

Comprehensive Faculty Development Needs Assessment Summary

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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 programming, 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 (Bunton, Corrice, Pollart, Novielli, Williams, Morrison, Mylona, Fox, 2012; Dandar, Bunton, Steinecke, 2015.; Dandar, Lautenberger, & Steinecke, 2013; Fox, Bunton, & Dandar, 2011; Gusic, Milner, Tisdall, Taylor, Quillen, & Thorndyke, 2010; Mathews, 2014; Schor, Guillet, & McAnarney, 2011; Seritan, Iosif, Hyvonen, Lan, Boyum, & Hilty, 2010).

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, et. al., 2010).

Existing 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 (Advance center for institutional change University of Washington, 2006; Ambrose, Huston, & Norman, 2005; Collaborative on Academic Careers in Higher Education, 2014; Daley, Wingard, & Reznik, 2006; DeCastro, Griffith, Ubel, Stewart, & Jagsi, 2014; Dandar, Corrice, Bunton, & Fox, 2011.; Dandar, Lautenberger, & Steinecke, 2013; Fleming, Simmons, Xu, Gesell, Brown, Cutrer, Gigante, & Cooper, 2015; Gusic, 2010; Lieff, 2009; Rockquemore, 2011). Several other faculty development domains have been shown to positively impact faculty satisfaction and engagement which theoretically should then have implications for improved

retention, although most existing literature only alludes to this impact (Ambrose, Huston, & Norman, 2005; Mathews, 2014; Roberts, & Coplit, 2013). Mentorship is known to be a 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 (Advance center for institutional change University of Washington, 2006; Ambrose, Huston, & Norman, 2005; Association of American Medical Colleges, 2008; Baldwin, & Chang, 2006; Collaborative on Academic Careers in Higher Education, 2014; DeCastro, et. al., 2014; Dandar, Lautenberger, & Steinecke, 2013; Fleming, et. al, 2015; Kubiak, Guidot, Trimm, Kamen, & Roman, 2012; Mathews, 2014; Seritan, et.al.,2010).

Literature also supports existing faculty affairs offices expanding scope of practice to encompass an evolving faculty development body of work. In a study comparing faculty affairs offices' core functions from 2000-2010 it was apparent that talent management remained an essential function and actually appeared to grow in significance and funding. "This may be because medical schools increasingly recognize the importance of faculty development, and because the culture of academic medicine is changing from a 'sink or swim' mentality to developing faculty as a valuable resource" (Sonnino, Reznik, Thorndyke, Chatterjee, Rios-Bedoya, Mylona, E, Nelson, Weisman, Morahan, & Wadland, 2013).

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 (Bunton, Corrice, Mallon, 2010; Dandar, Lautenberger, & Steinecke, 2013; Lieff, 2009). To gain knowledge of UMMC's posture regarding faculty satisfaction UMMC SOM has participated in the AAMC Faculty Forward Engagement Survey (FF) on three occasions: once in 2009, 2011, and the latest in the winter of 2014. The School of Dentistry (SOD), School of Nursing (SON), School of Pharmacy, School of Health Related Professions (SHRP) and Academic Information Services participated in this survey during the summer of 2015. 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 following domains: Global Satisfaction and Engagement, Nature of Work, Focus on Medical School Mission, Department Governance, Medical School Governance, Relationship with Supervisor, Opportunities for Career and Professional Growth, Collegiality and Collaboration, Compensation and Benefits, Faculty Recruitment and Retention, Clinical Practice Environment.

Data from both 2009 and 2011 FF surveys within the SOM indicated an apparent need for increased emphasis on faculty development at UMMC. Faculty responses denoted a desire for: increased collaboration across departments and schools, support for and promotion of faculty

development, leadership to encourage faculty development as a priority, and expanded opportunities for individual growth.

To help identify ways to improve upon the 2011 satisfaction scores specifically related to faculty development OFA added several custom questions to the 2014 SOM survey. One question spoke directly to faculty development. OFA asked faculty to pick from a list the top five topics they would like UMMC to offer as faculty development opportunities. The top five, in order of greatest desire, were: leadership development, creating a career development plan, using technology and innovation in education, balancing personal and professional life, and time management and organization skills. Additionally, the 2015 data for schools other than SOM (SOD, SON, SHRP, and Academic Information Services) also revealed low faculty satisfaction with current professional development.

A closer look at UMMC's most recent FF survey 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 both 2009 and 2011 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 1 for 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. Pediatrics currently offers a leadership program to faculty that was modeled after UMMC's Leadership Development Program (LDP, within the Office of Academic Affairs- more below) utilizing local experts at a fraction of the cost of the model program. Pediatrics has also partnered with the children's hospital to cost share and split enrollment. Dermatology leverages community relationships and national committees for development as often as possible. OFA also identified a notable research mentorship program within the Department of Physiology and Biophysics. This program partners with the Cardiovascular Renal Center and leads a committee who review grants and provide feedback to faculty. This research mentoring program could also be a model for other departments interested in collaboration in research. 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. They are currently working on several joint initiatives to include Quality Matters (for their online courses), creating more opportunities to train faculty on both core pedagogy and current classroom management technologies as well as multiple "just in time" offerings. 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 offer the "Read to Lead" program, where faculty voluntarily engage in a group reading assignment focused on educational excellence accompanied by planned sessions to discuss specific areas or topics within the chosen book. They also host presenters and promote inter-professional activities. They have recently created a sub-committee focused on mentorship that will begin more focused work in the spring of 2016. Additionally SHRP has a technology committee that manages faculty development offerings specific to technology in academia.

To OFA's knowledge, the School of Dentistry doesn't currently have a formal faculty development program. In addition, they are currently in a state of transition and are undergoing efforts to hire and welcome a new dean. With new leadership an opportunity will come to explore faculty development further for the faculty within the School of Dentistry.

The School of Pharmacy, although autonomous from UMMC, appeared to offer some opportunities for future collaboration in faculty development. They hold four retreats per year,

dedicate ½ day per month for faculty development activities and offer a new faculty orientation program that is worthy of further investigation.

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. They offer assistance in coordinating and planning programs (individual courses, ½ day, day long seminars, conferences, etc.) to meet the development needs of faculty. Several schools and departments were noted as frequently utilizing their services, while others were mentioned as not having yet taken full advantage of their assistance or facilities. OFA also met with the leaders of two current UMMC Leadership Programs.

One of these, the UMMC Leadership Development Program (LDP) is run out of the office of Academic Development. This program provides leadership focused development for current and emerging institutional leaders (faculty and staff). The program has received much positive feedback from participants, has been in place since 2006 and uses internal presenters and a contractor to provide instruction. This program utilizes a cohort model and runs over one academic year and accepts approximately 15-18 participants per year, the majority of which are faculty (the program typically invites 2-3 non-faculty to participant per cohort). Although various data collection has been underway, no formal return on investment has been conducted. However, continuous evaluation occurs and adjustments are made year to year based on feedback. 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. (Note: To the author's knowledge, the leadership development program referenced above will host its last cohort in the 2015-2016 academic year. The Office of Academic Development 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.)

The 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. We were unable to acquire the ratio of faculty to staff participants, but learned that approximately 75 participants are admitted to each cohort and two cycles run per year. This program is in its infancy and has only been offered for the past year. Ongoing internal evaluation is said to be under way but to what degree is unknown.

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. (See Table 1 for summary.)

SOM Instructors and Assistant Professors

There appeared to be no clear understanding of what is currently available in regards to faculty development on campus (aside from departmental faculty meetings) and faculty from this cohort were most interested in development opportunities regarding mentorship, promotion and tenure. Additional requested topics for development offerings included: time management, burnout prevention, “how to” for securing and operating grants, and academic training regarding testing and presentation of coursework. The preferred mode of participation in development opportunities was in person via small workgroups, but video and online opportunities (although not health stream) were also requested. Pod casts and interactive webinars were also offered as innovative ways to engage faculty with development opportunities. Cited barriers to previous participation included: time constraints, unrealistic clinical expectations, lack of knowledge of opportunities and lack of effective communication about opportunities. Recommendations from this cohort also included: asking leaders in departments who are doing faculty development well to serve as examples and possibly mentors for other departments who could benefit from guidance and support.

SOM Associate Professors

In regards to their knowledge of current offerings, faculty in this cohort were aware of multiple CME opportunities as well as the UMMC LDP in addition to some grant writing courses. A noted lack of communication was cited as a barrier to participation and the cause for many faculty not knowing about opportunities. They also felt that development opportunities should be open to all faculty and not only available to those nominated by a chair or leader. Topics of interest to this group included: increasing mentorship at all levels (as well as increasing skills and knowledge of mentors), more guidance on promotion (interactive MySite sessions, training for department staff on MySite basics, how the P & T committee interprets MySite data), communication skills, leadership and career planning. The preferred mode of participation in development activities was multimodal- lunch lectures, webinars, one-on-one

training opportunities and via on demand access through a faculty development webpage that could act as a hub of information. Issues such as lack of awareness of opportunities, time constraints, and lack of funding were mentioned as further barriers to participation. Additional recommendations from this cohort included: increasing awareness of opportunities through direct communication, website and more promotion of events. They also asked for more funding to attend national meetings or conferences, protected time for teaching or to engage in research activities and collaboration between clinicians and researchers and across departments. Lastly, they noted the importance of leadership setting an expectation for faculty development in all departments as well as ensuring that all decisions and policies that support faculty engagement in research are reinforced and sustained by leadership.

SOM Professors

There appeared to be some general understanding of what opportunities exist on campus for faculty development. UMMC LDP was cited as was the Group on Women in Medicine and Science (GWIMS), department level opportunities and academic affairs courses on teaching skills. This cohort was very interested in increasing: mentorship opportunities, research funding and support and collaboration across schools. Additional requested topics for development offerings included: innovation in the classroom, IRB training, how to write, submit and publish papers (especially as a clinical faculty member), as well as increased collaboration amongst clinical and research faculty. The preferred mode of participation in development opportunities was in person, via small workgroups, and online options such as webinars and recorded videos available on demand. Cited barriers to previous participation included: time constraints due to high clinical expectations and having no protected time for research. Recommendations from this cohort also included: having accountability measures for chairs, calibration efforts across three mission areas that seeks ways to recognize them equitably, and increased focus on work-life balance and burnout prevention.

SOM Women Faculty

In regards to their knowledge of current offerings, faculty in this cohort were aware of UMMC LDP as well as several departmental initiatives. They requested development offerings related to promotion and tenure, mentoring and more collaboration related to research. The preferred mode of participation in development opportunities was small focused face to face sessions as well as online options, interactive webinars or podcasts and they recommend offering training at multiple times, and in multiple formats. Cited barriers to previous participation included: lack of knowledge of opportunities, time constraints, not receiving enough notice ahead of time to work around clinical duties, and location of training. Recommendations from this cohort also included: increasing communication and collaboration across departments, increasing mentoring at all levels (as well as training for mentors), providing funding to attend national meetings, offering more networking opportunities and holding leadership accountable for faculty development. This cohort also stressed the point that all faculty deserve the same opportunities for development and mentorship. They also wanted to know more about salary equity (or inequity) and related data here at UMMC.

SOM Minority Faculty

There appears to be some general understanding of what opportunities exist on campus for faculty development to include: department level mentoring, MySite training and promotion workshops, library and technology courses as well as some clinical research seminars and offerings. Faculty development offerings this cohort would like to see included: increased mentorship (with a “how to” course for mentors), increased communication and collaboration, and “how to” courses related to research (IRB; how to do scholarly work). Barriers to prior participation included a lack of time, no knowledge of opportunities, inconvenient locations and little incentive or encouragement for development outside of clinical production. The preferred mode of participation in development activities was interactive webinars and health stream type modules that could be completed over time. Additional recommendations from this cohort included: allowing protected time for development, encouragement and funding for participation in national meetings, recognition of development efforts, increasing collaborations between research and clinical faculty as well as offering courses in management, leadership and “teaching” skills. They also had a strong desire for equitable access to mentorship regarding preparation for promotion and tenure as well as a better understanding of related processes and policies. Additionally, they perceived a strong disparity in promotion selection across departments, and clinical versus research. It is important to note that this reported perception was not supported by recent FF survey data, however, publishing data on promotion selections could be beneficial.

SOD Faculty

There appeared to be a good understanding of what is currently available in regards to faculty development on campus such as UMMC LDP, Millsaps Business Advantage Program, GME Teaching Series and CE courses. It was however noted that Thursday morning in the SOD used to be dedicated to development, but that this is no longer the case. Faculty from this cohort were most interested in development opportunities regarding mentorship (general, research specific and focused on promotion and tenure progress), interdepartmental and cross school collaborations and research training (“how to” write for publication/ scholarly activity, a network to help establish opportunities to collaborate). Reasons cited as barriers to participation included a lack of knowledge/ communication about opportunities, time constraints, budgetary restrictions for attending national meetings and lack of recognition or encouragement to participate. These faculty preferred to participate in small, focused work groups and wanted to initiate mentorship at the department level. Additional recommendations included: developing a committee to organize and promote faculty development opportunities, creating a forum or a listing of who is involved in research by topic- recognizing recent publications and create opportunities for collaboration and asking successful departments to share their techniques in regards to faculty development and mentorship. Lastly, this cohort made specific notes that faculty turnover is a major problem, and they perceived the institution as solely focused on RVUs and revenue and that development was not a priority for senior leadership.

SHRP Faculty

In regards to their knowledge of current offerings, faculty in this cohort were aware of UMMC LDP, Scholarship Exchange, Lunch and Learns, Canvas Training, Faculty Exchange and several school initiatives, although mostly related to technology and educator skills. The presence of both a faculty development committee and technology committee within SHRP were noted. Faculty in this group wanted to learn most about mentoring (specific to goal setting, as well as promotion and tenure portfolio creation), efficiency and time management, SACS, “how to” conduct research and best practices in teaching. Barriers to participation included lack of time, scheduling conflicts, location of training and lack of “buy in” or motivation by some faculty who then influenced others. Faculty preferred to participate in face to face training that was hands on and collaborative. They would also like to see the same training offered at different times, locations and multiple modalities. Additional academic (classroom focused) recommendations included offering training on: crisis management, test giving, and legal implications/ policies related to the classroom. They also proposed educating faculty on promotion and tenure process and guidelines early on (the perception was that requirements change often and chairs don’t even know the rules or requirements), and creating one location to consolidate all training information. It is also worthy to note the perception of this group that since SHRP is so heavy in support of the academic mission that it is near impossible to conduct research.

SON Faculty

There appeared to be a good understanding of what is currently available in regards to faculty development at the school level including multiple technology and academic focused opportunities. They also referenced the existence of writing groups that function as mentors for research and SON councils that meet quarterly to offer development opportunities. Faculty in this group requested the following development opportunities: increasing mentorship, educational training for new faculty (curriculum design, classroom best practices, managing challenging students, etc.), knowledge of accreditation standards, increasing collaboration among schools and education on promotion and tenure guidelines. Barriers noted to participation included lack of funding to travel to conferences, time constraints and scheduling conflicts as well as lack of communication regarding available opportunities. These faculty preferred to receive development through face-to-face training that was experiential where multiple offerings (various dates and times) were available and CE credit could be achieved. They also mentioned webinars and instructor led online demonstrations of specific courses as good options for presenting development material. Additional recommendations from this cohort included: providing financial support to attend national conferences, giving protected time for development and research efforts, creating an online library of faculty development courses that are available “on demand”, creating a badge system for all development offerings (it would promote faculty recognition, would give CE credit then also update faculty “badges” on their profile and hence their promotion and tenure files), using Quick Response Codes (QR codes) to advertise offerings and creating an “App” with different modules related to training and development. Lastly, a noted perception exists that research is not a recognized, required component within the SON.

In addition to focus groups with SON faculty at the UMMC campus OFA also hosted a call for the six Oxford campus nursing faculty since they would not be included in the local focus group sessions. These faculty perceived ample access to academic improvement and technology resources in Oxford (via Office of Teaching Excellence), but felt disconnected and sometimes forgotten by UMMC SON program in regards to other faculty development opportunities. They requested ways to access the same opportunities available to the Jackson faculty at the same quality, and cited barriers beyond geography such as connectivity issues, poor video quality if sessions were recorded and the inability to interact and ask questions after sessions if watched remotely or at a later date.

Recommendations

Areas of Immediate Interest

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.

Mentorship should be a top priority since all faculty desired equitable opportunities and many faculty reported having no present mentorship relationships. It appeared that faculty were beginning to see great things that some departments (Pediatrics) were doing in regards to mentorship and they desired equal opportunities regardless of department, rank, or if they were clinical or non-clinical. Moreover, due to strong support in the literature, demonstrating a relationship between mentoring and career satisfaction, and then career satisfaction to retention, mentorship at all levels should become an immediate priority (Ambrose, Huston, & Norman, 2005; Baldwin, & Chang, 2006; Collaborative on Academic Careers in Higher Education, 2014; Dandar, Corrice, Bunton, & Fox, 2011.; DeCastro, et. al, 2014; Kubiak, et. al., 2012; Mathews, 2014; Roberts, & Coplit, 2013). The Collaborative on Academic Careers in Higher Education recommends “require [ing] departmental plans for mentoring associate professors. [OFA could] present chairs and their faculty with two or three models and allow them either to adopt the best fit or craft their own that will reach the same goals (with review and approval by the dean...)” (Mathews, 2014.) Additionally, OFA believes that responsibility for faculty mentorship should reside at the department level with OFA assistance as needed. A study of faculty affairs offices conducted by Sonnino, et. al suggested that the responsibility for “...facilitating and developing the careers of their faculty members” continued to reside with department chairs from 2000 to 2010 and that “...departmental mentoring will, and perhaps should, continue to be a primary responsibility of the chair, with faculty affairs offices playing important supportive roles” (Sonnino, et. al., 2013).

Academic advancement and promotion and tenure (P & T) were requested most frequently, and included: continued improvement in communication and transparency regarding criteria and selection, as well as more guidance and support before being considered by School P & T Committees. To address faculty who wondered where they stacked up against others being considered, School P & T Committees should consider providing faculty an example “approved”

portfolio. OFA should advocate for and ensure equity in P & T processes and continued transparency and communications with all faculty. OFA recommends publishing a brief report on data/ statistics of prior years' P & T decisions possibly accompanied by faculty demographics (e.g. What % were approved and their demographics, % not granted and their demographics, etc.) (Ambrose, Huston, & Norman, 2005).

Many faculty across several sources of information did note some improvement in communication about MySite and the "data entry" process for assembling a portfolio, but cited a continued need for clarity on P & T requirements, standards and expectations. Several faculty also referenced their knowledge of some departments doing a better job than others in pre-screening and assisting faculty with preparing portfolios and believed that more equitable processes for this type of development should be considered. Additionally, faculty across schools referenced a lack of understanding about how P & T Committees viewed and valued varying types of service and desired more knowledge in this area.

Collaborations across departments and schools was also found to be a primary request for further faculty development improvement (Association of American Medical Colleges 2008; Corrice, Bunton, Dandar, Fox, Lapin, Limacher, Morrison, Mylona, Novielli, Pollart, Smith, & Williams, 2011; Wai, Dandar, Radosevich, Brubaker, & Kuo, 2014). Clinical faculty desired more access and communication with basic scientists regarding collaborative research opportunities and vice versa. SOM faculty requested more opportunities to collaborate with faculty in other schools and vice versa in relation to research as well as sharing teaching best practices. Faculty also requested more opportunities for inter-professional networking and social networking.

Research and scholarly support was the last area, of the top four, mentioned that OFA recommends immediate action. Collaborations were mentioned again here, between schools, departments and clinical faculty/ basic scientists. In addition to collaborations in research, faculty desired protected time to work on research and scholarly activities. They acknowledged UMMC's three existing missions, but perceived that leaders at all levels didn't value research as much as the other two areas due to a lack of protected time to complete research expectations. They also noted a perception that many leaders discouraged any activity (research included) that diminished RVUs and profits generated by clinical services.

Additional Areas of Interest

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 (Bunton, Corrice, Mallon, 2010; Corrice, et.al, 2011; Dandar, Bunton, & Steinecke, 2015), 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 summary.)

The Proposed Way Ahead

OFA proposes 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: utilize AAMC-Group on Faculty Affairs for benchmarking and inquiry regarding successful faculty development programs, hold chairs and other leaders accountable for faculty development, and calibrate efforts across the three mission areas to seek ways to recognize and value them equitably. 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 suggests 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 they get a cut in pay if RVUs decrease while they are working on the other two mission areas (Gusic, et. al., 2010).

The OFA’s role moving forward will be one of support and facilitation as needed. 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.

“Academic health centers have begun to recognize the significant cost of faculty turnover and to invest in strategies that lead to faculty satisfaction and retention. Offices of faculty affairs exist to improve the functioning of the faculty and of the organization...The return on investment will be the increased productivity, retention, and satisfaction of the faculty” (Sonnino, et. al., 2013).

OFA will also work closely with CPHE (CMEs) to seek ways to collaborate on future conferences or seminars as suitable to addresses faculty development hot topics and needs.

“Faculty affairs offices have a role in coordinating and complementing these distributed faculty-related activities (faculty development, oversight of processes and faculty management issues such as annual evaluation, faculty counseling, grievance procedures, conflict management, skill development, programs for women and minorities, and career planning as well as resources) even when they don’t own them” (Sonnino, et. al., 2013).

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, fostering a culture of recognition that promotes development and collaboration instead of competition focused solely on revenue. Talent management "...includes faculty development, oversight of processes and faculty management issues such as annual evaluation, faculty counseling, grievance procedures, and conflict management." It also includes "...skill development, programs for women and minorities, and career planning as well as resources..." (Sonnino, et. al., 2013) and 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.

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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