THE UNIVERSITY OF BRITISH COLUMBIA

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September 7, 2007

To: Senate
From: Tributes Committee

Subject: Policy on Emeritus Status for Clinical Faculty (approval)

Please find attached a proposal to revise the current Senate policy on Emeritus Status with respect to the eligibility of clinical faculty. The proposed policy creates some explicit limits on such appointments in the Faculty of Medicine and also permits the possibility of comparable cases being made for exceptional cases of adjunct or honorary professors in other Faculties.

Motion: That the Senate policy on Emeritus Status, as approved by the Senate on February 22, 2006, be amended such that the following sentence:

> *Individuals holding Clinical appointments in the Faculty of Medicine must have had 15 years of continuous service to qualify*.

is replaced by the following:

> *Individuals holding Clinical appointments in the Faculty of Medicine, and those holding equivalent Honorary or Adjunct appointments in other Faculties, may be eligible for emeritus status at the time of retirement if they are recommended by their Deans and Departments and meet the following criteria: a) at least 15 years of continuous service, and b) hold the rank of Clinical Associate Professor or Clinical Professor or demonstrate a scholarly record that has been reviewed according to established university procedures at the equivalent level, and c) demonstrate service that is strongly identified with the University of British Columbia and deemed worthy of continuing recognition.*

Respectfully submitted,

Sally Thorne, Chair,
Senate Tributes Committee

Background to the Issue of Clinical Emeritus Appointments

Over the last two years, the Senate Tributes Committee re-examined the university's policy on emeritus status, having been prompted by two distinct requests:

1. to reconsider the existing policy on emeritus status for longstanding members of the faculty who resign prior to the normal age of retirement (conferred, but not until following the 65th birthday);
2. to consider the conditions under which emeritus status might be revoked in order to respond to a specific case presented to the committee by an academic unit.

As a result of extensive consultation and deliberation, both in the Tributes Committee and on the floor of Senate, we were able to achieve a new policy and to deal with the case at hand. However, additional issues related to emeritus status arose – in particular, the issue of emeritus status for Clinical Faculty within the Faculty of Medicine (a specific exception within the previous policy that we did not address within the last round of revisions).

Clinical Faculty: Clinical Faculty are non-term, non-salaried appointees (although they may be paid an honorarium or salary in relation to their specific duties with the university). We have taken the wording for the proposed modification and the procedural note that accompanies it from that developed by the Faculty of Medicine in its own documents pertaining to the Appointment, Reappointment and Promotion of Clinical Faculty[1].

The current university HR policy aligns Clinical Faculty in some respects with what are termed Adjunct Faculty in other academic units, although specified policies and criteria exist pertaining to Clinical Faculty as a distinct category within Medicine, Dentistry and Nursing. The Faculty of Medicine has a longstanding tradition of relying heavily on

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[1] UBC Faculty of Medicine, Department of Family Practice,
Academic Ranks, Appointment, Reappointment and Promotion for Clinical Faculty
Approved January 24, 2006
http://www.familypractice.ubc.ca/documents/DFP-ARPProceduresJanuary242006.pdf

Emeritus Appointments
A clinical emeritus appointment is an honourable recognition of long service and contributions to the Faculty of Medicine and it is not automatic. Where a Clinical Faculty member has reached his/her 65th birthday, and where the Clinical Faculty member has completed 15 continuous years of service, and where the Faculty member's service is strongly identified with the University of British Columbia and deemed worthy of continuing recognition, a recommendation for awarding the title of Clinical Professor or Clinical Associate Professor or Clinical Assistant Professor Emeritus may be made by the Dean to the Tributes Committee and ultimately to Senate on the recommendation of the Head/Director. Each case will be decided on its individual merit. Initiation of this process may be by the appropriate Program Director, or (where applicable) Division Head, or teaching hospital Department Head and would require approval of the Departmental Committee on Clinical Appointments and Promotions.

An Emeritus appointment is an honourable recognition of long service and contribution to the Faculty of Medicine but is not automatic.

faculty whose primary clinical practice and salary are derived from elsewhere. Over time, it has developed a set of procedures whereby Clinical Faculty are managed in as comparable a manner as possible to regular faculty with respect to rigorous review of teaching/scholarship/service, and there are explicit formal review procedures in place related to promotion through the ranks.

Current Issues: As the Senate Tributes Committee wrestled with the complexities inherent in this matter, we found ourselves to be in agreement about the basic principles for proposing changes: 1) the significance of the emeritus designation as an honorific in recognition of significant service to the university be preserved; 2) the procedures whereby individuals who have substantive university involvement over a considerable period of time but are not in salaried faculty appointments be comparably rigorous with those required of regular faculty members; 3) that "clinical" (adjunct/honorary) faculty from Faculties other than Medicine could theoretically be eligible if the cases met a similar standard of review and contribution; and 4) that the principles that currently apply with regard to how suitable cases are identified and put forward by Deans and considered by the Senate Tributes Committee be preserved. In order to accomplish this, we concluded that it was appropriate to explore the possibility of limiting emeritus status to those individuals who held the rank of Clinical Associate or Full Professor under the current Faculty of Medicine contract, or who, in other departments and rank categories, had clearly demonstrated a level of academic achievement that would be equivalent to that of Associate Professor at this university.

Recommendation: We concluded that an appropriate approach was to propose a modification to the current listing under Criteria for Emeritus/Emerita Status as it pertains to Clinical appointments in the Faculty of Medicine. It is our hope that this modification will accomplish several outcomes:

1. Provide support for the Faculty of Medicine in limiting expectations related to emeritus status in the current context of rapid provincial expansion;
2. Make explicit that emeritus status is reserved for cases in which a substantive and significant contribution to the university teaching and scholarly mandates is apparent;
3. Remove the exclusivity of the option so that comparable cases in other disciplines could be considered should they develop comparable mechanisms for appointment, reappointment and promotion;
4. Provide a rank standard against which the university can continue to reserve emeritus status for exceptional and strong cases.

Current Vancouver Senate Policy: Emeritus Status

http://www.students.ubc.ca/senate/policies.cfm?ID=14

The recommendations in the following report were accepted by the Vancouver Senate at its meeting of February 22, 2006.

Emeritus/Emerita Status

Emeritus/emerita status is a recognition conferred upon individuals who are retired from UBC (i.e., UBC Vancouver) but permitted to retain as an honorary title the rank held at retirement as set out in the following criteria.

Criteria for Emeritus/Emerita Status

In order to be eligible to be recommended to Senate by the Tributes Committee for emeritus/emerita status, an individual must:

- Have a combined age at retirement plus years of full-time service to the University of 70 or more, and
- Have held a full-time Tenure, Tenure-track, Grant Tenure or Grant Tenure-track position at the rank of Assistant, Associate or Full Professor or Instructor. In addition, Librarians and Program Directors must have held a Confirmed appointment.

Individuals holding Clinical appointments in the Faculty of Medicine must have had 15 years of continuous service to qualify.

A retiring Chancellor is automatically granted emeritus/emerita status.

Senate, at its discretion, may decide under exceptional circumstances, not to recommend emeritus/emerita status or to revoke emeritus/emerita status from an individual.

Procedures

- In June and December of each year, Faculty Relations forwards a list to the Senate Tributes Committee via Senate & Curriculum Services of retiring faculty members who meet the combined age and service requirement. It also forwards a list containing a) those "resigning" faculty members who have been recommended by Deans and/or Departments as retiring from UBC and otherwise meet the eligibility requirements, and b) those individuals holding clinical appointments who meet the criteria for emeritus/emerita status. The Tributes Committee considers the list for approval and then forwards the list to Senate for final approval. The Registrar and Secretary to Senate notifies faculty members of their emeritus/emerita status by letter following the Senate meeting.
- Individuals who meet the eligibility criteria and were not so recommended at the time of resignation may make subsequent application for consideration to Faculty Relations.
- Emeritus/emerita rank will be determined by the rank at retirement. In the event that an individual holds two ranks at the time of retirement (eg Professor and Dean) the individual may express a preference as to which of the two ranks will constitute the emeritus/emerita title.
- Appeals will be decided by the Vice-President Academic and Provost.