a clinician teacher role career path definition). It is understood for individual faculty member the distribution will add up to 100%.

#### Clinician-Teacher

##### General Description

- Members with major clinical responsibilities whose main academic contribution is teaching

##### Time Distribution

- 50-70% clinical (at a McGill affiliate)
- 15-25% teaching
- 5-25% research, administration

#### Clinician-Educator

##### General Description

- Members with major commitment to teaching, educational administration, and/or scholarly activity in medical education

##### Time Distribution

- 30-40% clinical (at a McGill affiliate)
- 15-25% teaching
- 30-50% education innovation or research, teaching program development or education administration

#### Clinician-Investigator

### General Description

- Members whose major academic activity is to direct a research program, but time commitment to research is less than 50%.

### Time Distribution

- 30-50% clinical (at a McGill affiliate);
- 15-25% teaching
- 25-50% research

### 5-10% administration **Clinician-Scientist**

### General Description

- Members whose major activity is research (regardless of the type of research).

### Time Distribution

- 50-80% research
- 5-25% teaching
- 20-40% clinical (at McGill Affiliate)
- 5-10% administration

### **Clinician or Scientist - Administrator**

### General Description

- Members with major administrative responsibilities that occupy at least half of their time.

### Time Distribution

- 50% or more administration
- Balance in teaching, research, clinical

### **Scientist**

### General Description

- PhD and other non-clinician members whose major activity is research (e.g. non-practicing MD).

### Time Distribution

- 80-90% research
- 10-15% teaching
- 5-10% administration

# EVALUATION CRITERIA FOR ANNUAL PERFORMANCE REVIEW

## TEACHING CONTRIBUTIONS

### 1. Quality

(6) = superior, presents evidence of superior achievement in teaching from course evaluation forms such as above 4.5/5 (or 3.6/4 or 2.7/3) overall on One45 or other evaluations (Minimum 5 evaluations) or a teaching award.

(5) = above average, 4 to 4.5/5 (or 3.2/4 or 2.4/3) or above 4.5 with less than 10 evaluations

(4) = average, 3.5 to 4/5 (or 2.8/4 or 2.1/3)

(2,3) = below average, below 3.5 (or 2.8/4 or 2.1/3) or

1= substantiated learning environment complaint

NB: If no teaching evaluations submitted, default to 4 and note in comments

### 2. Quantity (varies according to job profile)

Formal teaching is teaching that is scheduled in advance as part of a specific education program, distinct from work-based teaching in the clinical setting and research supervision (see below).

Formal teaching may be done at any level, for example:

UGME: Lectures, Small Groups, RAC, TCP, OSCE

PGME: Academic Half Day, OSCE, Simulation Centre

Clinician Investigator Program (CIP)/Other FMHS/McGill: Lectures, seminars

Undergraduate and Graduate teaching courses, lectures, and seminars

Continuing professional development: giving lectures, rounds or seminars

Where applicable, for formal teaching activities, indicate McGill Program, course name, and number of contact hours.

Do not include course/lecture/session preparation time in reported contact hours i.e. only time in direct contact with trainees in a formal/didactic session.

Work-based teaching in the clinical setting refers to teaching that is performed while the faculty member is supervising learners in providing patient care. Examples include teaching sessions in a conference room or at the patient's bedside while attending on CTU or consult service, teaching sessions during ambulatory clinics, or teaching in a procedure or diagnostic testing lab. 20% of time spent on clinical service supervising trainees is accepted as an estimate of actual teaching time,

Research trainee supervision: 2 hours/week per trainee as primary supervisor for undergraduate, MA, MSc, PhD or post-doctoral fellow is accepted as an estimate of teaching time; For research supervision of clinical trainees, or co-supervision of undergraduates, graduate students, or post-doctoral fellows, 1 hour per trainee week is accepted as an estimate of teaching time.

Time spent as an academic advisor or coach to a learner in difficulty should also be recorded

*\*NB Invited lectures given outside of McGill should be indicated under Research Contributions, 3. Scientific & Scholarly Activity*

***Clinician Teacher Profile***

(6) = superior; >120 hours/yr and formal teaching  $\geq$  20 hours to score 6

(5) = exceeds expectations; 80-120 and formal teaching  $\geq$ 10 hours

(4) = meets expectations; 60-79 and formal teaching  $\geq$  5 hours

(3) = below expectations; 40-59

(1/2) = < 40 hours/yr

***Clinician Educator Profile (30-50% education research and administration)***

***Clinician Investigator Profile (25-50% research)***

***Clinician/Scientist - Administrator (50% administration)***

(6) = superior; >60 hours/yr and formal teaching  $\geq$  10 hours to score 6

(5) = exceeds expectations; 40-60 and formal teaching must be  $\geq$  5 hours

(4) = meets expectations; 30-39(must include formal teaching)

(3) = below expectations; 20-29

(1/2)= <20 hours/yr

***Clinician Scientist and Scientist Profiles (50-90% research)***

(6) = superior; >40 hours/yr and formal teaching  $\geq$  10 hours to score 6

(5) = exceeds expectations; 30-40 and formal teaching  $\geq$  5 hours

(4) = meets expectations; 20-29 (must include formal teaching)

(3) = below expectations; 10-19

(1/2) = <10 hours/yr

## CLINICAL CONTRIBUTIONS

### 1. Quality of Clinical Contributions (Good decision making and compassionate care)

Criteria that may be used include: peer evaluations; awards for clinical care; evaluations by trainees relevant to clinical care

(6) = exceptional clinical care – no more than 20% of clinicians should be in this category  
(5) = above average clinical care – no more than 50% of clinicians should be in this category ;  
(3/4) = shows good clinical judgment and overall good patient care  
(1/2) = below expectations; needs improvement

### 2. Quantity of Clinical Contributions

(6) = significantly exceeds expectations for job profile, willing to take on extra clinical work when requested  
(5) = exceeds expectations for job profile  
(4) = meets expectations for job profile  
(3) = below expectations for job profile  
(1/2) = significantly below expectations for job profile

### 3. Clinical Innovation

(6) = initiates/delivers clinical innovations that progress the specialty or is involved in clinical projects for best patient management – must be described; Substantial contributions on committees that pertain to safe and appropriate care (guideline committees; stewardship; medication safety; pharmacy and therapeutics etc) (>10hrs per week).  
(5) = supervisor/leader of a unique specialty unit that grows/innovates clinical care delivery; Important contributions participating in committees that pertain to safe and appropriate care (5-10hrs per week).  
(3/4) = collaborator/contributor to clinical innovation led by others; Some contributions (<5hrs per week) on committees seeking to improve safe/appropriate care.  
(1/2) = below expectations

### 4. Reliability/ Punctuality (i.e. Engagement)

(6) = Greater than 75% attendance at service/program/division/department meetings/rounds/seminars. Prompt signing of charts, discharge summaries, and trainee evaluations. Above average in relevant categories of One45. 100% attendance at graduate student thesis supervisory meetings, comprehensive examinations and thesis defense.  
(5) = Greater than 50% attendance at service/program/division/department meetings/rounds/seminars, plus prompt signing of charts, discharge summaries and trainee evaluations - must provide documentation of attendance. 100% attendance at graduate student thesis supervisory meetings, comprehensive examinations and thesis defense.  
(3/4) = Prompt signing of charts, discharge summaries and trainee evaluations; (2) = Performs basic non-teaching clinical responsibilities, requires reminders  
(1) = below expectations, requires multiple reminders to complete duties; less than 100%

attendance at graduate student thesis supervisory meetings, comprehensive examinations and thesis defense

## ADMINISTRATIVE CONTRIBUTIONS

### 1. Hospital or Research Institute Administration

(6) = superior contribution: major senior administrative hospital or Research Institute role such as DPS or Associate DPS, Director of Research Institute, Associate Director of Research Institute, Hospital Division Director, Chair of CPDP, or comparable role with evidence of significant accomplishments in this role (>20hrs per week)

(5) = major contribution: senior administrative hospital or Research Institute role, Research Program/Platform Leader, CTU Directors or comparable role with good performance (>10hrs per week)

(4) = significant participation: minor administrative role and participation in several hospital or Research Institute committees

(3) = moderate participation: participation in more than one hospital or Research Institute committee

(2) = minimal participation: participation in at least one committee

(1) = no hospital or Research Institute administrative participation

### 2. University Administration

(6) = superior contribution: senior administrative university role such as Dean or Associate Dean, Department Chair with evidence of significant accomplishments in this role (>20hrs per week)

(5) = major contribution senior administrative university role, university Division Directors, Associate Chairs, Residency Program Directors, UGME Course/Unit Directors, Graduate Program Directors etc with good performance (>10hrs per week)

(4) = significant participation: minor administrative role and participation in several university committees (such as undergraduate or residency training; graduate program committees; Pro-Deans for thesis defense; University Tenure Committees)

(3) = moderate participation: participation in more than one university committee

(2) = minimal participation: participation in at least one university committee

(1) = no university administrative participation

### 3. Administration in Outside Organizations

(6) = superior contribution: senior administrative roles such as CIHR Scientific Director, Director of Réseau FRQ-S, CMQ, Royal College and MCC Executive Committees, President of sub-specialty organizations, etc (>20 hrs per week)

(5) = major contribution other senior administrative roles in outside organizations, Chair of Conference planning committees, etc (>10hrs per week)

(4) = significant participation: minor administrative roles in outside organizations

(3) = moderate participation: participation in outside organizations

(1/2) = no participation in outside organizations

## PROFESSIONALISM & COLLEGIALITY

Definition & metrics apply to all job profiles and include the following attributes:

- General willingness to contribute to the program/service when needed including gaps that arise unexpectedly
- Adheres in letter/spirit to the Faculty of Medicine Code of Conduct
- Works respectfully and collaboratively with others
- Responds promptly to email requests for information
- Solution-oriented, which includes contributing to discussion and helping to follow up on solutions
- Committed to FMHS's mission including to underserved populations
- Attends clinical conferences (Grand Rounds and Divisional Rounds) and research conferences (at reasonable levels of participation)
- Participates actively as a mentor in the Department of Medicine formal mentorship program
- Participates in internal review of grants/fellowships/studentships

### Evaluation Scheme

(6) = superior, very dependable and committed with supporting evidence from relevant sections of teaching evaluations, awards, attendance at CME etc. Consistent objective evidence of going above and beyond. Active participation in formal mentorship program mentoring >1 mentee.

(5)= exceeds expectations, very dependable and committed, has taken on extra tasks when required. Some objective evidence of going above and beyond. Mentors 1 mentee through the DOM formal mentorship program.

(4) = meets expectations

(3) = less responsive, not often willing to help when needs arise

(2 or less) = repeatedly requires multiple reminders, generally unavailable to help, can be disrespectful.



## RESEARCH CONTRIBUTIONS

### 1. **Quantity and Quality of Publications (for current reference year)**

#### **Clinician Teacher or Clinician Educator or Clinician/Scientist – Administrator (<50% research)**

(6) = superior: published as first or senior author in high impact journal; Keynote speaker at conferences

(5) = significantly exceeds expectations: published as co-author or oral presentations at major meetings

(4) = exceeds expectations: poster abstracts presented at conferences; non-peer-reviewed publications

(3) = meets expectations: participation in scientific meetings or other scholarly activities

(2/1) = no participation in scholarly activities

#### **Clinician Investigator (25-50% research)**

(6) = superior: ≥ 3 first or senior authored papers (e.g. in very good peer reviewed journals (Impact Factor>5 or evidence of significant impact of paper); oral presentations at national or international meetings

(5) = significantly exceeds expectations: 2-3 first or senior authored papers/yr; presentations at national or international meetings

(4) = exceeds expectations: ≥ 1 first- or senior-authored peer-reviewed paper

(3) = meets expectations: publishes as collaborator and also does occasional scientific presentations; reviews manuscripts

(2) = below expectations: collaborative publications with others

(1) = no publications or abstracts presented

#### **Clinician-Scientist and Scientist (50-90% research)**

(6) = superior: ≥ 3 first- or senior-authored manuscripts per year with at least one in a top journal (=top 1-2 journals in a research area or top 10 general medical/scientific journals); National and International awards; Keynote speaker at conferences; Patents awarded, international dissemination of new clinical procedures or other innovations

(5) = significantly exceeds expectations: ≥ 2 first- or senior-authored peer-reviewed manuscripts per year in very good peer reviewed journals (Impact Factor>5 or evidence of significant impact of paper)

(4) = exceeds expectations: 2-3 peer-reviewed papers published/yr in very good journals  
Invited chapters and/or reviews; Invited lectures/symposia for national meetings

(3) = meets expectations: 1/year in good journals

(2) = below expectations: collaborative publications with others

(1) = no publications or abstracts presented

### 2. **GRANTS & AWARDS RECEIVED**

Benchmarks that vary according to Job Profile; Note that an external salary award (e.g. CRC, CIHR investigator, FRQS etc.) is equivalent to holding a single external peer reviewed operating grant as PI

#### **Clinician Teacher or Clinician/Scientist - Administrator**

(6) = superior: holds an external peer reviewed grant as a PI or co-PI  
(5) = significantly exceeds expectations: holds an external peer reviewed grant as a co-investigator  
(4) = exceeds expectations: holds more than one grant (McGill or hospital), or industry funded grants as a PI, co-investigator or collaborator  
3= actively seeking grants  
1,2= holds no grants

**Clinician Educator**

(6) = superior: holding a research grant from a major funder as a P.I.; national or international recognition/awards

(5) = exceeds expectations: co-investigator on a major grant; PI on internal or industry grant

(4) = meets expectations: holds at least one peer-reviewed operating grant as a collaborator

(3) = actively seeking grants

(2/1) = no grants or awards, no applications for these.

**Clinician Investigator (25-50% Research)**

(6) = superior: 2 or more external peer-reviewed grants (at least 1 as PI or Co-PI)

(5) = exceeds expectations: at least 1 external peer-reviewed grant (PI or Co-PI)

(4) = meets expectations: 1 external peer reviewed grant (PI or Co-I or collaborator)

(3) = research funded through contracts or other sources (internal McGill or Foundation);

(2) = actively seeking grants

(1) = below the acceptable level

**Clinician Scientist and Scientist (50-90% Research)**

(6) = superior: more than 2 external peer-reviewed grants

(5) = exceeds expectations: more than 1 external peer-reviewed grants (PI or Co-PI)

(4) = meets expectations: holds at least one external peer-reviewed operating grant (PI or Co-I)

(3) = actively seeking external grants with good applications (submits to internal peer review process); Research funded through contracts or other sources (internal McGill or Foundation)

(2) = 1 peer- reviewed grant as collaborator

(1) = below the acceptable level

### **3. SCIENTIFIC & SCHOLARLY ACTIVITY**

Benchmarks that apply to all Job Profiles

(6) = superior: keynote speaker at conference or organizes national and international research conferences; journal editor; chair of grant committee

(5) = exceeds expectations: organizes local research conferences or gives presentations at national and international meetings, Royal College Examination Boards, Medical Council of Canada committees; editorial board member; grant committee member

(4) = meets expectations: Multiple invited lectures/symposia for meetings/formal presentations at local rounds

(3) = one formal presentation or manuscript review

(1,2) = below the acceptable level

Versions:

*Version 1: McGill University Division Directors, Department of Medicine, held on Monday, November 25, 2013 at Holmes Hall, Faculty of Medicine*

*Version 2: Revised Nov 24, 2016 McGill University Division Directors, Department of Medicine*

*Version 3: Edited by Marc Rodger Feb 4, 2021 to align with ads, LOO and MUHC/JGH DOM rules template]*

*Version 4: Formal/didactic teaching expectations modified/clarified and approved by DOM Council June 2021*

*Version 5: Expanded definitions/examples with approval of DOM Council May 3, 2023*