

Optometry Addendum – 2023/2024

Faculty of Science Performance Evaluation Guidelines

[Faculty Performance Evaluation Guidelines | Science | University of Waterloo \(uwaterloo.ca\)](#)

[\(Consistent with Article 13 of Memorandum of Agreement\)](#)

Addendum

This addendum has been prepared as directed by the Memorandum of Agreement section 13.5.1.

Specifically:

(a) Each Faculty shall have Faculty Performance Evaluation Guidelines setting out the evaluation criteria for that Faculty. The Faculty Performance Evaluation Guidelines shall be reviewed and updated no less than once every five (5) years, and changes shall be approved by a majority vote of the Faculty Council no later than 15 October in the year before evaluation calendar year to which the changes would apply.

(b) Each Department shall have an Addendum to their Faculty Performance Evaluation Guidelines setting out the performance expectations in the Department for scholarship, teaching, and service. The Addendum shall be reviewed and updated biennially, and changes shall be approved by: (i) a majority vote of members of the Department, and (ii) the Faculty Dean who shall review for consistency with the documents listed in 13.5.1(c) no later than 15 October in the year before the evaluation calendar year(s) to which the changes would apply.

(c) Faculty Performance Evaluation Guidelines and Departmental Addenda shall be consistent with this Agreement, and with University policies, procedures and guidelines (including the evaluation criteria set out in Policy 77). Departmental Addenda shall also be consistent with Faculty Performance Evaluation Guidelines. In case of a conflict, precedence shall be given first to this Agreement; then to University policies, procedures and guidelines; and then to the Faculty Performance Evaluation Guidelines.

This addendum was last reviewed: 26 September 2022

This addendum was approved: 21 October 2022

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Preface

The addendum is in no way exhaustive; however, it should give faculty a sense of general expectations.

The faculty member can include an activity in alternate categories than specified in this addendum (i.e. scholarship/teaching/service section); justification for the alternates should be provided.

Evaluation Process

- The Director will be assisted with performance evaluations by the School's Faculty Performance Evaluation Committee (FPEC), consisting of 4 elected tenured or continuing faculty members, two of whom must hold a clinical appointment^[1] and two of whom do not. An effort will be made to strive for gender balance.
- The FPEC will evaluate the data submitted by each faculty member prior to the meeting to discuss the submissions.
- FPEC members are not present for the review of their own file, nor for any file of a member to whom they are related.
- Each area of activity (scholarship, teaching and service) is scored separately for each member. Where data are available, scores obtained from third party evaluations for each member (such as teaching evaluations or clinical supervision evaluations) are compared for context to average scores in the same evaluation across all members.
- The committee generally attempts to review parity of assessments between similar ranks/assignments as they progress through the files.
- Notes of comments made by the committee are taken during the meeting. The committee's comments and ratings are verbally agreed by majority vote.
- Potential nominees for the Excellence in Science Teaching Award (ESTA) and the Excellence in Science Research Award (ESRA) will be identified by the FPEC and forwarded to the Awards Committee to finalise the optometry nominee. In non-reporting years, tenured faculty will be included in the pool from which the potential nominees will be selected on the basis of their last reporting cycle.
- The eligible members for University Performance Awards are determined by the Director and are not reviewed by the FPEC.

^[1] Clinical appointments include Clinical Professoriate and Clinical Lecturers.

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Scholarship

- Scholarship will be evaluated for the period of the activity report (2 years for tenured faculty; 1 year for tenure-track or definite term appointments). The scores and the reports (if needed) from the previous evaluation cycle will be made available to the evaluation committee.
- Scholarship areas generally relate to the fields of vision, biomedical, clinical, and/or educational sciences.
- Innovative clinical or professional practice scholarship includes but is not limited to:
 - Establishing a new clinical service or increasing its scope,
 - Developing new modes of service delivery or assessment, examination or management approaches, particularly those that become models for the profession
 - Curricular developments related to clinical practice or service delivery.
 - Examples may include service for underserved population, enhanced care and/or enhanced education; peer-review/professional adjudication (arms-length) or alternative metrics/dissemination as a method for assessing scholarly work.
- Publishing a textbook is considered to be a unique and valuable contribution. Generally, authoring such a textbook is commonly ranked higher than editing. The impact of this text can be indicated either by sales or by numbers of programs adopting the text for use.
- Posted professional electronic resources are also considered to be a unique and valuable contribution. The impact of these electronic resources, as indicated by downloads, visitors and/or citations can indicate the value of the contribution.
- Regarding grant support, the competitiveness of the program from which the grant has been received is a factor and the position of principal investigator is weighed most heavily followed by co-investigator status, and then the consultant category. The same criteria apply to contracts. Funding for innovative clinical practice is another indicator of scholarship activity. The position of principal innovator is weighed most heavily, followed by co-innovator status.
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- Invited lectures, CE and presentations to optometrists, to other professionals are normally classified as scholarship; scholarly justification should be provided if possible.

Teaching

- Information from student surveys should be interpreted and used with caution.
- Broadly defined, teaching can involve classroom, lab, and clinic instruction; individual student consultations; graduate student, post-doctoral fellow (PDF), clinical research fellow (CRF) and resident supervision; and curricular, course and teaching method development.

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- Activity of residents in patient care, clinical innovations, presentations and publications is a formative tool for assessment of their education.
- The principal instructor (if there is one) is considered to carry a more significant role than others (e.g., guest lecturers, co-instructors), assuming that they are carrying a major teaching load rather than strictly coordinating the appearance of a series of guest lecturers.
- Course instructors should indicate the number of hours of the total course time that they taught, rather than a percentage, so that the contribution of co-instructors can be interpreted accurately. Courses with unusual amounts of prep time should be indicated.
- Faculty members may request peer reviews to be undertaken by the School during the year and these may be submitted for consideration. Faculty members may themselves request a peer review from another faculty member but should document why this is credible (e.g. some element of arm's length, why can they judge your teaching). CTE can also provide reviews of teaching which may be submitted.
- Faculty members may elect to allow their course comments to be released to the FPEC and included as part of their activity report. To do this they should contact the School Administrator indicating the course number and a statement of their permission.
- ASOPP teaching is assessed under teaching and should be included in the teaching section of the template.
- Invitations from other educational organizations and institutions to teach are valuable contributions to the reputation of the School. A pattern of repeat invitations to lecture from academic or professional organizations will be taken as a qualitative indicator that the person's teaching is considered to be of high quality. Invitations to lecture on behalf of corporate partners can also be valuable if appropriate conflict of interest guidelines are followed.
- Evidence of successful innovations in clinical, laboratory or didactic teaching is valued highly.

Service

- Any service that enhances the reputation of the University or the School will be valued. Normally, service within the School, the University, optometric organizations and organizations involved in public health, healthcare, education and/or research are preferred (e.g., committee work, appointments, head of clinical service, consultancies, accreditation participation).
- The workload imposed by service positions and the role of the faculty member on committees are considered (e.g., committee chairs are weighted more than committee members; however, if a faculty member is Chair of a committee with a modest load and few meetings, the impact of the Chair position on the overall rating would be less than non-Chair service on a more demanding committee).
- Supervision of staff members should be reported as a service activity.

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- Direct clinical care through the UW clinics and its outreach programs, may be a stand-alone service element. i.e. provision of professional assessment and judgement is for the patient's benefit and beyond that required to teach and assess students.
- Unassigned teaching is included as service.
- All other things being equal, international positions are ranked above national, and national above local.