Medicine – Institute of Medical Education						
Grade	Criteria	Criteria specific	Local Guidance/Benchmarks	Examples		
	B3 Core Research	Secured the resources necessary to underpin research activity, with success as appropriate to the discipline.	Shows evidence of attempts to secure resources as appropriate to the sub-discipline of Education, typically as contributor to a bid with a group of colleagues	Contributed to at least one major (>£50K) or two or more lesser bids (<£50K) in the last 24 months.		
8	F2 Enhanced Research	Demonstrated a record of continuing dissemination of original research in quality publications or other media and/or providing evidence of success in securing resources to underpin research activity.	The publication profile should demonstrate elements of research and scholarship. Where publications are jointly authored it is expected that the candidate's contribution should be around 50% or more and clearly indicated by the candidate as such.  Location of the publication should not be the main criterion but rather the quality of the publication; however, these criteria are often linked.	Published at least one original article in one of the highest impact journals for the relevant sub-discipline in the last 18 months. If part of a group publication should have contributed at least 50% in one article.		
	D0 0 - 11	Danaga tuata da ua andat	La company de disciplina e di Marke de l'Educacion			
	B2 Core Research	Demonstrated a record of attracting the resources necessary to underpin research activity, with some success as appropriate to the discipline.	In some sub-disciplines of Medical Education there is no requirement for additional resources; in other sub-disciplines securing access to a travel grant or a library would be the norm. In those areas where there is a need to attract financial resources the size of the grant will depend very much on the field, and grants may range from £0.5k upwards.			
9			In some fields there is a stronger culture of making team bids. Individuals involved in collaborative bids should give a clear indication of the level of their contribution to the process,			

		at Col level	
B4 Core Research	Disseminated the results of research through appropriate written, oral or other media both internally and externally to the University. This will include a record of regular and continuing publication of original research in quality publications or equivalent.	Evidence should be provided of a track record of publications of quality, and of presentations at national/international conferences as appropriate (panelists being mindful of any personal circumstances which may make attendance at conferences difficult).  The verification process should provide confirmation that the publications are of the quality claimed. All forms of publication (books, edited collections, government reports, online publications etc.) will be considered.  A track record of regular publication would usually involve at least one original publication (ie more substantial than an opinion piece or commentary/review) per year on average in appropriate recognised and frequently quoted high-impact journals account being taken of career breaks etc.  Both single- and joint-authored publications will be considered suitable evidence for a promotion application, provided the applicant has made a significant contribution (e.g. not just editorial responsibility). Individuals using joint-authored pieces as part of their evidence should give a clear indication of the level of	
		their contribution to the output and may be expected to have produced more outputs, pro	

		rata.	
F2 Enhan Resea		In addition to evidence provided under B4, it would be expected that applicants will have published one or more pieces which demonstrate publication in 3* in RAE 2008 terminology at the most prestigious medical education research journals e.g. medical education advances in Health Education etc.  Both single- and joint-authored publications will be considered suitable evidence for a promotion application, provided the applicant has made a significant contribution (e.g. not just editorial responsibility). Individuals using joint-authored pieces as part of their evidence should give a clear indication of the level of their contribution to the output, which should approach or exceed 50%.	
F4 Enhan Resea		As with the comments under B2 above, in some sub-disciplines of medical education there is no requirement for additional resources.  Where significant research funding is required to underpin research activity, the level of funding will be dependent on the sub-discipline. However, it would be expected that funds would be received from competitive and peer reviewed processes e.g. Medev, ASME, ESRC, Government grants, Medical Royal Colleges,	

		charities or other sources or by invitation. It is expected that the candidate's contribution will be at least at the level of Co-I.  Individual and team funding are equally acceptable, but individuals involved in team bids should give a clear indication of the level of their contribution to the process.	
G1 Enhanced Scholarship	Developed and lead a programme of high quality research, systematic investigation or other ongoing academic activity relating to learning and teaching.		Examples might include: proposing, developing and implementing a new Masters programme developed on the basis of extensive scholarship, disseminating existing areas of research / knowledge more widely – e.g.: in national or international contexts / disseminating new areas of research, and/or through publication in peer-reviewed outlets. Invited funded plenaries, invited European Collaboration etc. Tempus bids. Funding for National workshops e.g. Medev. Invited funded consultancy of national or international significance.

\*\*\* The statements in this column are illustrative examples of the type of achievement that will be looked for. They do not constitute an exhaustive list and should serve as a guide only.

## **Additional Info to Consider**

Most though not all lecturers in the school are clinicians. A variable proportion of their time (normally 50-60%) is allocated for clinical work within the NHS. In consequence, time available for the activities on which the usual criteria depend (teaching, research and administration) is curtailed.

Appointment of a clinician to a senior lectureship carries the expectation of appointment as honorary consultant in the appropriate discipline. Such appointments can be made only through the appropriate processes of the NHS trust concerned. Preliminary negotiation and approval in principle from the Trust will therefore normally be expected to have been obtained in advance of the Promotions Panel considering the case for promotion. Appointment to a senior lectureship with a honorary consultant contract will require the establishment of an Advisory Appointment Committee by NHS Trust.

The School is moving towards directing some clinical academic staff to concentrate primarily on either research or learning and teaching, in addition to a clinical role, so that it may be difficult for even the highest calibre candidates to score against all of the University's usual criteria. The achievement of some candidates will be predominately in research and scholarship, while others will have concentrated on learning and teaching, with limited opportunity for research.

As a matter of course, the School of Medicine would not expect Clinical Medical Lecturers to be involved in administrative activities. (Most professional administrative activities in Medicine require consultant status to have been reached). Instead, Clinical Medical Lecturers are required to undertake clinical work, to achieve the Certificate of Completion of Specialist Training (CCST).

The promotions panel will balance the need to recommend promotion according to the published University criteria against these special factors that make assessment against the standard vardstick difficult.

The panel will take into account part time working and career breaks for all candidates.