Executive Summary-Comprehensive Faculty Development Needs Assessment

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Background

The Office of Faculty Affairs (OFA) began in 2009 to support the School of Medicine (SOM). The office originated from an initial need for an onboarding process and positive orientation experience for faculty that would address known issues with retention related to negative first impressions. Concurrently, while faculty onboarding began taking shape, the office was created and evolved through a needs assessment where priorities emerged. OFA was then charged with creating consistency among administrative faculty processes and procedures for all departments in the SOM in addition to other faculty support initiatives. In the fall of 2014 OFA became an institutional support office and began helping schools, other than medicine, promote faculty satisfaction and achieve excellence in all areas required to support faculty. At that time, OFA was also asked to take responsibility for faculty development which had not previously been included in the 2009 charge.

The current mission of the OFA is to champion faculty vitality through recruitment, integration, development and advancement across the faculty life cycle. As OFA continues to bolster current faculty affairs initiatives throughout the institution they also look for additional avenues to continue championing the goal of supporting faculty. OFA is also actively working towards achieving UMMC's fourth strategic goal, to "cultivate an engaged, effective, professional and diverse workforce and leadership team." Furthermore, strategy 4.3 ties directly to faculty development- "sustain strong leadership of UMMC through relevant, scalable professional development programs, proactive succession management planning, and talent management resources that support knowledge transfer and career transitions" (UMMC 2020 Strategic Plan, 2014). Undoubtedly faculty development should be a priority, and is an area where many opportunities exist to improve faculty engagement and satisfaction.

Purpose

To increase awareness of existing faculty development programs and to further examine faculty desires in regards to faculty development opportunities a comprehensive needs assessment was conducted. Through this assessment OFA also hoped to identify areas of current fruitful faculty development efforts and activities on campus that could potentially be used as models for future endeavors. Logically, UMMC would best be served by capitalizing on currently successful faculty development programs and by determining ways to scale or increase multidisciplinary collaborations to increase their scope and impact across UMMC. The findings of this assessment will be the focus of this summary.

Method

An innovative, multi-factor approach was taken when conducting this comprehensive needs assessment. Preliminary research suggests that when utilizing a needs assessment survey

alone, to build faculty development programing, there is significant difference between what topics faculty annotate interest in and what topics they actually attend when offered (Katz & Batteson, 2015). Therefore, in this assessment, information was integrated from numerous sources that began with an extensive literature review of the existing faculty development body of work, followed by an examination of the data from the most recent Faculty Forward Engagement Survey completed by all schools at UMMC. This information added to OFA's understanding of the current faculty development situational posture on campus compared to several other similar institutions within the Association of American Medical Colleges (AAMC). Findings from the 2015 Accreditation Council for Graduate Medical Education (ACGME) Faculty and Resident Surveys were also reviewed. From there, face-to-face information gathering sessions were conducted. In person communications consisted of two forms: meetings with individual department and school level faculty development leaders to learn about current initiatives and perceived needs, as well as defined faculty focus groups.

It is also significant to note that traditional approaches to this type of needs assessment have typically involved surveys or focus groups, but have not used both. Additionally, we believe our methodology (that included information and data from multiple sources) to be a novel approach that attempted to present an inclusive, summative view of faculty development needs across UMMC.

Summary of Results

Literature Review

Existing literature on faculty development in academic medicine lends insights into how faculty development is defined, recommends routine best practices for faculty development (covered in more detail in the recommendations section of this paper), and demonstrates the need for an increased focus on faculty development as a tool for retention, faculty satisfaction and faculty engagement at all points along the faculty career lifecycle.

For the purpose of this assessment the following definition of faculty development was assumed: "… any planned activity designed to improve an individual's knowledge and skills in areas considered essential to the performance of a faculty member" (Gusic, Milner, Tisdall, Taylor, Quillen, & Thorndyke, 2010).

Literature establishes a clear positive relationship between mentorship and career satisfaction and infers, if not always validates, a connection between satisfaction and engagement to retention. Literature also shows mentorship to be a known routine best practice. In addition to mentorship, several other areas should be considered priorities for faculty development. These priorities should include the following: career planning (with preparation for promotion and tenure), teaching and academic skills, and burnout prevention (with a focus on balancing personal and professional demands). Research support was also noted as a primary area within faculty development that should be considered a priority. Research support includes skills training in how to conduct research (the IRB process, grant writing, etc.), opportunities for research collaborations and collegial networking.

Faculty Forward

Faculty satisfaction and engagement is known to influence retention, and the high costs of faculty turn over for academic medical centers provides clear support for investing resources in efforts to measure and continually increase faculty satisfaction. To gain knowledge of UMMC's posture regarding faculty satisfaction UMMC has participated in the AAMC Faculty Forward Engagement Survey (FF) on multiple occasions since 2009. This independent, research-based survey, is used to diagnose areas of faculty engagement and the effectiveness of faculty-related institutional policies and practices in the multiple domains.

An examination of UMMC's most recent FF data for all schools revealed several faculty development themes. And, it appeared that many of these themes had been ongoing faculty concerns because they also appeared in an examination of previous survey years' data. Based on FF data, faculty at UMMC desire: opportunities to collaborate with faculty from other departments and schools (inter-professional networking and social networking), equitable opportunities for faculty development, mentorship as a standard not an exception (equitable access to mentorship for all faculty), and an increased culture of professionalism. It is also significant to note that the Faculty Forward Task Force, an advisory group created to synthesize the 2014-2015 survey data and propose future quality improvement activities, recommended offering conflict management training as a faculty development opportunity.

ACGME Surveys

Data from the 2015 ACGME Faculty Survey supported increasing mentorship activities, as faculty were under satisfied with both personal performance feedback and their development in supervising and educating residents/fellows. Data also suggested that communication and interpersonal skills training would be beneficial for faculty, specifically as it relates to giving and receiving feedback. Faculty also noted a need for expanding opportunities for scholarly work. Likewise, data from the Resident Survey affirmed a need for increased opportunities for scholarly work and improved communication in regards to feedback about performance and practice habits. Additionally, data demonstrated a need for further and continued professionalism initiatives. Residents were not comfortable enough raising concerns without fear and also thought that faculty could have created an environment that was better at promoting the spirit of inquiry.

UMMC Faculty Development Leaders

Individual face-to-face meetings were held with 24 faculty development leaders and administrators across campus. (See Appendix 1for list of leaders.) Information gathered at these meetings validated faculty forward findings on perception of needs and also provided knowledge of several successful faculty development activities currently occurring at UMMC. Likewise, these meetings also highlighted areas (topic areas and literal departmental/ school areas) where opportunities for improvement exist.

Of the leaders OFA engaged within the SOM, the Departments of Pediatrics and Dermatology seemed to be the most evolved in regards to faculty development initiatives. They

both had an extensive mentorship program for faculty that could be models for other departments. They were also very creative in how they funded development. OFA also identified a notable research mentorship program within the Department of Physiology and Biophysics. Several other SOM departments offer informal mentorship, but most lack structured mentorship programs. A few departments appeared to offer formal faculty development programs (seminars, retreats, funding to attend national conferences, etc). However, many departments did not have a structured process to develop their faculty beyond staff meetings and annual required human resource faculty evaluations.

The Schools of Nursing and Health Related Professions appeared to have a very collaborative relationship regarding faculty development focused on academic excellence. Additionally, both schools acknowledged the need for a more formal mentorship program for faculty. The SON is also seeking to broaden their educational research goals, which will require a targeted faculty development effort regarding research in the near future. Independently, the school of health related professions has a long-standing faculty development committee which currently engages faculty in multiple ways. They have recently created a sub-committee focused on mentorship that will begin more focused work in the spring of 2016. To OFA's knowledge, the School of Dentistry doesn't currently have a formal faculty development program. And, the School of Pharmacy, although autonomous from UMMC, appeared to offer some opportunities for future collaboration in faculty development.

In addition to meeting with department and school-level faculty development leaders OFA also sought knowledge from the Office of Continuing Health Professional Education (CME) and other institutional development programs. The CME office offers many opportunities for departments and schools to partner and collaborate to provide faculty development offerings. The UMMC Leadership Development Program (LDP), run out of the office of Academic Development, provides leadership-focused development for current and emerging institutional leaders (faculty and staff). This office also offers multiple faculty development opportunities geared toward educational excellence including hosting monthly seminars and funding faculty grants for development, to name a few. A second leadership-focused program identified is the UMMC Leadership Program offered by Human Resources. This program is not primarily for faculty, although both faculty and staff participate. (Note: To the author's knowledge, the leadership development program offered by The Office of Academic Development referenced above will host its last cohort in the 2015-2016 academic year. That office will be shifting focus to academic excellence and will no longer sponsor a leadership development program. No further information on future programming is presently available.)

Overall, discussions with faculty development leaders across campus suggested clear disparities from department to department and school to school. Definite inequities were perceived (by the author) regarding faculty opportunities for participation in, and access to, faculty development activities. Additionally, a few common themes emerged. These include a desire and need for: formal mentorship programs, increased faculty development regarding research, continued focus on educational skills (basic pedagogy as well as use of technology and other classroom management topics), and more multi-disciplinary collaborations across

departments and schools. It was also clear that some schools recognized a need for "educational on-boarding" per se, since most new faculty do not have teaching experience or education degrees. Because this is a responsibility for almost all faculty, it was suggested by several leaders that new UMMC faculty could greatly benefit from focused efforts in this area. To further explore these observations, and to investigate faculty perceptions and views, focus groups were conducted with faculty from all schools.

Focus Groups

Beginning in August 2015, focus groups were convened to further explore faculty members' prior faculty development experiences, knowledge of existing faculty development programs, and desired faculty development opportunities. Two focus group sessions with each of the following faculty categories were convened: SOM instructors and assistant professors, SOM associate professors, SOM professors, SOM women faculty, SOM minority faculty, SOD, SHRP, and SON faculty. Summary feedback from both sessions within the same category of faculty have been combined and is being presented here in aggregate. Mentorship, promotion and tenure (in particular equitable opportunities, transparent results and knowledge of requirements), and research and scholarly support were mentioned most often by the majority of focus groups as areas that could benefit greatly from immediate action and attention by leaders. Other areas such as funding to attend national meetings, increased collaborations across campus and training on academic skills were also cited as important by several of the groups. These areas also offer opportunities for improvement.   (See Table 1 for complete summary.)

Recommendations

Considering summaries from all sources, four areas emerged that OFA recommends supporting through immediate and ongoing faculty development resources: mentorship, promotion and tenure (P&T), collaboration across departments and schools, and research and scholarly support. Several other areas were identified that could also benefit greatly from increased attention and resources once the primary concerns above have been addressed: leadership training, career planning, communication skills training, burnout prevention (work life balance), and academic skills training. Additionally, OFA believes that career planning and burnout prevention could be successfully incorporated into mentorship programs. Lastly, three supplementary areas were noted that should be considered for further development as resources become available and all above recommendations have been sufficiently supported: funding to attend national meetings, professionalism, and management or organizational skills. (See Table 2 for complete summary.)

The Proposed Way Ahead

OFA suggests the creation of an inter-professional work group to further review the aforementioned recommendations and to explore specific implementation options. This group would function as an advisory committee or task force to the OFA and UMMC leadership and

would help guide, and possibly facilitate, faculty development across the institution going forward. This group could recommend "how to" address faculty development needs at the department, school and institutional levels and work with those "doing it well" to expand or scale and, share lessons learned and best practices.

To aid in successful faculty development efforts going forward, OFA also suggests the following actions: <u>utilize</u> AAMC-Group on Faculty Affairs for benchmarking and inquiry regarding successful faculty development programs, <u>hold</u> chairs and other leaders accountable for faculty development, and <u>calibrate</u> efforts across the three mission areas to seek ways to recognize and value them equitably.

Additionally, to address faculty who wondered where they stacked up against others being considered for promotion or tenure, School P & T Committees should consider providing faculty an example "approved" portfolio. Equity studies may be one way to provide faculty feedback related to any potential perceived salary inequities. And to address the most common impediment to involvement in faculty development, OFA recommends providing some form of protected time for development activities in order to combat time constraints (as the number one cited barrier to participation in faculty development). Currently, there seemed to be no perceived incentive or encouragement for clinicians to conduct research or contribute to faculty development activities because their pay is tied directly to RVUs.

OFA will immediately begin developing a faculty development website to act as a hub of information for all.   OFA will work to promote existing faculty development programs and opportunities as appropriate. OFA will continue to foster collaborations and support faculty, departments and schools in building faculty development programs or offerings as requested and needed.

It is recommended that UMMC, school and department leadership support faculty development by making it a priority, creating an expectation for all leaders to support faculty development (including mentorship and inter-professional collaboration) in some form. Leaders should also consider providing funding and protected time for participation in development opportunities without financial penalty to faculty members and fostering a culture of recognition that promotes development and collaboration instead of competition focused solely on revenue. All leaders at UMMC need to support, endorse and advocate for participation in faculty development by all faculty as the return in career satisfaction and retention for that participation will be tremendous.

References

Gusic, M., Milner, R., Tisdall, E., Taylor, E., Quillen, D., & Thorndyke, L. (2010). The essential value of projects in faculty development. *Academic Medicine, 85(9),* 1484-1491.

Katz, P. & Batteson, T. (2015). *Does it make a difference? Can developing a faculty development program based on a needs assessment survey reduce divergence between requests and attendance?* Poster presented at the Group on Diversity and Inclusion & Group on Faculty Affairs Joint Professional Development Conference in San Juan, Puerto Rico.

UMMC 2020 Strategic Plan (2014.) Retrieved from https://www.umc.edu/administration/strategic_plan/strategic_plan__home.aspx

Full references upon request

Appendix 1

Individual face-to-face meetings were held with the following UMMC faculty development leaders (listed in alphabetical order):

1. Omar Abdulrahman, School of Medicine, Pediatrics
2. Kim Adcock, School of Pharmacy
3. Chris Anderson, School of Medicine, Surgery
4. Chris Arthur, School of Medicine, Family Medicine
5. Jana Bagwell, School of Health Related Professions
6. Helen Beady, UMMC Hospital Administration
7. Nicole Borges, School of Medicine, Medical Education Research and Scholarship
8. Bob Brodell, School of Medicine, Dermatology
9. Kim Crowder, School of Medicine, Ophthalmology
10. Erin Dehon, School of Medicine, Emergency Medicine
11. Kate Wingo Feldmen, Physician Relations
12. Kristi Henderson, Continuing Health Professional Education
13. Loretta Jackson, School of Medicine, Medical Education
14. Mechelle Keeton, Physician Relations
15. Tonya Moore, UMMC Hospital Administration
16. Christian Pruett, School of Nursing
17. John Purvis, Physician Relations
18. Rob Rockhold, Academic Development
19. Leigh Ann Ross, School of Pharmacy
20. Mike Ryan, School of Graduate Studies
21. Julie Schumacher, School of Medicine, Psychiatry
22. Juanyce Taylor, School of Health Related Professions
23. Sajani Tipnis, School of Medicine, Medical Education
24. James Wynn, School of Medicine, Surgery