

Department of Pediatrics Clinical Faculty Incentive Plan - Draft #2

Faculty Name	Assistant Professor Rank	2006-07 Acad Yr
1.0 FTE	Neonatology Division	73 Clinical FTE
16,654 WRVU Past Yr	3,324 (Oct) WRVU To Date	
10,706 MGMA Mean WRVU 100 % Billable	24,910 WRVU @ 90th %	2,996 - 14,162 WRVU @ (25th-75th)%
13,720.31 UHC Mean WRVU	22,241.66 WRVU @ 90th %	9,815.04 - 17,299.13 WRVU @ (25th-75th)%
\$103,458 ASF	\$5,173 ASF + 5 % \$108,631	\$7,242 ASF + 7 % \$110,700

CONFIDENTIAL

**USF Department of Pediatrics Guidelines for Faculty Compensation
v. 1.0**

1. All ranked COM faculty have an expectation to show minimum productivity in the areas of research, instruction, and service.
 - a. 5% in instruction
 - b. 5% research or scholarly activity.
 - c. 3% service
 - d. 2% professional development.
2. Activity is based on the current academic year assignment as documented in the FAR reports by category of effort.
3. Activity beyond the minimum % faculty activity required by the COM must be associated with a specified funding source that corresponds to the level of assigned effort unless otherwise approved by the department chair and division chief.
 - a. Research effort funding should come through extramural grants or contracts that are supported by indirect cost returns. Salary funded that is not associated with IDC must be approved by the Department Chair.
 - b. Direct funding for education effort that is not teaching in the context of patient care should be linked to a specific instructional activity that has a defined curriculum with educational outcomes. This education effort should be funded by grants or COM supported instructional effort that comes from state sources.
 - c. Education effort for teaching in the context of patient care may be funded by funds that are either designated for education sources or from clinical revenue. Directed education funding for faculty effort in this category requires the oversight and approval of the division chief and department chairman. Contact hours with trainees should be clearly documented and mechanisms should be in place to accurately evaluate teaching effort.
 - d. Clinical effort should be supported through UMSA or clinical contracts and these funding streams can also support teaching in the context of patient care. Benchmarks for productivity are based on work RVU, by specialty and compared, when possible, to the AAMC tables for clinical productivity for academic physicians. For hospital based physicians, compensation should be linked to time spent on inpatient clinical service rather than solely based on RVU.
 - e. Administrative effort funding should be clearly defined by the department chair or Dean of the College of Medicine. It should be directly linked to funds from the COM, UMSA, or other sources.
4. The extent of compensation should be linked to percentage of effort assignment.

5. Productivity outcomes will be linked to incentive rewards added to the base pay whenever possible. Whether these pay increases come in the form of salary raises or bonuses is at the discretion of the Department Chair and Dean of the College of Medicine. Faculty who are rated outstanding or excellent will be eligible for increases in pay up to 7% of their total compensation. Those faculty who achieve expectations will continue at current pay scale or will be limited to cost of living increases. Those who are deficient and fail to meet expectations may have pay deductions.
6. When appropriate, evaluation criteria for compensation should be linked to objective parameters related to the extent of funding rather than subjective parameters. Criteria for compensation increases are not necessarily the same as for academic promotion and tenure. While some sources of funding, such as peer reviewed federal grants will full indirect cost returns, may have higher value when assessing faculty productivity, in general the overall financial productivity of a faculty member is the primary benchmark for compensation.
7. To date, the Department of Pediatrics has not carried out annual evaluations of all faculty members, has not established clear criteria for performance and achievement, and has not systematically reviewed Faculty Assignment Reports (FAR) in order to assure their accuracy. Faculty should be given from January to June 2006 to adjust their FAR to assure that it accurately reflects their effort prior to the initiation of a college wide compensation plan. The revised FAR needs to be approved by the Division Chief and/or Department Chairman.
8. Division chiefs, department chairs, and UMSA leadership should be responsible for assuring that USF clinics are appropriately staffed to assure optimal clinical productivity.

Evaluation criteria for determining extent of compensation.

Productivity should be based on clear goals and objectives outlined in advance by the faculty member, division chief, and department chair. These goals should be based on the annual evaluation of the faculty member and outlined in writing and signed by all participants. Barriers and plan to overcome come them should be acknowledged. Faculty members or division chiefs can nominate and provide support for achievements that are outstanding or exceed expectations.

1. **Outstanding** achievements that far exceed expectations will be eligible for pay increase up to 7% of the total compensation.
2. **Strong** achievements exceed expectations will be eligible for pay increases that are up to 5% of the total compensation.
3. **Standard** achievement meets expectations for all ranked faculty including the minimum 15% effort. This individuals will continue on current pay scale.
4. **Fails** to achieve expectations may have up to 5% pay cut from non-tenured earnings.

PERFORMANCE EXPECTATIONS: EXAMPLES

	Outstanding bonus	Exceeds incentive	Achieves base	Fails
Clinical	>90% for AAMC specialty specific adjusted RVU	>75% for AAMC specialty specific adjusted RVU	25-75% for AAMC specialty specific adjusted RVU	<25% for AAMC specialty specific adjusted RVU
Research	<ul style="list-style-type: none"> PI or CoPI on federally funded peer reviewed grant with negotiated IDC. >\$150,000 direct costs <u>OR</u> >50% effort supported by investigator initiated grant funding. 	<ul style="list-style-type: none"> Co-investigator on federally funded peer reviewed grant or contract with negotiated IDC. >\$50,000/year income in peer reviewed research. >20% effort supported by research grants or contracts. Substantial grants or contracts from non-peer reviewed sources. 	<ul style="list-style-type: none"> Scholarly contributions through peer reviewed publications, abstracts, review articles or books. Regularly submits peer reviewed funding applications. < 15% effort supported by research grants or contracts. <p>Serves as principal investigator on at least one investigator initiated research protocol. Examples, include basic science or IRB-approved clinical research study but not necessarily associated with a defined funding source.</p>	<ul style="list-style-type: none"> No papers or scholarly activity or demonstrable scholarly activity during the academic year. No effort support by research grants or contracts.
Education	<ul style="list-style-type: none"> Consistently outstanding teaching evaluations by peers, house staff, and USF students. Recipient of Teacher of the Year Award 	<ul style="list-style-type: none"> Consistently in Upper quartile in teaching evaluations by peers, house staff, and medical students. Teaching activities beyond assignment level. 	<ul style="list-style-type: none"> Participates in USF student and residency education and receives positive evaluations. 	<ul style="list-style-type: none"> Fails to participate in assigned teaching activities. Negative teaching evaluations.

12-2006

<p>Service</p>	<ul style="list-style-type: none"> • Leadership role in national organizations or committees such as academic societies, federal study sections, or similar national groups. • Chairs university wide committees 	<ul style="list-style-type: none"> • Serves on community based committees or programs. • Member of peer review committees for foundations, state, federal, or regional societies or agencies. • Serves on college-wide committees. 	<ul style="list-style-type: none"> • Participates in community, professional, or service organizations. • Serves on department or college wide committees. 	<p>No participation in community, national, regional, or local professional organizations.</p>
<p>Administration</p>	<ul style="list-style-type: none"> • Leads major department or college initiative. • Outstanding productivity or accomplishments by administrative unit. 	<ul style="list-style-type: none"> • Member of successful college wide or university initiative. 	<p>Assists in the administration of department or college programs.</p>	<p>Detracts from or fails to support administrative changes or initiatives.</p>