APPENDIX A

2015-16 Clinical Portfolio Template
UF College of Veterinary Medicine

The purpose of this clinical portfolio is to provide documentation of clinical excellence for faculty who have a major clinical assignment. Information provided here should not duplicate what is already contained in other sections of the Promotion and Tenure packet. Rather, you should expand and comment on the importance of some items (e.g. clinical publications, presentations) in addition to adding pertinent data that will establish excellence in patient care. For each of the following 12 components, please enter all information that is available for your clinical activities. You should state “none” or “not available” for elements not applicable in your circumstance. Please limit the completed portfolio to 12 pages.

1. Scope of the faculty member’s clinical practice;
   a. Candidates should compose a reflective statement that expands upon information provided in Sections #2 and 3 of the P&T packet. Use first person. Describe your primary practice setting, typical patient caseload, and how your clinical practice integrates with other clinical care practices, departments, educational efforts, or research activities. Highlight the impact of your clinical work e.g. through referrals because of your expertise, innovation of clinical skills, unique expertise in the region or broader and overall value to the institution.

   b. The following chart should be completed and expanded as available.

<table>
<thead>
<tr>
<th>Year (July 1-June 30)</th>
<th>2014-15</th>
<th>2013-14</th>
<th>2012-13</th>
<th>2011-12</th>
<th>2010-11</th>
<th>2009-10</th>
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<tbody>
<tr>
<td># Weeks on Clinics</td>
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<td># Students/Rotation</td>
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<td># House Officers Supervised</td>
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<tr>
<td>% Service Chief Assignment</td>
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<td>Additional Optional Information</td>
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<td>Annual Service Caseload</td>
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<td>Annual Service Revenue Rollup</td>
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<td>Annual Service Gross Revenue</td>
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<td>Annual Service Net Income</td>
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</tbody>
</table>

2. Evaluations (insert or summarize);
   a. Highlight the chair’s assessment of clinical performance as contained in the annual letters of evaluation. This information may be presented as a descriptive summary or in table format.
   b. Include any available report(s) from at least one interdisciplinary evaluation (i.e. by peers, referring colleagues, chief of staff, veterinary technician, etc.). The evaluation should demonstrate evidence of excellence in clinical care through ratings of core competencies, such as: professionalism, collaboration, expertise in area, demonstration of efficiency and cost-effectiveness of clinical care as outlined in the peer evaluation form or a 360° evaluation form. Ideally, this evaluation should be completed annually by a minimum of two evaluators. Insert evaluations forms here, or if many, summarize
here and include the forms in Section #33 of the packet. These may be completed by any
colleague or staff member.

3. **Client satisfaction scores** (insert or summarize);
   a. Provide any available assessment of client satisfaction with the quality of care and
      communications rendered by the candidate. The definition of client in this context is the
      owner/trainer of the patient and/or the referring veterinarian. Metrics should be
      provided for the most recent five years, if available. This information is collected within
      UFVH. If individual-level data are not available, include any available information that is
      relevant to the candidate, such as overall scores for the specific inpatient or outpatient
      service or clinic location. Indicate your role within that setting, if group data are
      provided. Provide benchmark results for the department, if available. Questionnaires
      may cover such items as:
      i. Timeliness of communication by clinician
      ii. Experiences with clinician communication in response to questions
      iii. Client/Patient centered care – experiences with the quality of care provided
      iv. Overall satisfaction with the service provided
   b. Additional sources of client satisfaction feedback might include unsolicited client
      feedback. Please label any direct client comments under using heading “Unsolicited
      client comments” and include the date received.

4. **Commitment to ongoing growth in clinical performance;**
   Include any elements that indicate maintenance of skills, participation in certification
   processes, and participation in programs that advance the scope or skills of your practice in
   the field. Examples include:
   a. Improvement of your knowledge or clinical practice skills through CE courses,
      recertification procedures and passing credentialing or board examinations.
   b. Development of new clinical or procedural skills. Providing unique techniques,
      procedures or skills for care within the department or institution. For patents and
      copyrights of clinical material refer to items already listed in Section #15 (Patents
      and copyrights), and describe how these enhance or have the potential to enhance
      patient care and improve outcomes.
   c. Development and implementation of new models of care delivery, clinical pathways,
      leadership of interdisciplinary teams or other creative activities designed to evaluate
      and improve the quality of medical care.
   d. Include examples of practice reorganizations, analysis of health care delivery,
      improvements in access or cost-effectiveness or other creative interventions that
      have improved the health of populations, the efficiency of practice or the quality of
      care.
   e. Cite works and activities previously described in Section #14 (Creative Works or
      Activities) here if they are directly related to enhanced patient care or client
      outcome.

5. **Quality of care metrics** [Note: The UFVH has minimal quality of care metrics established at this
   time. This section is currently applicable to surgical and anesthesia services];
   Include evidence of excellence in the quality of care including compliance with discipline and hospital
   specific quality metrics that are based on established best practices if available. These include
   surgical checklist compliance. A minimum of three years is acceptable.

6. **Clinical leadership;**
Provide a description of your role(s) as a leader in clinical practice within the institution or beyond. Examples include membership on departmental or hospital committees such as infection control or service chief. Describe each leadership role and how you positively influenced client/patient care programs. Additional indicators of clinical leadership include program building and mentoring junior faculty within the clinical practice setting. Building integrated programs that span other disciplines and departments should be highlighted.

7. Professional Contributions;
List significant contributions to professional societies, clinical task forces and state, national and international agencies. Do not simply repeat the list of same memberships that are included in Section #26 (Membership and Activities in the Profession). Instead, describe your specific contributions to these local, regional, or national entities. Statements from leaders within these organizations may be included here. Indicate if the comments were unsolicited.

8. Clinical referrals [Note: faculty members who practice only in hospital-based practices (primary care clinician, radiologist, anesthesiologist, pathologist) need not complete this section unless applicable];
Document the number of clinical referrals to your specific service if available on an annual basis. You may also include data that demonstrates the impact of downstream referrals by you to other faculty members (case transfers).

9. Clinical Publications;
Highlight those publications already listed in Section #16 (Publications) that have resulted in changes and improvement in clinical care. List all clinically related scholarly activity not included in Section #16 (Publications). These items may include patient information guides, written or web-based practice information for the clinical care team, and other products as distinct from peer reviewed research publications.

10. Clinical Presentations;
Highlight the presentations already listed in Section #17 (Lectures, Speeches, Posters, Presented at Professional Conferences) which specifically address clinical topics. Also include presentations in local and regional settings that address clinical quality improvement projects and indicate if they were part of an overall program that changed culture or practice within the UF Veterinary Hospitals.

11. Awards and Honors;
Highlight any awards and honors already listed in Section #27 (Honors) relevant to clinical care and accomplishments. List all local, regional and national awards including patient recognitions, departmental acknowledgements and other citations for clinical accomplishments. Please list the criteria for the award or honor to provide context for the reviewers.

12. Other pertinent information
Provide documentation that supports clinical excellence not cited in other sections of this package. Examples may include client testimonials, donations in honor of the clinician by a grateful client, and other recognitions from peers or trainees. (Indicate if unsolicited by creating a heading “Unsolicited” for any included direct comments.)