The Salisbury University Promotions Committee has been charged by the Faculty Senate to review the Faculty Handbook for all mentions of Professors of Practice and Clinical Faculty of particular schools and recommend revisions, if any, to the Faculty Handbook. Specifically, the Faculty Senate would like to know if the Faculty Handbook requires revisions, given the fact that the titles "Professor of Practice" and "Clinical Faculty" are used by more than one school.

With this charge inherited from last year, the Fall 2025 Promotions Committee gathered and collated feedback from a number of Professors of Practice and Clinical Faculty. Our goal was to discover a range of responses that would reveal more than we could as a Committee without much knowledge of this minority within the Faculty body. We have summarized the concerns and questions that people raised below—this document gives a collective idea of the extent to which the Faculty Handbook could do with revisions, along with the extent to which Professors of Practice and Clinical Faculty have significant concerns that are beyond the scope of our Committee to address fully.

As a result of the responses we have gathered, we believe that coming to our Committee as the Senate did was a good first step. Further, we believe this was a necessary move toward clarifying certain sections of the Faculty Handbook that refer to Clinical Faculty and Professors of Practice.

We summarize the feedback we received from Clinical Faculty and Professors of Practice with regard to Chapter 2 of the Faculty Handbook as follows:

Suggestions from and for Clinical Faculty:

- The procedures for promotion need to be clearer. **It isn't clear at what point a clinical faculty member can be eligible for promotion.** Does the faculty member need to work a certain number of years? No one ever seems to have a response to questions from clinical faculty members.
    - One suggested norm: perhaps 5 years is appropriate.
        - Although we have recorded this concern, we also note that currently the Handbook does not use years as a metric for eligibility. (See this section in Chapter 2 re: **Eligibility:** "Faculty at Salisbury University are eligible for promotion based on their rank and degree as determined by the Provost's Office and recommendation by the CHHS Clinical Faculty Promotions Committee." To complicate matters further, clinical faculty are typically given one-year renewable contracts.

- **The definition of clinical faculty should be provided.**

- **The three definitions (assistant, associate, full) could be better aligned.** The use of "and/or" seems inconsistent. There may be compelling reasons to keep the language open enough to meet the needs of different campus departments. At the same time, that openness may present challenges for those seeking promotion, particularly if they are the first in that category to do so. We perceive a great deal of anxiety and uncertainty among faculty at the Clinical Associate rank. That said, it may be that expectations and procedures need to be clarified at the College level, rather than the Faculty Handbook level.

    - **Following on from the above, we note that** the Seidel School uses the title "clinical faculty" with no "Assistant," "Associate," or "Professor" adjective. Also, the State System of MD also defines "Clinical Instructor" as a rank. SU currently have no Clinical Instructors listed in the directory.

- **The wording for promotion to Clinical Professor seems to be a bit ambiguous**. In addition to the qualifications required of a Clinical Associate Professor, the appointee shall have demonstrated a degree of excellence in clinical practice and teaching sufficient to establish an outstanding regional and national reputation among colleagues. The appointee shall also have demonstrated extraordinary scholarly competence and leadership in the profession. Does each school/department define those standards? How are they operationalized?

- **The handbook only discusses CHHS**. If this type of position is available for all the different schools, each school should have guidelines.

    - **Following on from this point,** we suggest that until individual schools complete this, they need to follow the "University" guidelines as established in the Faculty Handbook. "CHHS" will need to be removed from the SU handbook, or alternatively, a University-wide guideline created for all Schools (and College).

- **The handbook discusses that clinical faculty are primarily hired for teaching. This is just not accurate for all.** Some research, publish, present, and are required to keep their certifications and professional memberships up to date. Some are on committees, and serve on the Senate. The certification requirements alone are very time-consuming. The way the handbook is written suggests Clinical faculty are merely lecturers with a terminal degree. Multiple pathways to promotion for Clinical Faculty may need to be considered since individual contracts define varied duties.

- There is a separate link under the main title for "Clinical Faculty," which takes you to that detailed information. However, **Clinical Faculty is not defined in the "Additional Full-time Faculty Ranks" section**. Should it be described separately, or are the titles synonymous?

With regard to the rank of Clinical Professor specifically:

- In the prior ranks (clinical assistant and clinical associate), individuals must demonstrate excellence in teaching and in either scholarly or administrative accomplishments. However, **for Clinical Professor, the text appears to require four areas of excellence: clinical practice, teaching, scholarly competence, and leadership in the profession. This seems like a degree of "escalation" in expectations** that is inconsistent with the definitions of assistant and associate professor. It is also inconsistent with the subsequent section titled "Criteria for Clinical Faculty Promotion."

For professors of practice (especially in Business)

- Lack of detailed discussion in the chapter 2 of the Faculty Handbook: we suggest that the Perdue School should take charge of adding to the coverage here.
- It makes sense that the language be consistent across the institution. If programs are using "Professor of Practice," where do they find their promotion information?
- We need clarify as to whether a job search is required after six years for a lecturer.
- Why are there variable expectations across the USM?
- How are the different ranks of Professors of Practice named and awarded?
- All Perdue Professors of Practice are FTNTT—but is this true elsewhere? (Answering this might help with clarifying relevant sections of the Handbook.)

    - Following on from all these concerns, we note that a Professor of Practice is generally considered an honorary title that does not include tenure or a formal rank. The only mention of Professor Practice in the entire Handbook appears in Chapter 2, "Faculty Rank and Criteria," Section C, "Faculty Rank," which provides its definition. The State System of Maryland uses the term "Professor in the Practice" exactly as SU's Professor of Practice is defined.

    - Initially, we thought this title ("Professor of Practice") did not need to be addressed since it offers no pathway to promotion. However, if the Business School is using this title to hire FTNTT faculty, of which we found seven in the directory, the first step might be to verify whether SU is using this title correctly.

For **Lecturers**:

1. There should be a clear explanation of how one is promoted to Senior Lecturer.
2. FTNT is a link to the USM handbook and not actual pages in SU handbook. Does this fully show all of our policies?

RESULTANT COMMITTEE RECOMMENDATIONS

We estimate that any Faculty Handbook revisions will directly affect a minimum of 50 people (based on numbers since 2018).

As a result of our findings, we recommend the following course of action.

We suggest that the Faculty Senate create an ad hoc committee thoughtfully comprised of members of the faculty body who can effectively represent Clinical Faculty and Professors of Practice in ways that are true to their specific needs/concerns and expectations. We also believe that supervisors at the highest related levels should have a voice in this process as they are the ones making most critical decisions about promotions and long-term contracts.

As a baseline, we advocate that the ad hoc committee include Professors of Practice and Clinical faculty, along with any other suitable representatives within the faculty body.

We encourage such a committee to compare SU to other USM institutions or other comparable institutions to get robust ideas of best practice.

We are mindful that some concerted attention to relevant sections of the Faculty Handbook is crucial for the long-term welfare of those among us in a minority. Perhaps Professors of Practice would especially benefit from mentoring within our institutional context as they are not typically working within academic contexts.

Equally, Clinical Professors are often mentored in a formal way, and this speaks to others' awareness of our needing to create a full culture of support for those who are currently undeserved by the language of the Faculty Handbook.

As one other potential step forward, we suggest that the Faculty Senate check the titles of all current SU faculty members as to whether there are employees that correspond with titles in the Faculty Handbook, section C ("Faculty Titles").

Other than chapter 2 of the Faculty Handbook, we also suggest that every time a FTNTT faculty member is being referred to this is explicit. This becomes important partly because the rank for all Professors of Practice and Clinical Faculty is not consistent.