

"The Current Landscape of Faculty Development: Challenges and Opportunities"

Alice Fornari, EdD, RDN
Associate Dean, Educational Skills Development, Zucker SOM
Vice President, Faculty Development, Northwell Health



1

Appreciative Inquiry Moment...

- What is a memorable faculty development moment, as a learner and/or as a developer?
- Take 2-3 minutes to bring the thought forward
- What made it right/effective?
- Use this "rightness" to re-frame what needs adjustment/to be done differently
- Discover appreciative inquiry and positive psychology as your mantra

2

Parting the Clouds: Three Professionalism Frameworks in Medical Education

"The third framework is *identity formation*, with a focus on identity development and socialization into a community of practice: The good physician (educator, scientist) integrates into his or her identity a set of values and dispositions consonant with the physician (educator, scientist) community and aspires to a professional identity reflected in the very best physicians (educator, scientist)".

David M. Hoy, MDiv, PhD, and Stanley J. Hamstra, PhD
Academic Medicine, Vol. 91, No. 12 / December 2016

What is the role of the faculty developer in *identity formation*?

3

GOAL

Explore and affirm the following statements...

"The success of education excellence primarily hinges on the effectiveness of educators. To maintain faculty vitality and commitment to their home institutions it is incumbent to offer faculty development opportunities".

"Faculty members are our most important resource; investing in their growth and development is essential in promoting innovation and excellence at all levels of the educational continuum".

Vyonna Steinhilf, Karen Mann, Brownell Anderson, Bonnie Maureen Barnett, Angel Centeno, Laura Nazareth, David Pridoux, John Spencer, Ellen Fuchs, Thomas Viggiano, Helena Ward & Diana Dolmans (2016) A systematic review of faculty development initiatives designed to enhance teaching effectiveness: A 10-year update: BEEME Guide No. 40, Medical Teacher

MY Bias: Professional Development=Faculty Development

4

Objectives

This webinar will:

1. review the field over the past 10 years.
2. highlight the varieties of faculty development activities, formal and informal, short and longitudinal, and diverse design principles.
3. explain the how an why of the core components of "communities of practice" in the workplace as a necessity for success faculty development
4. conclude with challenges of scholarship based on assessment of faculty development initiatives to assure accountability of overseers of programs and to support desired outcomes from all participants.
5. explore participants' view of faculty development in the next ten years to 2030.

5

Agenda

- Define faculty development today
- Review literature on faculty development
- Audience for faculty development within medical education
- Settings faculty developers can influence in their role
- Strengths/Weaknesses/Opportunities/Threats (SWOT)
- Questions requiring further research in next 10 years
- Participants' thoughts and questions

6

How do we define Faculty Development (FD)?

- “Faculty development, or staff development as it is often called, refers to all activities health professionals pursue to improve their knowledge, skills and behaviors as teachers and educators, leaders and managers, and researchers and scholars, in both individual and group settings.”

Steinert Y. Faculty development: Core concepts and principles. In: Steinert Y, ed. Faculty Development in the Health Professions: A Focus on Research and Practice. New York, NY: Springer; 2014.

7

How do we define Professional Development (PD)?

- Continuing professional development (CPD) is all of the learning activities that health professionals need to fulfill their roles in the current healthcare and learning environments.
- CPD implies a broad range of content and learners, the use of high-quality diverse educational strategies
- Integration of education with practice
- Ultimately the potential to influence patient care and societal health

8

Assumption leads to more questions?

The field of faculty development has grown substantially in the last 10 years and will continue to expand.

- Why?**
- A large component of any **academic continuing professional development (CPD) program is faculty development**, as the success of education excellence primarily hinges on the effectiveness of educators in all learning environments and in society.
- What needs to be strengthened?**
- To maintain faculty vitality and commitment to their home institutions it is incumbent to offer faculty development opportunities.
- What will the next 10 years bring to faculty development, so by 2030 who is the faculty developer and who is their audience & what is the culture?**

9

Domains of Faculty Development

- Teaching effectiveness
- Leadership and management
- Research capacity building
- Academic and career development
- Organizational change

Is there any domain that you touch that is missing... ?

Steinert Y. Faculty development: Core concepts and principles. In: Steinert Y, ed. Faculty Development in the Health Professions: A Focus on Research and Practice. New York, NY: Springer; 2014.

10

Who are Our Stakeholders?

- Students-future teachers
- Didactic/classroom faculty
- Residents and other postgraduate trainees
- Clinical supervisors
- Clinical course directors
- Assessment coaches (formative)
- Entrustment/competency committees (summative)
- Faculty and deans responsible for oversight of professional behaviors
- Curriculum and Assessment Deans and resource managers
- Faculty Developers-our peers/colleagues

Did we forget any learners-...?

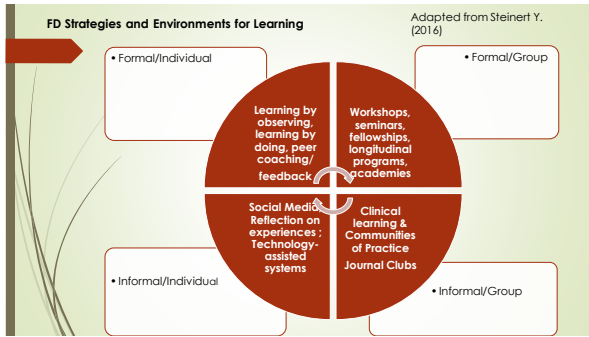
11

Delivery of Faculty Development

- Workshops
- Short Courses
- Seminars
- Longitudinal programs
- Peer observation/coaching
- Pedagogical Consultation
- Objective Structured Teaching Encounters (OSTEs)
- Online modules
- Podcasts
- Infographics
- Instant messages via voice activated systems (Amazon, Google)
- Simulations
- Social Media channels: Twitter, Facebook, blogs

What is missing from this list...?

12



13

- Key Features of Faculty Development**
- Application of theories of **situational and experiential learning**
 - Application of the **"Science of Learning"** to faculty development
 - Support of effective **peer & colleague relationships**
 - Well-designed interventions following **active learning principles** of teaching and learning
 - Use **programmatic systems of evaluation** for consistent focus on improvement
 - Advanced education for faculty developers as **role models**
 - Disseminate **faculty development as scholarship** of teaching/learning, as guided by Ernest Boyer's work in *Scholarship Reconsidered*

14

- "Community of Practice"?**
- "Faculty developers can be knowledgeable about the diverse landscape of their faculty members' practices, although not claiming competence in these practices".
 - "Communities of practices are 'socially configured spaces that necessarily involve learning as an aspect of membership'".
- When I say . . . community of practice. Heather Buckley, Yvonne Steinert, Glenn Regehr & Laura Nimmon. Medical Education 2019.

15



16

- WHY Communities of Practice (CoPs) ? They are drivers of...**
- Relationships leading to mentorship
 - Knowledge management/enhancement
 - A mechanism to share tacit knowledge and resources
 - Innovation that is collaborative
 - Access to new or enhanced learning curves/resources
 - Sharing of social capital to achieve common goals—a social enterprise
 - Improve "best practice" development to be shared and not siloed; evidence-informed faculty development
 - Organizational value/resilience=meaning in work, engagement (and JOY...)
- Marco Antonio de Carvalho-Filho, René A. Tio & Yvonne Steinert (2019): Twelve tips for implementing a community of practice for faculty development. Medical Teacher

17

- 12 Tips for Implementing a CoP for Faculty Development**
- Tip 1 – Gather a core group to launch the process
 - Tip 2 – Articulate the goals and value of the CoP
 - Tip 3 – Start with a specific task or project – make it problem-oriented
 - Tip 4 – Keep the CoP open
 - Tip 5 – Intentionally invite members with expertise (memory) & fresh ideas (innovation)
 - Tip 6 – Choose a facilitator
 - Tip 7 – Make it worthwhile for members and the institution
 - Tip 8 – Work to ensure institutional support
 - Tip 9 – Promote sustainability
 - Tip 10 – Communicate success
 - Tip 11 – Go online-for dialogue
 - Tip 12 – Evaluate the CoP
- Marco Antonio de Carvalho-Filho, René A. Tio & Yvonne Steinert (2019): Twelve tips for implementing a community of practice for faculty development. Medical Teacher

18

Core Principles of a Community of Practice (CoP)

A community of practice involves much more than the technical knowledge or skill associated with undertaking some task.

- Members are involved in a set of *relationships over time* (Lave and Wenger, 1991)
- Communities develop around *things that matter* to people (Wenger, 1998).

(Smith, 2003)

19

Research on Faculty Development

- O'Sullivan and Irby (2011) proposed a model for research on faculty development that is grounded in **social systems** and focuses on two communities of practice:
 - the **faculty development community and the workplace community.**
 - instead of maintaining an exclusive focus on individual faculty members, we should focus on the context (or environment) in which faculty members work.

O'Sullivan P, Irby D. Reframing Medical Education Research. Academic Medicine. 2011

20

Moving Faculty Development to Scholarship

- Participants involved in faculty development collaborate with other teachers or staff members,
- Relationships and network in the workplace, fulfill tasks and activities within the educational program,
- Mentors and coaches in the work setting, and
- An organizational context characterized by a culture that either supports or inhibits educational change
- This is aligns with a Communities of Practice Model for Scholarship Generation from Faculty Development Efforts**

O'Sullivan P, Irby D. Reframing Medical Education Research. Academic Medicine. 2011

21

Key Programmatic Features Leading to Success for Faculty Development Initiatives

- Evidence-informed educational design & measurement of outcomes
- Relevant Content
- Experiential Learning and Opportunities for Practice and Application
- Opportunities for Feedback and Reflection
- Educational Projects as an outcome, esp. if collaborative
- Intentional Community Building
- Longitudinal Program Design
- Institutional Support at all levels

22

SWOT: Strengths and Weaknesses

Strengths

- Major focus on FD from **accrediting agencies**
- Literature** supporting FD as a key component of medical education
- Asynchronous and synchronous learning**
- Social Media**-Twitter and Facebook, BLOGS...
- Online communities** provide support

Weaknesses

- Institutional support** & understanding for FD at all levels
- Lack of **protected time**
- Lack of adequate **resources**
- Focus** on delivery of knowledge vs skill development
- Attitude change** is a hard reality
- Asynchronous** learning as a fix

23

SWOT: Opportunities

- Re-conceptualize faculty development** as an opportunity for renewal and reflection on personal & professional growth, as CPD
- Do not limit learning to skill enhancement alone
- Define **characteristics** of Faculty Developers, align with EPAs
- Align with faculty members' motivations to be successful educators, add value to their work, and **foster a professional identity** as a master educator
- Faculty development can promote a culture of change by helping to develop **institutional policies** that support and reward excellence, recognize innovation and scholarship, and enable career advancement

24

SWOT: Opportunities

- Engage faculty development to address **clinician well being** as individuals and teams of clinicians
- Support **engagement and meaning/joy** in work through faculty development
- Value **workplace learning** as a legitimate form of professional development.
- Using **evidence based evaluation criteria** to assess outcomes beyond satisfaction and learning
 - i.e. learners' behavior change & larger societal impact, include the actual end-receivers of the FD effort
- Sell FD to senior stakeholders with **data!**

25

SWOT: Opportunities to Address Challenges

For leaders in Faculty Development
 "...strong advocacy to create changes in academic rewards and support policies, provide a clear career trajectory for educators using learning analytics, expand programmes for faculty development, support health professions education scholarship units and academies of medical educators, and create mechanisms to ensure high standards for all educators."

Iby D, O'Sullivan P. Developing and rewarding teachers as educators and scholars: remarkable progress and daunting challenges. Medical Education 2018; 52: 58-67

26

SWOT: Threats

- How to **measure outcomes**-short and long term
- How to assess impact on **multiple stakeholders** across the continuum
- Justify educational **outcomes**
- **Financial and culture support** of longitudinal programs
 - Investing in longitudinal interventions, and exploring how their outcomes can be sustained over time
- Difficult to ascertain the **durability of change** and determine what type of support would be needed to maintain gains.
- Use **evidence-based designs to assess outcomes** beyond satisfaction and immediate learning i.e. behavior change/maintenance & larger societal impact, including diverse end-receivers of FD efforts

27

Next Steps-Research on Faculty Development

<p>Processes</p> <ul style="list-style-type: none"> ■ Faculty development research should focus on process and outcomes, including relationships within the program and the workplace. 	<p>Outcomes</p> <ul style="list-style-type: none"> ■ Understand what occurs in the workplace? ■ Can faculty development influence the building of a community of practice in the academic setting?
--	---

O'Sullivan P, Iby D. Reforming Medical Education Research. Academic Medicine. 2011

28

Faculty Developer as Humanistic Mentor

- Key components: longitudinal, small group, critical reflection and skill building
- Effective methods for learning skills and attitudes related to humanistic care have been known, although only slowly adopted by faculty
- Year-long program, small groups of participating faculty met monthly with a local facilitator for exercises in humanistic teaching, role modeling, and related topics that combined narrative reflection with skills training using experiential learning techniques.
- The program focused on the professional development of its participants with a core principle of humanism.

Fornari A et al. Mixed-Methods Approach to Humanistic Interprofessional Faculty Development. JCBHP 2018. & Branch W et al. A Multi-Institutional Longitudinal Faculty Development Program in Humanism Supports the Professional Development of Faculty Teachers. Academic Medicine.

29

Zucker SOM Infographic

- What does this tell you about faculty development?
- Can you create one to represent your faculty development vision and core components?
- What will assessment look like?

<https://medicine.hofstra.edu/faculty/facdev/index.html>

30

AMC Can Mitigate Cost of FD

- As part of their mission statements, faculty development programs can aim to emphasize and directly measure the **financial benefits to the AMC**.
- Programs can strive to quantify the financial benefit of **retaining faculty members** and to assess the overall cost-effectiveness & value of programming
- To reduce costs AMCs can **share** administrative resources & programming.
- Use **online repositories** of effective programming for resources
- Integrate **brief faculty development activities** into already scheduled staff meetings.
- Social media and technology-assisted systems** can disseminate effective practices and build community in a cost-effective way

Topor D, Roberts D. Faculty Development Programming at Academic Medical Centers: Identifying Financial Benefits and Value. Med.Sci.Educ. (2014)

31

Financial benefits of FD Programming to the AMC to mitigate cost

- Faculty development programming can contribute to increased **job satisfaction**, thus decreasing turnover among faculty members
- Increases **retention of female and minority faculty members**, increases self-advocacy skills and self-confidence, increases networking opportunities and a sense of community, and allows participants to appreciate the institution's commitment to the success of its faculty members
- Generation of increased **internal/external grant funding**
- Grants increase **faculty publications**, raise the medical center's visibility and prestige, clinical revenue, and donor financial contributions
- Teach **strategies to enhance communication** with patients, results in increased patient adherence to treatment, which leads to higher quality patient care, increased patient satisfaction, decreased hospital re-admissions, reduction of unnecessary procedures and medications, and decreased medical errors

Topor D, Roberts D. Faculty Development Programming at Academic Medical Centers: Identifying Financial Benefits and Value. Med.Sci.Educ. (2014)

32

Future Directions... For Faculty Developers

- Interprofessional Education**
 - Teams and individuals
- Technology-assisted instruction/development**
 - Alignment with Instructional Designers
 - Social Media
- EPAs for Faculty Developers**
 - Frameworks share limited details about EPAs' content and their utility in assessment protocols.
 - Address EPA frameworks that can cover missing teaching/academic domains
 - Mentorship within Faculty Development and with others
- Mentorship**
 - Mentor & mentee development
- Alignment with **Quality Improvement Initiatives**
 - PDSA-does this include professional/staff development?

33

Future Directions... for Faculty Developers

- Assessment** of Faculty Development activities-in the moment and longitudinal
 - Transfer to practice-stories and measurement
- Career advancement**-how? Aligned with values of medical education?
 - Scholarship Reconsidered in its truest sense-live Ernest Boyer
- Alignment with **Academies of Medical Educators**
 - Do we overlap/align in efforts or stand alone
- Well-being** of the faculty and all professionals and our learners
 - Psychological safety for learning and teaching and research
 - View faculty Development as a resilience tool
 - Protected time and academic RVUs to compensate faculty to learn and grow professionally

34

Teaching and Learning Moments: **Remembering the Heart of a Teacher**
Academic Medicine, Vol. 94, No. 5 / May 2019

- Teaching is about learning, curiosity, and community. I just needed a reminder from my students** (aka our faculty/professionals are our students).



35

*4 questions to guide investing in our faculty: Programs, Participants, Facilitators, and Context

- Program:** How are we training faculty for pedagogies needed in changing medical education?
- Participants:** Individual identity as an educator and role in education, alignment?
- Facilitators:** How and why coaching works to be an educator?
- Context:** How do academic and health systems indicate the value of medical education & support & reward faculty?

*O'Sullivan, O. Acad Med. Published ahead of print

36

What characteristics are core for a faculty developer to possess and share with others?



37

Participant Thoughts/Questions? Assumption leads to more questions...

- The field of faculty development has grown substantially in the last 10 years and will continue to expand.
 - **Why?**
- A large component of any academic professional development program is faculty development, as the success of education excellence primarily hinges on the effectiveness of educators.
 - **What needs to be strengthened?**
- To maintain faculty vitality and commitment to their home institutions it is incumbent to offer faculty development opportunities.
 - **What will the next 10 years bring to faculty development, so by 2030 who is the faculty developer?**

38

Thank you for the invitation by the IAMSE Webinar Committee

- I appreciate the opportunity to share my passion for CPD with a community of practice, IAMSE members near and far.
- Alice Fornari, afornari@northwell.edu
<https://medicine.hofstra.edu/faculty/facdev/index.html>
<https://medicine.hofstra.edu/faculty/facdev/article-collections.html>



39

References

- Cruickshank RL, Cruickshank SR, Steiner Y. Medicine as a Community of Practice: Implications for Medical Education. *Acad Med.* 2017; 92(10):3033-3038.
- Wenger E. Situated Learning. Legitimate peripheral participation. Cambridge: University of Cambridge Press; 1991.
- Schreurs M-L, Huveneers W, Dolmans D. Communities of teaching practice in the workplace: Evaluation of a faculty development program. *Med Teach.* 2015; 38 (8):808-14.
- Smith, M. K. (2003) 'Communities of practice', the encyclopedia of informal education, www.infed.org/haha/communities_of_practice.htm
- Steiner Y. Faculty development: From workshops to communities of practice. *Med Teach.* 2010; 32: 425-428.
- Buckley H, Steiner Y, Regery G, Nimmon L. When I say... community of practice. *Medical Education* 2019.
- Steiner Y. Faculty Development in the Health Professions: A Focus on Research and Practice. NY: Springer; 2014; p.4.
- Wenger E. *Communities of Practice: Learning, Meaning, and Identity*. New York: Cambridge University Press; 1998.
- Yvonne Steiner, Karen Mann, Brownell Anderson, Bonnie Maureen Barnett, Angel Carleno, Louisa Naimith, David Pridoux, John Spencer, Björn Lulla, Thomas Viggiano, Helena Ward & Diana Dolmans (2016) A systematic review of faculty development initiatives designed to enhance teaching effectiveness: A 10-year update: BEME Guide No. 40. *Medical Teacher*, 38(8), 769-786.
- Marco Antonio de Carvalho-Filho, Renê A. Tio & Yvonne Steiner (2019): Twelve tips for implementing a community of practice for faculty development. *Medical Teacher*.
- Irby B, O'Sullivan P. Developing and rewarding teachers as educators and scholars: remarkable progress and daunting challenges. *Medical Education* 2018; 52: 58-67
- Piper D, Roberts D. Faculty Development Programming at Academic Medical Centers: Identifying Financial Benefits and Value. *Med.Sci.Educ.*; (2016) 26:417-419
- O'Sullivan P, Irby D. Reframing Research on Faculty Development. *Acad Med*; April 2011
- O'Sullivan P. What Questions Guide Investing in our Faculty? *Acad Med*. Published ahead of print

40

Teaching and Learning Moments: **Remembering the Heart of a Teacher** Academic Medicine, Vol. 94, No. 5 / May 2019

- *I had momentarily forgotten that it wasn't really my teaching skill that was critical, but the learners' actual learning. Teachers connect students with a subject using their authenticity and vulnerability. But I wanted nothing to do with being vulnerable when it came to this topic. I kept reading the book because it ignited parts of my heart I had forgotten existed. I realized my real objective for this workshop was to get people talking, interacting with the subject so their curiosity would take over. **The idea was that the learner (the faculty) and the teacher (me) would be learning together.** I completely changed how I approached the workshop.*

41