COMMUNITY BASED PROGRAM SUCCESS:
The Importance of mentoring, motivating, monitoring and maintaining clinical affiliate faculty

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Session Objectives

- Consider the unique role of community faculty in delivering the educational program
- Review motivating factors and barriers that limit community faculty involvement in clinical teaching
- Discuss the importance of feedback in motivating participation in the educational program and improving teaching quality
A BIG UNDERTAKING

- The 134th allopathic (MD) medical school in North America
- 64 students per class
- 7+ affiliated community hospitals
- 120+ outpatient preceptors
- 1000+ new affiliate teaching faculty
How to make this happen

- 1000 new affiliate faculty…
- Busy inpatient and outpatient physicians…
- Some private practice, some hospital based…
- Some primary care, some subspecialized…
- Some with academic experience, some without…
- Some asking for payment, some not…
- Other competing medical schools and students…
Questions to ask ourselves

- How do we **motivate** new volunteer physicians?
- How do we **mentor** new volunteer physicians?
- How do we **monitor** new volunteer physicians?
- How do we **maintain** new volunteer physicians?
Motivation – what can we offer?

- What do preceptors value?
  - 1st – Evaluation and Feedback from students
    - Then CME, financial compensation is lowest priority
  - Resources and rewards to consider
    - Appointments, educational materials (library access), teaching awards, gifts, CME

- Reasons to precept?
  - Personal satisfaction
  - Opportunity to teach, to be challenged
  - To influence others as a role model
Mentoring – what do faculty need?

- Our job: Provide feedback and evaluation to preceptors
  - Does it impact job performance?
  - Feedback effective if credible, accurate, non-threatening, someone respected
- Challenge – few physicians attend traditional faculty development workshops
- Formal opportunities for advancement
Monitoring performance?

- Quality and consistency at multiple sites
- Factors that contribute to instructional quality in community settings
- Can students help?
- Quantify productivity and activity in teaching

**Figure 4.** Comparison of average hours worked by male and female physicians, using full-time equivalents, 2004–2007.
Maintaining involvement?

- Personal connection
- Foster relationship – whether volunteer, compensated and formal appointment process
- Invite involvement in design and management of program
- Recognize challenges to teaching, including patient care responsibilities, productivity standards, burnout, other medical schools
What are the best practices that have worked at your institution for faculty evaluation and engagement?

Questions?

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Thank you!
References