

Educational Leadership Portfolio

Name:

Title:

Department:

SECTION I: MATCH TO STANDARD-SETTING EXAMPLE

SECTION 1.1

My work in educational leadership is most closely mirrored by standard-setting example 3. Example 3 is described as a physician in a clinical department with leadership responsibilities in graduate medical education, undergraduate medical education, and national professional societies.

SECTION 1.2

The major components of my activities in educational leadership that I wish to highlight are related to national professional societies and graduate medical education. I have been very involved with the transition to the single accreditation system (SAS) within the AOA and stakeholder organizations. Additionally, I have been involved for many years with Osteopathic graduate medical education on a national, regional, and local level. Undergraduate medical education will not be a focus of my portfolio even though I have engaged in numerous activities.

SECTION II: PERSONAL STATEMENT

<i>Goals and/or Philosophy</i>	<ul style="list-style-type: none">• The four key values of my leadership philosophy are integrity, trust, collaboration, and diligence.• The overarching goals I hope to achieve throughout my career are to develop effective and efficient learning organizations with the highest levels of quality, safety, and service.• I will achieve my desired results by modeling transformational leadership through individualized consideration, intellectual stimulation, inspirational motivation, and idealized influence.
<i>Preparation/Ongoing Reflection</i>	<ul style="list-style-type: none">• I will continue to learn, remain receptive to feedback, and seek out ways to improve myself as a leader and an educator.• Certified Physician Executive Program (2012-2017)• Memorial Health Systems Leadership Program (2012 – 2014)
<i>Sharing Leadership Strategies and/or Experiences with Peers</i>	<ul style="list-style-type: none">• Member of the Society of Teachers of Family Medicine (STFM) Graduate Medical Education Committee to represent and provide perspective on Osteopathic graduate medical education. Participate in providing educational materials for GME faculty. (2015 – present)• Member of STFM Faculty Development Delivered speaker bureau to provide perspective on curricular and faculty development needs within Osteopathic graduate medical education. Participate in providing faculty development sessions at residency programs. (2017 – present)

SECTION III: DESCRIPTIONS OF QUANTITY AND EVIDENCE OF QUALITY

DESCRIPTIONS RELATIVE TO QUANTITY		DESCRIPTIONS RELATIVE TO QUALITY	
15-present 13-present	Chair, AOA (national committee) Member, AOA (national committee)	<ul style="list-style-type: none"> • Led (AOA committee) during the initiation of the ACGME Single Accreditation System (SAS) • Communicated and collaborated with AOA leadership regarding function, direction, and structure of the committee <p>Represented committee and AOA at stakeholder meetings with ACGME and AMA</p>	<ul style="list-style-type: none"> • Committee functions: • Council on Osteopathic Undergraduate Medical Education and Council on Osteopathic GME Development were added to the committee in 2017
15-present	Chair, (national committee) Task Force on ACGME Single Accreditation System (SAS)	<ul style="list-style-type: none"> • Committee gathered information on transition needs and challenges of current Osteopathic residency programs 	<ul style="list-style-type: none"> • Committee provides support and resources for Osteopathic residency programs in ACGME transition activities
15-present	Member, ACGME _____ Review Committee	<ul style="list-style-type: none"> • One of three Osteopathic residency physicians nominated to the ACGME Review Committee as part of the SAS 	<ul style="list-style-type: none"> • Provide insight and promote common understanding of Osteopathic residency programs applying for ACGME accreditation during the SAS
06-16	Member, (National Committee) President (2013-2014), Chair, Single GME Accreditation Task Force (2014-2015)	<ul style="list-style-type: none"> • Led organization as President during initial negotiations of Memorandum of Understanding (MOU) between various national organizations for the SAS • Represented membership at multiple stakeholder meetings 	<ul style="list-style-type: none"> • Acted as liaison between (national committee) and other national organizations in relation to terms of MOU and impact on (national committee) membership • Reinitiated discussions between (name of national organizations) regarding potential organizational alignment
05-15	Osteopathic Postdoctoral Training Institution – (name) Chair, Graduate Medical Education Committee (2007-2015), Member (2005-2015) Member, Board of Governors (2006-2015), Finance Committee (2007-2015)		

	<ul style="list-style-type: none"> Assisted OPTI Academic Officer with committee development and function Assisted OPTI Academic Officer with committee transition in preparation for the SAS 	<ul style="list-style-type: none"> Participated in ongoing development and review of OPTI budget Served in OPTI leadership role as Board of Governors member
13-15	Member, AOA (national committee)	
	<ul style="list-style-type: none"> Participated in modifying Osteopathic Institutional standards in preparation for the SAS 	<ul style="list-style-type: none"> Participated in review and accreditation decisions for Osteopathic Institutional and Internship program reviews
14-15	Member, (multiple national organizations) Joint Education Committee (JEC)	
	<ul style="list-style-type: none"> Selected as a (national organization) representative to this committee Participated in planning strategic communication and education for the SAS 	<ul style="list-style-type: none"> Represented the committee at multiple educational conferences Moderated multiple question and answer sessions with JEC members at ACOFP meetings
14-15 09-15	Vice-Chair, AOA (national committee)	
	Member, AOA (national committee)	
	<ul style="list-style-type: none"> Initiated discussions regarding the continuum of Osteopathic Education during negotiations of the MOU for SAS 	<ul style="list-style-type: none"> Participated in Bureau's discussions regarding reorganization and future purpose and mission
14-15 13-14	Member, (national organization) Ad Hoc Committee on Osteopathic GME Transition	
	Member, (national organization) Graduate Medical Education Advisory Committee	
	<ul style="list-style-type: none"> Participated in making recommendations regarding transition to the SAS based on stakeholder data 	<ul style="list-style-type: none"> Participated in producing a white paper focused on recommendations for Osteopathic Recognition in the SAS
12-15	Member, (national organization) Committee on Education and Evaluation (CEE)	
	Member, (national organization) CEE Executive Committee (2014-2015)	
	<ul style="list-style-type: none"> Participated in making accreditation decisions regarding Osteopathic residency programs Participated in modifying Osteopathic residency standards in preparation for the SAS 	<ul style="list-style-type: none"> Participated on the Executive Committee and provided direction for future CEE committee development Led and participated on multiple CEE subcommittees
03-present	(Institution name) Director of Osteopathic Medical Education (DME) (2003-2006), Institutional DME (2006-2008), Regional DME (2008-present)	
	<ul style="list-style-type: none"> Led organizational development of three dually accredited residency programs 	<ul style="list-style-type: none"> Provided Osteopathic OMT didactics for three dually accredited programs over the last 14 years Assisted with collaborative efforts of the three (name of institution)

	<ul style="list-style-type: none"> Assisted external organizations with development or challenges related to Osteopathic education 	Osteopathic site PDs to apply for and achieve Osteopathic Recognition
06-14	(Institution) Program Director, Osteopathic _____ Residency Program	
	<ul style="list-style-type: none"> Led Osteopathic residency program through two successful site inspections 	<ul style="list-style-type: none"> Established OMT as a “referable” procedure within the outpatient clinic and authored hospital privileges for inpatient OMT procedures

SECTION IV: DISCUSSION OF BREADTH – PERSONAL STATEMENT

I have been fortunate in the opportunities that have presented themselves within the Osteopathic profession. My discovery of Osteopathic medicine came late in my consideration of medicine as a profession. It was the comprehensive nature of the approach and philosophy that attracted me. During medical school I served as a predoctoral OMM fellow at _____. This program is integrated over three years while the DO student completes clinical experiences. It was during this time that I developed relationships with multiple mentors such as Drs. _____ who would greatly influence my future activities within the profession.

I attended a _____ residency at _____ in my home town of _____. The program was receptive to my request that I would need to practice and perform OMT during my residency training. Fortunately, _____, DO was a faculty member at that time and would provide the necessary supervision. Dr. _____ and I would also work together during my residency to apply for dual accreditation since the program was only ACGME accredited at that time. The Chair of Family & Community Medicine at the time was _____, MD, a proponent of collaborating with the Osteopathic profession and a supporter of achieving dual accreditation. After completing my residency, I was hired to serve as the Osteopathic DME and provide OMT didactics for our dually accredited programs.

In 2004, I was approached to serve on the (State) Osteopathic Medical Society Board. I was on the board until 2011 after serving as CME Program Chair in 2008 and 2009, and serving as President in 2010. I continue to Co-chair the state delegation to the AOA House of Delegates. Also in 2004, I was approached to serve on the (state) (national society) Board. I was on the board until 2015 after serving as CME Program Chair in 2010, 2011, 2012, and 2013, and serving as President from 2011-2013. I continue to serve as a (state) (national organization) delegate to the (national organization) Congress of Delegates. Involvement with these organizations provided important exposure to national leaders at the AOA and (national organization).

In 2006, I assumed the Osteopathic Program Director role and also began my service on the OPTI OGME committee and Board of Governors. I served as OGME Chair for 8 years and on the Board of Governors for 9 years before departing due to ACGME requirements for serving on a Review Committee. Also in 2006, I was approached by Dr. ____ to assume a (national organization) board position that was being vacated because of change of a change in employment opportunity. I was on the (national organization) board until 2016 after serving as Chair of the Program Committee from 2009-2011 and serving as President from 2013-2014. Involvement with these organizations provided important exposure to national leaders at (national organizations)

In 2007, I was asked to serve on the (national organization) OPP committee. This initial opportunity led to service on 6 other national committees. Eventually, I began my service on the (national organization) Committee on Education and Evaluation (CEE) Committee in 2012 and served on the committee’s Executive

Committee from 2014-2015. I served on the (national organization) CEE Program Director's Workshop Subcommittee from 2011-2016, serving as Vice-Chair from 2014-2016. Additionally, I began serving on the (national organization) CEE Update & Board Review Subcommittee in 2013. Involvement with national committees increased my exposure to national leaders in (national organizations).

I have been the fortunate recipient of numerous opportunities to serve the Osteopathic profession. The mentors and colleagues that I have come to know have supported me in service and professional development. I am a true believer and stalwart defender of the Osteopathic philosophy. It is my hope that the service I have provided and continue to provide to Osteopathic Education will have a lasting impact.

SECTION V: APPENDICES/DOCUMENTATION

Appendix A (Page 8)	AOA (Committee) Roster
Appendix B (Page 9-11)	(National organization) Committee Positions Report
Appendix C (Page 12)	ACGME Review Committee Roster
Appendix D (Page 13)	(National Society) President Plaque 2013-2014
Appendix E (Page 14) Plaque	(National Organizations) Joint Education Committee
Appendix F (Page 15-16) Education Paper	(National organization) Next Steps for Graduate Medical
Appendix G (Page 17-20)	Reference Letter
Appendix H (Page 21-22)	Reference Letter
Appendix I (Page 23)	Reference Letter
Appendix J (Page 24)	Reference Letter
Appendix K (Page 25-26)	Reference Letter