

A Primer for Career Development and Promotion:

Succeeding as a Psychologist in an Academic Health Center

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This primer outlines key considerations for asychologists who are seeking an initial faculty appointment or promotion within an academic health center. The text provides a framework for the process, along with some practical, facilitating next steps, such as the importance of getting to know how institutions work, planning early for eventual promotion, and building a case for eventual promotion via clinical service, research, teaching/mentoring, and professional service.

Consultation and Mentoring Program

Association of Psychologists in Academic Health Centers

www.div12.org/section8/index.html



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A Primer for Career Development and Promotion: Succeeding as a Psychologist in an Academic Health Center

Psychologists serve in multiple roles in medical schools throughout the U.S., and they are distributed across clinical, medical education and basic science departments. Fifty-six percent are housed in Departments of Psychiatry (Hong & Leventhal, 2004), and the remaining 44% are distributed across other medical school departments. A recent survey (Robiner, Dixon, Miner, & Hong, 2010) revealed psychologists work in at least six clinical departments other than Departments of Psychiatry or other mental health related departments. Faculty psychologists today work in many sectors of the academic medicine community, educating the next generation of psychologists and other health care professionals, conducting research and providing clinical services to a broad array of medical and psychiatric patients in diverse venues. Additionally, many psychologists serve in leadership roles within their academic departments or for their institution. Indeed, psychologists contribute vastly to the educational, clinical, and research missions of the academic medicine community.

According to data from the year 2000 AAMC Faculty Roster database, 3,169 psychologists were estimated to hold medical school faculty appointments (Hong & Leventhal, 2004), accounting for 1-3% of medical school employees. In addition, data collected reveal an overall trend of increasing numbers of psychologists working in U.S. medical schools. Additionally, the most recent data on the psychology workforce conducted by the American Psychological Association (APA) estimates that by the end of the first decade of the 21st century, 54.5 % of all psychologists work in institutional settings with 12.4 % in hospital settings and 4.6 % in medical schools (APA, 2009).

The contributions of psychologists can be recognized in the academic health center (AHC) via appointment as faculty members, promotion in rank as a faculty, and in some cases tenure. However, psychologists are a unique case within AHCs for several reasons. For one, most psychologists have been trained in colleges of arts and sciences and so are more familiar with the norms and mores of that setting, which can be different than those of medical schools or AHCs. Also, given that psychologists rarely are in a Department of (Health/Medical) Psychology those individuals who have administrative oversight over their position may be from another discipline. These differences are especially important as they relate to the appointment, promotion, and tenure process. In part due to the differences in training backgrounds, psychologists serve unique roles and have broad responsibilities in AHCs, which ideally determine how best to judge psychologists' contributions *vis-à-vis* physicians and other professionals.

The Association for Psychologists in Academic Health Centers (APAHC) is Section VIII of Division 12 (Society of Clinical Psychology) of the APA. APAHC is in a unique position to support the professional growth and recognition of this specialized group and does so via several important initiatives, including programming at the APA convention, periodic stand-alone conferences, an active listsery, a consultation and mentoring program, and resources for early career professionals (e.g., Foran-Tuller et al, 2012; Nash & Schuman, 2012; see also http://www.div12.org/section8/index.html).

Thus, it is fitting that a discussion on the APAHC listserv in early 2012, in response to an article that appeared in the *Chronicle of Higher Education*, led to the development of this primer. While there are several wonderful resources (Darley, Zanna, & Roediger, 2004; Prinstein & Patterson, 2003) for the research psychologist in a traditional arts and sciences environment, we are aware of no similar resource for faculty psychologists in medical schools or AHCs. As is the case for all primers, what follows is not an exhaustive treatment of the topic, but we hope it will serve as a starting point for thinking about the process of promotion and preparing for it.

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Introduction



Before You Apply or Interview for a Position

Learn About Your Institution Upon completion of internship or fellowship, many early career psychologists are so eager to secure their first position in an AHC, that they may not do enough homework regarding the academic culture of their potential employers or their earning potential. Since the starting salary for a first position is the basis for not only subsequent salary increases but also for other benefits (e.g., life insurance), it is prudent to take the time to educate yourself about current salary ranges prior to any interview for a new position. It is also important to recognize that the first academic position one takes often shapes professional possibilities for the future. Other important considerations besides salary include start-up funds for research projects, space (for office, clinic and research, depending on the preference of the applicant and the position, and even parking), professional development activities (e.g., conference attendances) and relocation expenses. Other more long-term benefit considerations may include retirement benefits and whether tuition reimbursement for dependents is available for faculty. Prior to your first interview, it is a very good idea to talk with a mentor about these considerations. In addition, take some time to speak with colleagues who have recently gone through the hiring process themselves.

The organizational structure of academic health systems can be very hierarchical and varies from institution to institution. For better and for worse, the flow of information typically follows this structure. Given this fairly rigid structure, it is helpful to have a broad understanding of the organizational structure of your potential employer. One's participation in key meetings or on important committees also varies as a function of one's position within the hierarchy. One key aspect of career development is learning how to function (and thrive) within such frameworks. This very likely involves engaging in purposeful networking and appropriate levels of self-promotion through AHC newsletters, papers, and other outlets. Cultivating an awareness of your institutional structure will allow you to practice mindful career planning and growth.

Learn About
Faculty Tracks,
Tenure, and
Promotion

Different medical schools and AHCs offer a wide variety of academic tracks depending upon how much emphasis they place on research, teaching and service. Be sure before applying that the position you are applying for is one you would enjoy, in which you would be productive, and would thrive. Just as a dedicated clinician might not be happy in a position where she or he had to write research grants in order to cover part of their salary, a dedicated researcher might not be happy in a position where she or he had to spend three days a week in a clinical practice and take call periodically. Perhaps the most common comment that we hear from clinicians is that they are so busy with seeing patients that about the only way they would be able to do research would be if they had protected research time (or engage in scholarly endeavors during evenings and weekends). You will likely not know all of the details of a position prior to your first interview, but taking the time for self-reflection on your professional wants and needs related to a job position will help steer you towards opportunities that are better matches for you.

Ideally, before you submit a job application, you should be clear on the rank and faculty track of the advertised position. For instance, does the ad specify that the AHC is recruiting for an Instructor, Assistant Professor, or higher rank? This information will help you gauge whether or not you will be competitive for the position. At many institutions, instructors are considered faculty, but may have diminished voting rights in faculty governance. Some institutions hire early career faculty at the instructor level to give them an opportunity to develop a clinical or research niche, prior to promotion to assistant professor. Take some time to visit the website of your target departments



Before You Apply or Interview for a Position

to see the proportion of faculty that are at the rank of Assistant, Associate, and Full Professor; this distribution can inform you about the culture of the department and the likely road towards advancement. To the extent possible (via posted CVs or by discussing directly with contacts you may have in the department) get a sense for the modal time in rank for your potential future colleagues—their path could become yours. Also, you should be aware that some positions are either civil service, academic/professional, or have no faculty appointment (e.g., hiring is through the clinical practice group or the hospital rather than the medical school). Such positions often have more limited benefits and offer less room for advancement or educational and research activities.

Academic health centers often have numerous tracks on which faculty progress. Some lines are tenure-eligible, others are not. Many medical schools that are not state supported do not offer tenure, so tenure is less of an issue than it was a decade or so ago. However, even for those schools that do offer tenure, it is important to learn what tenure means at any given institution—one size does not fit all. There has been a lot of discussion over the past decade about the advantages and disadvantages of tenure in an AHC. Tenure is not the norm in AHCs and means different things at different AHC institutions. Additionally, lack of tenure does not mean there are not excellent opportunities for professional advancement or that the intention is for the position to be time-limited. Be clear on these details as there are many good positions available that are not on a tenure track. While a detailed discussion is beyond the scope of this primer, the interested reader is referred to several recent resources (Bunton & Corrice, 2011; Burroughs Wellcome Fund and Howard Hughes Medical Institute, 2006; Howell et al., 2010; Marks, 2000; Schweitzer & Eells, 2008; Smith & Bunton, 2012) for a more in-depth review of this topic.

Most AHCs emphasize research, clinical, or teaching or any combination of the three. The relative emphasis of dedicated time given for teaching and training can vary markedly across and within institutions and across faculty. Although sometimes not explicit in an ad for a position, it is important to get information on which track the posted position has been posted. For many medical schools, information on tracks and expectations can be found online, typically within a faculty affairs section of the institution's or department's website. Medical school/centers typically have different faculty expectations than those in arts and sciences departments, so make sure you are looking at the appropriate site. If you are not able to find this faculty tracking information online, it is appropriate and forward-thinking to either request this information in a phone call to the Office of Faculty Affairs prior to your interview or to request this information during your interview process. And, when arranging for a visit, request to meet with some early career psychologists to learn about their experiences.

In researching the position one may also be able to discern how psychologists are valued within the department you are considering or the institution as a whole. Ask yourself, are psychologists in roles (e.g., serving on important committees) or in positions (e.g., Program Directors, Vice-Chairs, Assistant or Associate Deans, Deans, etc.) that demonstrate the institution's recognition of their leadership skills and broader high level contributions?

Learn About Faculty Tracks, Tenure, and Promotion At this stage, you should be taking stock in what type of job you want and be clear on the type of positions offered at your target institutions. Once you have reviewed the information you have assembled on the new position and submitted your application, you also need to be aware that the interview process varies greatly across institutions and departments. In some institutions you will meet mainly with faculty at the divisional and departmental level while in other institutions you may be meeting with departmental faculty as well as institutional leaders (e.g., Assistant Deans, Associate Deans, Dean). Some institutions will require that you present a colloquium as part of the interview process while others will not. Additionally, as psychologists often interface with many disciplines and are in various departments it is important to keep your audience in mind, both during the interviews and during any presentations you will be asked to give (e.g., how and what you present to a mental health audience will be vastly different than how and what you present to family medicine physicians, surgeons, etc.).

The interview process can move very slowly in most AHCs and very quickly in others, therefore you need to give consideration to the possibility that you may be made an offer either at the end of the interview or a week or two later by phone. You need to be prepared for such a discussion ahead of time. For a more detailed discussion of this important process, we refer interested readers to several excellent volumes: *The Compleat Academic: A Career Guide* (Darley, Zanna, & Roediger, 2004) and *The Portable Mentor: Expert Guide to A Successful Career in Psychology* (Prinstein & Patterson, 2003).

Negotiating an Offer

Once you get to the point of negotiating terms of a job offer, and before you accept, it is important to gather data on salaries and benefits. Periodically, APA publishes the results of salary surveys broken down into the area of the country, rank, years at rank, etc. The Association of American Medical Schools (AAMC) also publishes periodic salary surveys, describing average salaries across different departments (e.g., Psychiatry, Family Medicine, etc.); however, in its current format, it is not possible to get salaries specific for psychologists. The AAMC surveys are typically only available by either purchasing the publication (which is quite expensive) or by reviewing a copy in your library, typically held in the reference department. The AAMC report is nicely divided into different geographic regions of the U.S. according to years at rank. But, caution needs to be exercised because AAMC salaries tend to be higher than the APA salary surveys. Another source of information to help determine an appropriate salary range for your new position are data from the American Association of University Professors (AAUP) data which is accessible via the **Chronicle of Higher Education website**. These data show average salaries by rank by institution. Note that they pointedly do not include medical school faculty, but they can be used, in conjunction with APA and AAMC data, to approximate a fair salary range for your target position.

We also always recommend a comprehensive written contract whether you are interviewing for a starting position or for a position as a Full Professor. Only by having the important details written out can both you and the institution you are interviewing with be protected. This not only includes details on your salary and benefits, but also resources available to you, start-up package, professional funds, and other important explicit promises. If it is not in your contract, assume it will



Negotiating an Offer

not happen. Such a contract should also detail what the institution is expecting of you in terms of courses taught by semester/year, research, and clinical responsibilities and productivity. We recommend that you consider having the contract reviewed by a lawyer as well to insure that you understand and agree to all of the details. For example, some contracts will contain a restricted covenant (also known as a non-compete clause). A restricted covenant is a contractual provision between you and the institution that might prevent you from later practicing clinically in a specified geographic area for a given period of time if your employment terminates. Restrictive covenants are primarily to protect your institution. Courts typically deem covenants valid and enforceable if reasonably tailored in terms of scope and duration to protect a legitimate business interest and if they are not determined to restrain trade.

Starting a New Position and Planning for Promotion

Once you begin applying for positions, regardless of whether is it is your first position, or a move after a couple of years to a new position, be prepared to formally accept a written offer only when it is acceptable to you. A general rule of thumb is that if you are offered a position that will allow you to be productive by however you define productivity, accept it. Holding out for a better position, or trying to play one offer against another offer is typically not well received by either institution. Usually a Department Chair will work to put together the best offer that they can and usually they must have that offer approved by the Dean, either of their medical school or of the university where the Department is located. For you to insist that a Chair approach the Dean for approval of a better offer, after the original offer has been agreed to, can and sometimes does result in the original offer being withdrawn. Additionally, even if a new offer is obtained, residual negative feelings about the negotiation process may remain and impact the quality of the job experience for you. If you negotiate increases in salary and fringe benefits, also be aware that the expectations for you as a faculty member (e.g., your productivity requirements) may be higher as well to support your enhanced salary and benefits.

The first day of your new position is a good time to start thinking about your first or next promotion. Here are some concrete steps to take today to start on the road towards promotion at your institution. While it may seem premature to start thinking of promotion as soon as you start a new position, the steps we recommend below will make gathering information for your promotion exponentially less difficult and less stressful than trying to recreate it several years after the fact.

As soon as you have a copy of your institution's promotion guidelines, it is prudent to start a promotion file. We recommend that you either print a hard copy of that document for a physical file or start to develop an electronic file with the same content, while making certain that you have a reliable backup file. This file will serve as your "road map" to promotion. Like any good map, it will be helpful to revisit it on a regular basis to ensure that you are headed in the right direction and passing the appropriate markers. Another approach for tracking relevant promotions material is to file relevant materials in two new hanging files each year, such as Professional Activities—2012 and Professional Correspondence—2012. When applying for promotion, these files will have in them what is needed to prepare the required tables and documents. Regardless of what system you employ, the key is to have a system and keep it current. You should make certain that you archive any records that may be needed when you are going to apply for promotion. What kind of documents? If you have just given a talk at your state psychological association meeting or the

Start a Promotion File



Starting a New Position and Planning for Promotion

APA Annual Meeting, then your promotions file should have a copy of the invitation to give the talk, a copy of the announcement that you are going to give the talk and a copy of the evaluations from that talk. If there is any doubt in your mind as to whether or not something belongs in your promotion file, put it in. It is much easier to discard something at a later date than it is to find it amongst all of the papers in your office and your home. Also, it can be extremely helpful to carefully examine a promotion application from a colleague who was recently promoted at your new institution.

When you review your institution's requirements for promotion, you will have to decide which of the many relevant activities you want to embark upon. Rather than work in a new position for several years, only to find out that you have not been engaging in the activities that your institution values for promotion, it is far more productive to review the promotions requirements early on and decide which ones you want included in your promotion application. It is safe to assume that a great deal of effort went into choosing activities that count towards promotions because these are the same activities that benefit the applicant for promotion, their medical school or AHC, and the field.

Update Your CV Regularly

You should make a habit of updating your CV as soon as possible after giving a talk, submitting a manuscript, serving on a committee, or contributing to a national professional organization. As soon as you are finished updating your CV, save the documentation in more than one place. Regardless of whether or not you have anything to add to it, it is a good idea to check your CV monthly. This habit will serve you well not only for promotion review but for any number of reasons you will be asked for your CV. Do not rely on your memory for things you can easily document in the moment. It is actually not unusual to have a medical school faculty member admit that they have not even looked at their CV in the past year or two. Just accept that one of the professional responsibilities of being a faculty member is keeping your CV up to date. There may also be times, perhaps further on in your career, when you will want to have more than one version of your CV, one that provides more details about, for example, previous research positions and one that provides more details about previous clinical or teaching positions. Your institution may also have very specific CV formatting guidelines; checking early in the process may save your time down the line. Some institutions want you to include descriptions of your mentees or other information that might not have been obvious to you.

A master CV that includes all of your accomplishments will allow you the flexibility of having more than one CV with different emphases on each to fit various needs. For example, when applying for a research grant, you would want your CV to highlight your past research experience and research accomplishments whereas applying for a clinical position or a teaching position would require that you highlight different past experiences and accomplishments. And, if you are at all likely to be applying for research funds, many agencies at the federal, state and local level will request a biosketch that follows the NIH guidelines (i.e., a maximum of four pages, up to 15 publications listed that appeared in or were accepted by peer reviewed journals). Taking the time to make sure that your master CV is up-to-date and complete will make the task of creating more tailored versions less labor-intensive when needed. Similarly, when you have to prepare your renewal for state licensure, you should be able to just "cut and paste" information from your master CV to your application to renew your license.



Starting a New Position and Planning for Promotion

Many mentors feel that their obligation to a mentee is to talk to them and give them suggestions. However, that is really just the tip of the responsibility iceberg. Mentors should be prepared to edit your manuscripts and grant applications, extend invitations to give talks, help you get started with reviewing manuscripts, help you with submitting CE workshop proposals, and the like without any thought or requirement that they be given named credit (Sanders, Breland-Noble, King, & Cubic, 2010). Additionally, the mentor's role should include helping with networking, by facilitating connections with other faculty at other institutions in similar roles, encouraging involvement in key organizations (e.g., APAHC) and even nominating the mentee for roles that will enhance professional fulfillment and improve odds of advancement (e.g., serving on a committee or board for an organization, serving on an editorial board). One useful strategy to consider is forming a network of mentors. You read right—not one mentor, but a whole network of them. You may be thinking that it is hard enough to find one good mentor. That is where most of us start out wrong. If you get stuck into the thinking that one—and only one—person will help guide you through your career, you are bound to be disappointed. You could be setting yourself up to be disappointed because it is rare that any one mentor can be everything you may want or need.

Form a
Mentorship
Team

Consider an alternate mentoring strategy in which you draw in one or two primary mentors who have significant strengths, complemented by additional mentors who can cultivate your strengths in ways your primary mentors do not. It is not cheating, it is smart. Incidentally, while it is probably most convenient to find mentors within your own department, division, or clinical service, some of our own best mentors have been in other states and even from other disciplines. A simple rule of thumb—ensure that the individuals you enlist as your mentors have successful experience doing the activities you want to do. These will most likely be full or associate professors who understand the value of serving as mentors. Build a network of people who can help you thrive.

Professional conferences, such as the APAHC meetings, are an excellent place to build and nurture relationships over time with those in your specific areas of focus. APAHC also has a consultation and mentorship program that helps psychologists in AHCs solicit collegial and peer input on career development decisions and input on workplace opportunities, challenges, and potential barriers.



The following are descriptions of the types of activities that your academic unit and AHC will be reviewing to evaluate your promotion application. Given your areas of focus and primary responsibilities, not all of these categories may apply to your specific position,

Clinical Practice

Examples of clinical practice activities that may or may not be counted towards promotion at your institution include: Written or published reports of organizational innovations; consulting services to other institutions; visiting lectureships; invited lectures; published clinical reviews; patient education materials; and books or chapters that discuss your innovative clinical activities or examples of program development activities. There are several ways to expand your clinical practice to gain state, regional, or national attention. One example is to give presentations at your professional organization's meetings or publish in their journals or newsletters. Another example is to provide consultative services to other institutions delivering services similar to the services provided by the applicant. In this case, it is prudent to keep a permanent log of the number of contacts, by whom and from what institution, and the topic of the consultation. This is clearly an area where your clinical mentor can and should be able to offer assistance.

Clinical practice, of necessity, requires the individual psychologist to be licensed in the state in which she or he is practicing. We suggest that all clinically-trained psychologists obtain a license to practice, even those psychologists who aspire to be in full time teaching or research positions. In most states, graduating from an APA accredited training program and completing a recognized (e.g., accredited or APPIC Member) internship and post-doctoral fellow position is a prerequisite to obtaining a license to practice. Some states will also have a jurisprudence, professional responsibility, or ethics oral or written examination. Once the license is granted, the fee to maintain the license and the continuing education credits necessary to maintain a license is a small price to pay for the security of knowing that you can always become a practitioner if the need arises. Getting your license years after graduating can be a much more difficult process than getting licensed immediately after completion of your training. Thus, we strongly recommend that you take the Examination for Professional Practice (E.P.P.P., the national licensing examination) and seek licensure as reasonably soon as you are eligible.

Board Certification Board certification is a voluntary process. To be board certified psychologists are certified by private organizations with national broad scope (e.g., American Board of Professional Psychology [ABPP]) as possessing expertise within a specialization area. For many professions (e.g., physicians) that psychologists will work with in AHCs, board certification is seen as a quality indicator and is mandated by third parties or employers. There has been a good deal of discussion whether or not board certification will help an applicant earn a promotion. While data suggests a relatively small proportion of psychologists pursue board certification, recent studies have shown that about a fifth of psychologists in hospital based settings are certified by ABPP, a greater proportion than among psychologists in more diverse settings despite the fact that few hospitals required psychologists to be board certified (Robiner, Dixon, Miner, & Hong, 2012). And, many within AHCs have argued that board certification will become increasingly important for psychologists to maintain respect and equality within medical settings especially in the wake of many provisions of health care reform (Kaslow, Graves & Smith, 2012).



In the present authors' institutions board certification is used as one measure of the applicant having earned a national recognition within their profession. But, there are boards and there are boards.

Generally speaking, boards earned through careful screening and oral examinations (e.g., American Board of Professional Psychology) are counted whereas boards whose only requirement is payment of an application fee (i.e., vanity boards) are not counted. Some institutions will grant a salary or pay grade increase to members of their faculty who earn their board certification.

We cannot count the number of research projects we have been told about over the years that never resulted in a publication. So, there are a few simple rules to avoid this.

- Do not accept a role as a co-investigator on a project without looking at the scholarly productivity of the other investigators.
- Do not start a research project that you cannot finish.
- Do not finish a research project that you cannot publish.
- Before you start a research project try to identify which audiences will be interested in your findings and which journals may be receptive to publishing your findings.

Many institutions have internal research funds that are available through competitive applications, provided either by the institution itself or via donations by members of the community served by the institution. Many faculty will start by applying for such awards, using those funds to fund an initial research project. Getting grant funds represents about one third of that part of the research enterprise. The second third is successfully conducting the proposed research and the third part is presenting those results at competitive venues like regional and/or national conventions and publishing those results in appropriate peer reviewed journal outlets, with the benefit of feedback that was received following any presentations. In general, it is preferable to develop opportunities to present your work at national venues and to publish in peer-reviewed journals.

When you have your research project outlined, try to delete half of what you intend upon doing because most research projects are far too ambitious and, for that reason, never come to fruition. Sometimes a project is too ambitious because it is simply too involved; however, you should also consider your pool of co-investigators, support personnel, space, and budget. Invest in a team that will help you succeed. If you are unsure of whether your project is too ambitious or not, show your proposal to one of your mentors (who has conducted numerous research projects and published papers stemming from those projects) and see what they have to say. Planning on a manageable research project, including where the project will be published upon completion, raises the likelihood of the research being disseminated to colleagues. Ultimately, your goal is to do research that fills a real need that people will want to read and cite. If your research is not published, then no one can read it, cite it, or build upon it. So develop the self-discipline to write effectively.

Your research productivity will be evaluated by the number, size, and type of grants you bring to your institution and your ability to contribute to the scholarly literature. Peer-reviewed articles may be valued more than book chapters. (In these times when com- petition for grant monies is so difficult, some institutions give credit towards promotion for sub- mitting a grant to a federal agency even if the grant was not funded. Your Promotion and Tenure Committee may want to know the priority score that your grant received as well as the agency's

Research



Publishing

pay line, or the threshold above which grants were funded.) Writing is a common hurdle. There are a number of helpful texts that address strategies for developing and maintaining a writing habit (Boice, 1990; Silvia, 2007). In addition to personal discipline, it can be helpful to establish a formal or informal peer writing group to whom you can submit your writing for honest, constructive feedback. In order for this activity to be helpful, you have to engage with at least one other person who is willing to give and take constructive, concrete, and timely feedback. Of course, you must be willing to reciprocate. If you intend to do much writing, you might also consider securing the services of a really good professional editor. This may be an important option to consider if you are unable to find an adequate peer reviewer or if the volume of your work exceeds the capacity of your writing group. While you may be able to find a colleague or friend who is willing to read an occasional manuscript, if you do much writing, you may find that it is just too much to expect from a group. Most professional editors charge an hourly fee for their services so be prepared to pay for the service.

Probably the first step to publishing is subscribing to and reading the journals that most closely represent your area of expertise. Doing so often results in the reader getting an idea for a project that ultimately results in a publication. Initially, most of us started out by publishing with more established authors either as co-authors or as the senior or first author. In doing so, you gain the advantage of the expertise in writing of the more established author. It is unusual that faculty promotion guidelines will specify exactly how many grants and publications may be necessary for your promotion, but make it a practice to regularly engage faculty one stage ahead of you, who have gone through the promotions process at your institution, to learn about local mores and standards.

An important issue with any publication with more than one author is deciding who is qualified to be included as a co-author. The APA (2010) Publication Manual (Sixth Edition) states that:

As early as possible in a research project, the collaborators should decide on which tasks are necessary for the project's completion, how the work will be divided, which tasks or combination of tasks merits authorship credit, and on what level credit should be given (first author, second author, etc.), p. 18

If such discussion takes place before the start of a research project, you can usually avoid the uncomfortable discussion that some authors leave until they are about to submit a manuscript about who should be included as a co-author and where they should rank in the list of authors. In addition to initiating and having these discussions early in the process, it can help to include a list of authors on all drafts that are circulated, in the proposed order, to avoid confusion towards the time of submission. Authorship credit matters because it is an indication of your contribution to a piece of scholarship. Authorship order, in particular, can be an important aspect of your evaluation for promotion. First authored publications carry significant weight. In contrast to the culture of many arts and sciences departments, senior or last authored publications are also seen as desirable by AHC promotions committees.



Examples of teaching that may or may not be counted depending upon the promotion guidelines at your institution, include, but are not limited to: Supervising or mentoring students, residents, or fellows: preparing curriculum materials; participating in postgraduate or continuing education courses; instructing in lab sessions; facilitating problem based learning; and presenting teaching rounds or patient conferences. At the higher professor ranks, Invited Lecturer, Visiting Lectureship, teaching activities also include co-editing or co-authoring a major textbook, or chapters in a textbook and developing standard, listed courses, curricular materials and/or educational software. Similarly, a variety of teaching administrative roles such as "Director of Psychology Training" or "Chief Psychologist" can be very important activities when it comes time to apply for promotion.

Probably the most important thing to document for teaching activities is the student evaluations of your instruction. If you are teaching almost any continuing education course, a requirement is usually that the course collected evaluations from the attendees. If you are teaching a regularly offered class, most universities, colleges and medical schools also require routine evaluations. If you are doing teaching, and there is no formal evaluation form, create your own and hand it out so you always get feedback regardless of the audience. When you get a copy of the evaluations, place them in your promotions file. Most promotion committees will not want the complete stack of evaluations because, for large courses, that could run into the hundreds for each class offering but they will want a summary of the evaluations. For more limited offerings like pediatric residents and fellows and psychology fellows, asking the trainee to send a letter evaluating their teaching experience would be adequate.

The topic of mentoring has been the subject of many discussions and publications. Those who we are familiar with usually approach the topic from the standpoint of the amount of time that it takes to serve as a mentor versus the perceived benefits of mentoring, not by what is expected of a really excellent mentor (Canter, Kessler, Odar, Aylward, & Roberts, 2012). Many institutions will count mentoring activities towards promotion but this is a difficult area to quantify. Letters from previous mentees, by their very nature, are not picked at random and are certainly not written anonymously yet, when submitted by licensed professionals who trained under or were advised by the applicant, do carry weight with a promotions committee. In an AHC, psychologists may have opportunities to serve as mentors to other psychologists or to allied health professionals and physicians. The model of mentorship in an AHC may be quite different from that of an arts and sciences environment, but the experience can be mutually rewarding nonetheless.

Teaching and Mentorship Activities



Local, AHC, Regional and **National** Service

Community Volunteering

Some institutions will give you credit for volunteering with community organizations and some will not. You have to check the promotion guidelines for your institution because there is as much variation in the area of community volunteering as in any other area in promotions. Some institutions will count volunteering in organizations representing everything from local religious organizations, to Scouting, whereas others will only count volunteering in organization such as Science Pioneers (a national organization with local chapters of scientists and professors who agree to serve as mentors to advanced high school students who engage in research projects). By all means, do volunteer work that you find personally rewarding. If it contributes to your promotions package, consider it a bonus.

Hospital/University Committees

An initial conversation with the Dean, Assistant Dean for Faculty or other authority for academic unit (department, division, or section) should help you to identify which hospital or school of medicine committees currently have vacancies as well as what kind of time commitment is typically required for members of each committee. Generally speaking, you will get more credit for serving as Chair of a committee than for being a member of a committee, and you will get more credit for serving on two different committees, for example for three years each, than, for example, serving on one committee for six years. Archive copies of correspondence in your promotions file in order to document your membership. Your work on these committees may help shape the clinical services provided, curriculum, or governance of your AHC.

Continuing Education

In medical institutions, grand rounds are an expected part of continuing education for many of the different medical specialties. For that reason, most of the subspecialty areas offer grand rounds on at least a monthly basis. If you accept a position in a medical institution that requires that you interact with subspecialists from one of the medical disciplines, it is a very good idea to attend the grand rounds that they offer, in part to be kept up to date with the state of the art in that specialty area and in part to network with your medical colleagues in that area. For the same reason, it is usually a good idea to find out about and attend disease specific organizations monthly meetings. Attending such events can provide insight into the major issues in these sub-fields. Presenting at and speaking up at these events gives you an opportunity to demonstrate your value (and that of psychology, more generally) to your medical colleagues.

Reviewing Manuscripts for Journals

Even though you may not have previously considered reviewing manuscripts, doing so has the advantage, compared to other opportunities, of providing service when it is most convenient to you. The editorial boards of most journals send submitted manuscripts to 3-4 expert reviewers to comment on the suitability of the manuscript for publication. The reviews are typically due within 2-8 weeks of receipt, with shorter turnaround times expected by many medical journals. If your reviews are timely and helpful, you will be more likely to be invited to do a review in the future. Most journals publish an annual list of reviewers, usually, but not always, in the December issue. If you have done one or more reviews for a journal during the year, print a copy of the acknowledgement list from the Journal and place it in your promotion packet. If there are journals that you tend to



publish in and/or that you review for on a regular basis, you may be invited to join the editorial board. Serving on an editorial board does require additional work, but it will allow you to help shape the field and contribute valuable service to the profession. If you have not reviewed any manuscripts for publication in peer reviewed journals, take the effort to identify someone in your department or institution who does it routinely and ask if they will mentor you through the process. It is not uncommon for journals to allow co-reviews of a manuscript. Learning how to do manuscript reviews is best done by such a process (Wu, Nassau, & Drotar, 2011). Your goal as a reviewer is to summarize the strengths and weaknesses of a manuscript, while providing constructive feedback for the authors, regardless of your recommendation to accept or reject the paper. Doing reviews well is an art form unto itself and best learned by reading other good reviews. Almost every psychology and medical journal sends copies of the reviews to each of the reviewers on each manuscript. You can learn a lot about reviewing manuscripts by reading the comments of the other reviewers. Some journals require prior permission before allowing a trainee to co-review a manuscript so it is always best, at least initially, to ask the Associate Editor for permission to have an advanced trainee serve as a co-reviewer.

Local, AHC, Regional and National Service

National Committees

If you write to the President of most national organizations, probably starting with relevant Divisions of APA, there is a very good chance that they will need volunteers to help out with either the day to day activities of the organization, including contribution to committees devoted to membership, publications, or planning their annual meeting. If you are not sure what type of national committee work will be fruitful for you, ask your mentor to help you out. You may also find out about such service opportunities by reading the association newsletters or by subscribing to their listservs. To wit, APAHC is a wonderful (and quite supportive) place to consider new national service opportunities.

Invited Addresses

Most of us do not start off our careers with invitations to conduct, for example, <u>invited</u> addresses at the APA annual conference. Rather, most start with one or two invited talks in our first years as a faculty member. One strategy to foster invitations to present a national talk is to contact someone who was in your fellowship cohort with an invitation to give a talk at your institution. And, then it is a relatively simple matter to inquire whether or not you can be invited to give an address at their institution. While you are waiting to arrange such an invitation, we usually recommend that you take up almost any offer for a professional presentation that you get. It is only through giving such talks that you will gain experience in giving talks. We usually recommend using PowerPoint slides because they allow you to pace your talk, and, in the event that you stray off topic momentarily to give an example or an anecdote, you just move to the next slide and you are back on topic.

Another strategy that can be mutually beneficial is to invite interns and/or post-docs as co-presenters at local, regional or even national talks. In this manner, the trainee gets the experience of presenting to a professional audience, they are able to observe their mentor modeling how they prepare for and present at various venues, and they have another entry for the vitae.



External Evaluations/ Scholars

In addition to preparing a CV, candidates for promotion in an AHC are also required to nominate a set of external reviewers who will evaluate the candidate's suitability for promotion. No single area seems to be more intimidating to promotion applicants than identifying external evaluators. The assumption that many junior faculty members make is that they are expected to know their external evaluators personally when, in fact, most institutions will exclude external evaluators who have a current or former training relationship or current or former research collaborators.

It is acceptable for an applicant to know their external evaluator—this can be from having presented at the same symposium, been members of the same review or credentialing committee, reading and citing each other's work, and the like. To identify faculty who might be willing to serve as an external evaluator, begin by thinking back to meetings you have attended, panels and committees you have served on, and consider colleagues with whom you have had limited interactions and/or who impressed you as thoughtful members of the profession.

How then, does one choose external evaluators? To begin with, any external evaluators must be at least at the rank that the applicant is applying for or higher. Evaluators who are full professors will generally be regarded with more weight than more junior faculty. At one of our institutions (ERC), the external evaluator must be on the faculty at institutions that are fully accredited by the Association of American Medical Colleges (AAMC). It is critical to understand your institution policy on these issues. At one of our intuitions (ZB), candidates for promotion are expressly discouraged from directly or indirectly soliciting referees. A general rule of thumb is that it is not a good idea to call a potential external evaluator personally because doing so may make them feel pressured to agree to serve as an evaluator. When acceptable, it is better to have a colleague of yours, preferably someone who knows the potential evaluator, perhaps one of your mentors, to inquire whether or not they have the time and the interest in serving as an evaluator. I (ERC) have served as an external evaluator about 20 times, half of those times I was contacted ahead of time and half of those I just received an inquiry from the Dean of an institution inquiring whether or not I was interested in serving as an evaluator for a named faculty member.

Summary

In this primer, we have outlined key considerations for psychologists who are seeking initial faculty appointment or promotion within an academic health center setting. While the entire process can seem mysterious or daunting, we have attempted to provide a framework for the process, along with some practical, facilitating next steps. While we have written this document with the broad audience of psychologists in AHCs, we recognize that certain groups, such as women (King & Cubic, 2005) and minorities (Nunez-Smith et al., 2012) may experience additional obstacles to promotion that warrant additional discussion. While every institution supports a slightly different promotion process, we have outlined the importance of getting to know how your institution works, planning early for your eventual promotion, and building a case for your eventual promotion via clinical service, research, teaching/mentoring, and professional service. Overall, psychologists' success in AHCs is strongly affected by the diverse ways in which they pursue their professional development (Elman, Illfelder-Kaye, & Robiner, 2005).



References

American Psychological Association. (2009). 2008 APA survey of psychology health service providers. Retrieved from: http://www.apa.org/workforce/publications/08-hsp/index.aspx.

American Psychological Association. (2010). *Publication manual of the American Psychological Association*. Sixth Edition. Washington, D.C.: Author.

Boice, R. (1990). *Professors as writers: A self-help guide to productive writing*. Stillwater, OK: New Forums Press.

Bunton, S. A., & Corrice, A. M., (2011). Evolving workplace flexibility for US medical school tenure-track faculty. *Academic Medicine*, *86*, 481-485.

Burroughs Wellcome Fund and Howard Hughes Medical Institute. (2006). *Making the right moves:* A practical guide to scientific management for postdocs and new faculty (2nd ed). Research Triangle Park, NC and Chevy Chase, MD: Authors. (Also available online at www.hhmi.org/labmanagement)

Canter, K.S., Kessler, E.D., Odar, C., Aylward, B.S., & Roberts, M.C. (2012). Perceived benefits of mentoring in pediatric psychology: A qualitative approach. *Journal of Pediatric Psychology*, *37*, 158-165.

Darley, J. M., Zanna, M. P., & Roediger, H. L. (Eds.) (2004). *The compleat academic: A career guide* (2nd ed.). Washington, D.C.: American Psychological Association.

Elman, N. S., Illfelder-Kaye, J. & Robiner, W. N. (2005). Professional development: Training for professionalism as a foundation for competent practice in psychology. *Professional Psychology: Research and Practice, 36,* 367-375.

Foran-Tuller, K., Robiner, W. N., Breland-Noble, A., Otey-Scott, S., Wryobeck, J., King, C., & Sanders, K. (2012). Early career boot camp: A novel mechanism for enhancing early career development for psychologists in academic healthcare. *Journal of Clinical Psychology in Medical Settings*, *19*, 117-125.

Hong, B. A., & Leventhal, G. (2004). Partnerships with psychiatry and other clinical disciplines: The key to psychology's success in U.S. medical schools. *Journal of Clinical Psychology in Medical Settings*, *11*, 135–140.

Howell, L. P., Chen, C. Y., Joad, J. P., Green, R., Callahan, E. J., & Bonham, A. C. (2010). Issues and challenges of non-tenure research track faculty: The UC Davis School of Medicine experience. *Academic Medicine*, *85*, 1041-1047.

Kaslow, N. J., Graves, C. C., & Smith, C. O. (2012). Specialization in psychology and health care reform. *Journal of Clinical Psychology in Medical Settings*, 19. 12-21.

King, C. A., & Cubic, B. (2005). Women psychologists within academic health systems: Mentorship and career advancement. *Journal of Clinical Psychology in Medical Settings*, *12*, 271-280.

Marks, E. S. (2000). Does tenure still fit the needs of medical school faculty. *American Journal of Medicine*, 108,751-754.



Nash, J. M., & Schuman, C. (2012). Preparing psychologists in academic health centers for the rapidly changing health care environment. Journal of Clinical Psychology in Medical Settings, 19, 1-4.

Nunez-Smith, M., Ciarleglio, M. M., Sandoval-Schaefer, T. Elumn, J., Castillo-Page, L., Peduzzi, P., & Bradley, E. H. (2012). Institutional variation in the promotion of racial/ethnic minority faculty at US medical schools. American Journal of Public Health, 102, 852-858.

Prinstein, M. J., & Patterson, M. (Eds.) (2003). The portable mentor: Expert guide to a successful career in psychology. New York: Kluwer Academic/Plenum Publishers.

Robiner, W. N., Dixon, K. E., Miner, J. L., & Hong, B. A. (2010). Hospital privileges for psychologists in the era of competencies and increased accountability. Journal of Clinical Psychology in Medical Settings, 17, 301-314.

Robiner, W. N., Dixon, K. E., Miner, J. L., & Hong, B. A. (2012). Board certification in psychology: Insights from medicine and hospital psychology. Journal of Clinical Psychology in Medical Settings, 19, 30-40.

Sanders, K. A., Breland-Noble, A. M., King, C. A., & Cubic, B. A. (2010). Pathways to success for psychologists in academic health centers: From early career to emeritus. Journal of Clinical Psychology in Medical Settings, 17,, 315-325.

Schweitzer, L., & Eells, T. D. (2008). The forgotten faculty: Challenges for PhDs in clinical medical school departments. Journal of Clinical Psychology in Medical Settings, 15, 7-11.

Silvia, P. J. (2007). How to write a lot: A practical guide to productive academic writing. Washington, DC: American Psychological Association.

Smith, P. O., & Bunton, S. A. (2012). Make the context work for you: Faculty in a changing academic medicine landscape. Journal of Clinical Psychology in Medical Settings, 19, 22-29.

Wu, Y.P., Nassau, J.H., & Drotar, D. (2011). Mentoring reviewers: The Journal of Pediatric Psychology Experience. Journal of Pediatric Psychology, 36, 258-264.