AUPN Clerkship Director's Workshop

Career Development for the Clerkship Director

Moderator: Marie Carl Eugene, DO, MSHPE

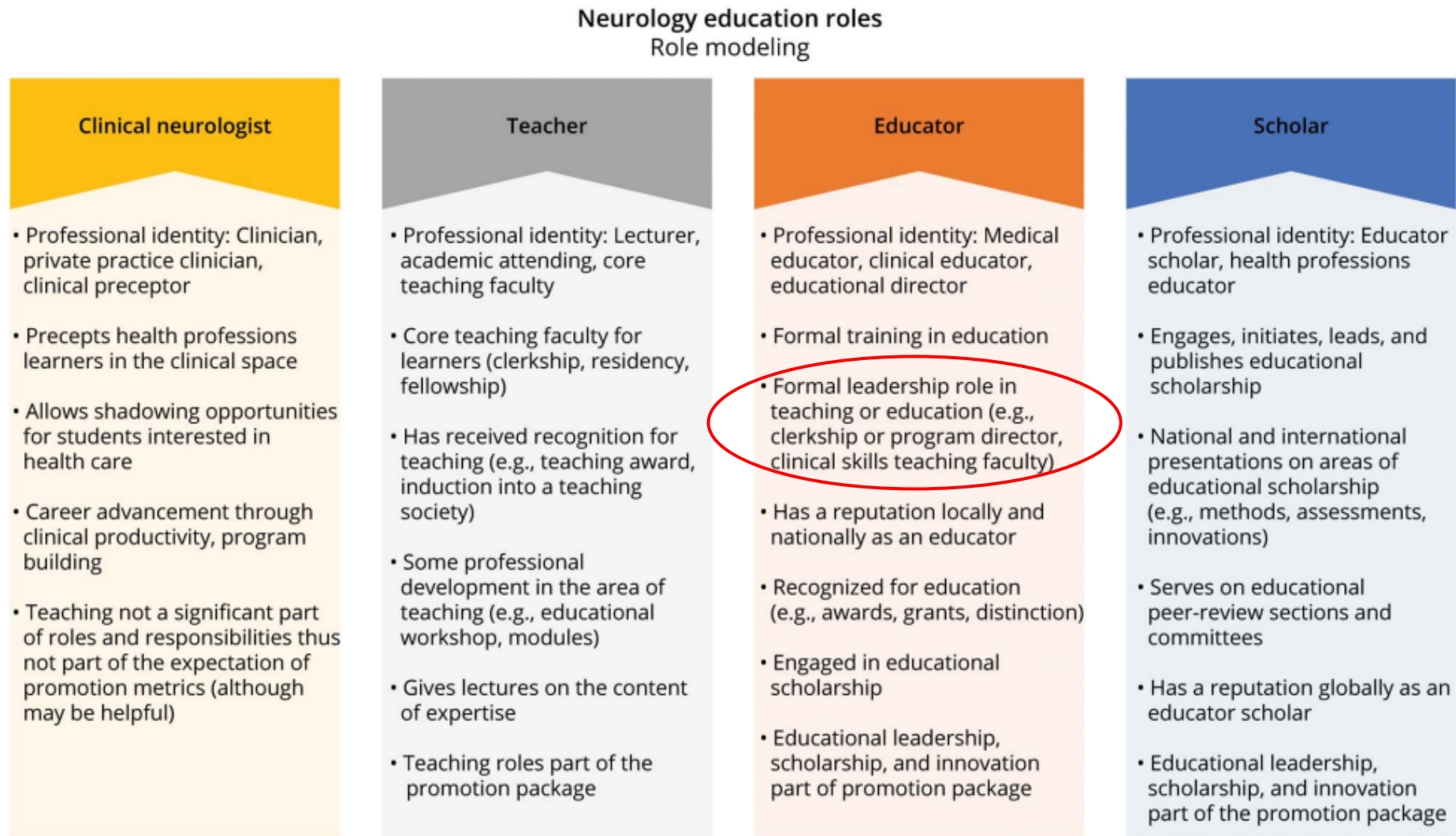Speakers:

Nuri Jacoby, MD

Ralph F. Józefowicz, MD

Madhu (Mona) Soni, MD

Roy E. Strowd, III, MD, MEd, MS

Figure 1 Description of 4 Main Subtypes of Educational Roles Within Neurology, Including Expectations for Training, Activity, and Advancement

Neurology education roles
Role modeling

Clinical neurologist	Teacher	Educator	Scholar
• Professional identity: Clinician, private practice clinician, clinical preceptor	• Professional identity: Lecturer, academic attending, core teaching faculty	• Professional identity: Medical educator, clinical educator, educational director	• Professional identity: Educator scholar, health professions educator
• Precepts health professions learners in the clinical space	• Core teaching faculty for learners (clerkship, residency, fellowship)	• Formal training in education	• Engages, initiates, leads, and publishes educational scholarship
• Allows shadowing opportunities for students interested in health care	• Has received recognition for teaching (e.g., teaching award, induction into a teaching society)	• Formal leadership role in teaching or education (e.g., clerkship or program director, clinical skills teaching faculty)	• National and international presentations on areas of educational scholarship (e.g., methods, assessments, innovations)
• Career advancement through clinical productivity, program building	• Some professional development in the area of teaching (e.g., educational workshop, modules)	• Has a reputation locally and nationally as an educator	• Serves on educational peer-review sections and committees
• Teaching not a significant part of roles and responsibilities thus not part of the expectation of promotion metrics (although may be helpful)	• Gives lectures on the content of expertise	• Recognized for education (e.g., awards, grants, distinction)	• Has a reputation globally as an educator scholar
	• Teaching roles part of the promotion package	• Engaged in educational scholarship	• Educational leadership, scholarship, and innovation part of the promotion package
		• Educational leadership, scholarship, and innovation part of promotion package	

Moeller J & Salas RME, *Neurology*, 2023

Learning Objectives

- Define career goals and expected outcomes to develop a local and national reputation.

- List options for leadership roles in medical education that could be considered in addition to or beyond the role of clerkship director.

- Identify strategies that can promote a clerkship director's engagement in scholarly activity, including cross-institutional research.

A Top 5 List…

- **Nuri Jacoby, MD**
- "A top 5 list" of things to do to be a successful clinician-educator

How can a clerkship director define career goals and expected outcomes to develop a local and national reputation?

- Ralph F. Józefowicz, MD

- Group discussion: 15 minutes

  ➢ What are ways in which you have established a local and national reputation?

  ➢ What tips from the presentation can you implement today toward establishing or improving your local and national reputation?

  ➢ Are there barriers to achieving a local and national reputation? What are potential solutions that can help overcome them?

Beyond Clerkship Director: What other leadership roles in medical education lay ahead for a clerkship director?

- Madhu (Mona) Soni, MD

- Group discussion: 15 minutes
  - ➢ What paths have you considered, or would you consider in addition to or beyond the role of clerkship director?
  - ➢ What goals can you establish now to help you advance to another role in medical education in the future?

Medical Education Scholarship: How do you get started and how do you keep the tempo?

- Roy E. Strowd, III, MD, MEd, MS

- Group discussion: 15 minutes

  ➢ How can use your role as a clerkship director to acquire data that can allow you to engage in medical education research and publication?

  ➢ What networking strategies can be utilized to enhance collaboration among clerkship directors?

Final Questions?

Thank You!

Disclosures

- Advisory board for Argenx

Learning Objectives

- Define the competencies of a clinician educator
- Identify strategies to succeed as a clinician educator

What is a Clinician Educator?

Faculty member whose primary responsibility as part of the academic mission is patient care and whose focus is on the theoretical constructs that inform excellent teaching and effective learning, applying these to create and inform educational scholarship.

Greenberg 2018

Clinician Educator Milestones

Universal Pillars
- Reflective Practice
- Well-being
- Recognition and mitigation of bias
- Commitment to Professional Responsibilities

Administration
- Administrative Skills
- Leadership Skills
- Change Management

Diversity, Equity, and Inclusion

Well-being

Educational Theory and Practice

Boyle, Chou, and Croom 2022

Clinician Educator Milestones

POSITION PAPER

New ACGME Clinician Educator Milestones as a Roadmap for Faculty Development: a Position Paper from the Society of General Internal Medicine Education Committee

Aditi Puri, MD, MS[1], Sreekala Raghavan, MD[2], Elisa Sottile, MD[3], Mamta Singh, MD, MS[4], Laura K. Snydman, MD[5], Anna K. Donovan, MD, MS[6], Rachel Bonnema, MD, MS[7], and Margaret C. Lo, MD[8]

[1]Loyola University Health System, MacNeal Hospital, 3722 South Harlem Avenue, Apartment LL34, Berwyn, IL 60402, USA; [2]Department of Medicine, Mount Sinai Beth Israel, New York, NY, USA; [3]Division of General Internal Medicine, Department of Medicine, University of Florida College of Medicine, Jacksonville, FL, USA; [4]Case Western Reserve University School of Medicine and Primary Care Service, VA Northeast Ohio Health Care System, Cleveland, OH, USA; [5]Division of General Internal Medicine, Department of Medicine, Tufts Medical Center, Boston, MA, USA; [6]Division of General Internal Medicine, Department of Medicine, University of Pittsburgh School of Medicine, Pittsburgh, PA, USA; [7]Division of General Internal Medicine, Department of Medicine, University of Texas Southwestern, Dallas, TX, USA; [8]Division of General Internal Medicine, Department of Medicine, University of Florida College of Medicine, Malcom Randall VAMC, Gainesville, FL, USA

Milestones can be used to:

1. Help clinician educators reflect on areas they excel and opportunities for improvement

2. Guide institutions and departments to develop faculty development initiatives

Boyle, Chou, and Croom 2022, Puri et al. 2023

Tip #1

Find as many opportunities as possible to learn, grow, and develop skills in medical education and leadership

Impact of Education Training for CE's

Table 3 Association Between Productivity and Education Training Intensity (High vs. Medium vs. Low vs. None)

Product type		All	High intensity	Medium intensity	Lower intensity	None	*p* value[†]
1st or senior author on ≥ 3 peer-reviewed manuscripts	N (%)	81/179 (45%)	37/65 (57%)	23/61 (38%)	12/32 (38%)	9/21 (43%)	0.122
	Adj. OR [95% CI]		2.6 [0.8, 8.6]	0.4 [0.1, 1.2]	1.0 [0.3, 3.8]	(Reference)	0.002
Teaching at regional, national, or international level ≥ 3 times	N (%)	122/185 (66%)	53/67 (79%)	38/61 (62%)	20/37 (54%)	11/20 (55%)	0.030
	Adj. OR [95% CI]		5.7 [1.5, 21.3]	0.8 [0.2, 2.9]	1.3 [0.3, 5.0]	(Reference)	0.001
Published curricula ≥ 1	N (%)	69/179 (39%)	33/66 (50%)	22/59 (37%)	10/35 (29%)	4/19 (21%)	0.055
	Adj. OR [95% CI]		4.8 [1.3, 17.5]	1.7 [0.5, 6.2]	1.9 [0.5, 7.5]	(Reference)	0.017
Regional/national committee membership ≥ 3	N (%)	74/185 (40%)	33/67 (49%)	23/62 (37%)	13/37 (35%)	5/19 (26%)	0.216
	Adj. OR [95% CI]		3.4 [1.0, 11.7]	1.1 [0.3, 3.8]	1.9 [0.5, 7.4]	(Reference)	0.040
≥ 6 mentees	N (%)	102/185 (55%)	36/67 (54%)	33/62 (53%)	22/36 (61%)	11/20 (55%)	0.881
	Adj. OR [95% CI]		1.0 [0.3, 3.1]	0.6 [0.2, 2.0]	1.6 [0.5, 5.1]	(Reference)	0.305

Odds ratios are adjusted for number of years since residency training
[†]Pearson's chi-square test or Wald test of the null hypothesis that the three odds ratios are simultaneously equal to one

Zipkin et al. 2020

Opportunities for Education

Resident-as-teacher curricula

Clinician educator tracks

Graduate Medical Education Tracks

Institutional faculty development programs and medical teaching academies

Harvard Macy Institute Program for Educators

Medical Education Research Certificate (MERC) virtual workshop series

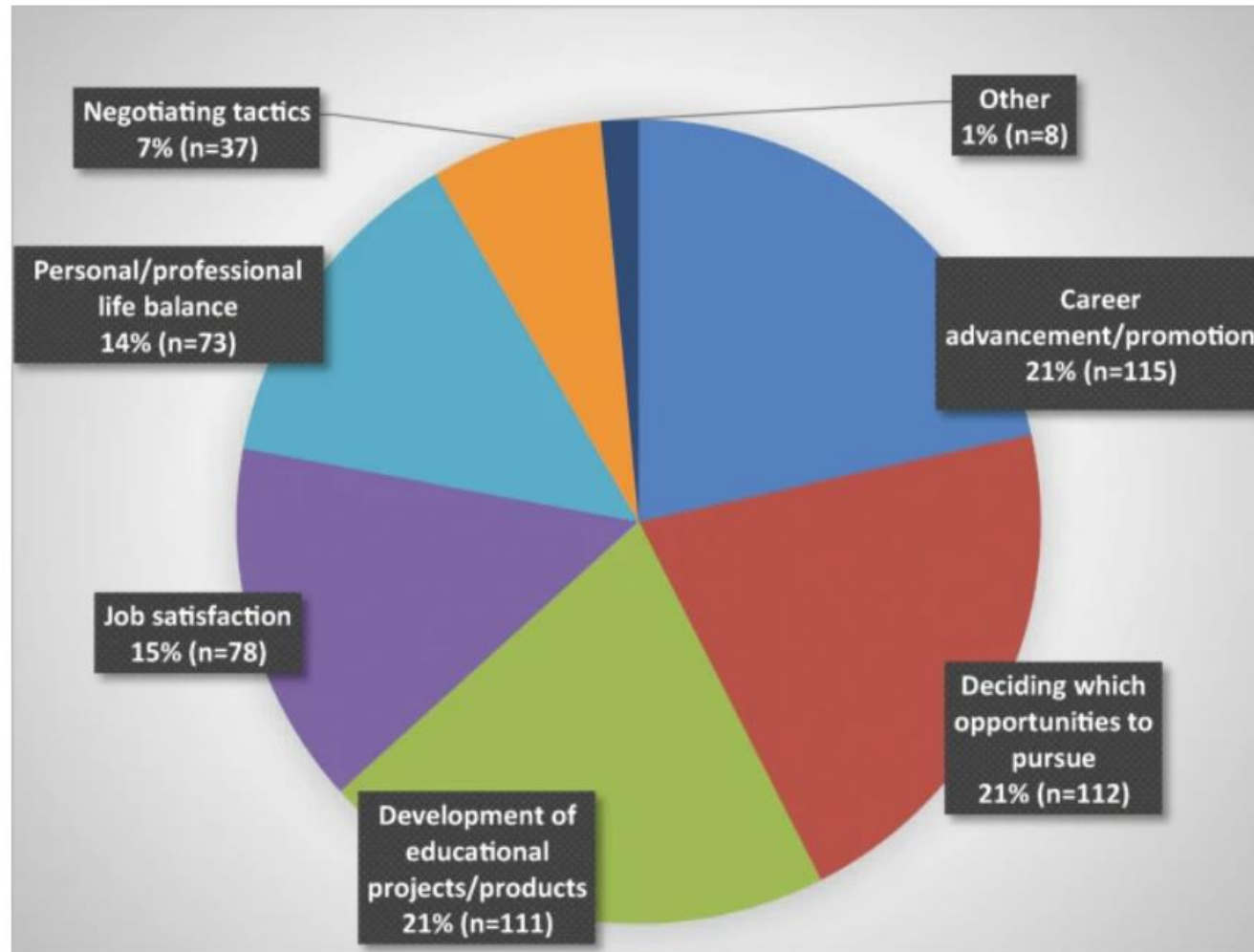Stanford Faculty Development Program

Masters in Medical Education

Tip #2

Find mentorship; ideally, multiple mentors. They do not need to be in your department or institution.

Mentorship for Clinician Educators

Reasons CEs met with their primary mentor.

Nemeth et al. 2021

Value of Mentorship

Does formal mentoring for faculty members matter? A survey of clinical faculty members

Elza Mylona,[1] Linda Brubaker,[2] Valerie N Williams,[3] Karen D Novielli,[4] Jeffrey M Lyness,[5] Susan M Pollart,[6] Valerie Dandar[7] & Sarah A Bunton[7]

- 21,076 faculty from 23 medical schools surveyed, 12,779 responded
- 30% responded that they had a formal mentor at their institution

- Satisfied with professional development: 3.72 vs 3.2
- Satisfied with department: 4.09 vs 3.71
- "Fit" in my department: 4.04 vs 3.73
- Knew criteria for promotion: 3.70 vs 3.36

Mylona et al. 2016

Peer Mentoring

Medical Teacher

ISSN: (Print) (Online) Journal homepage: https://www.tandfonline.com/loi/imte20

Twelve tips for developing and maintaining a successful peer mentoring program for junior faculty in academic medicine

Regina A. Jacob, Paul N. Williams & Alia Chisty
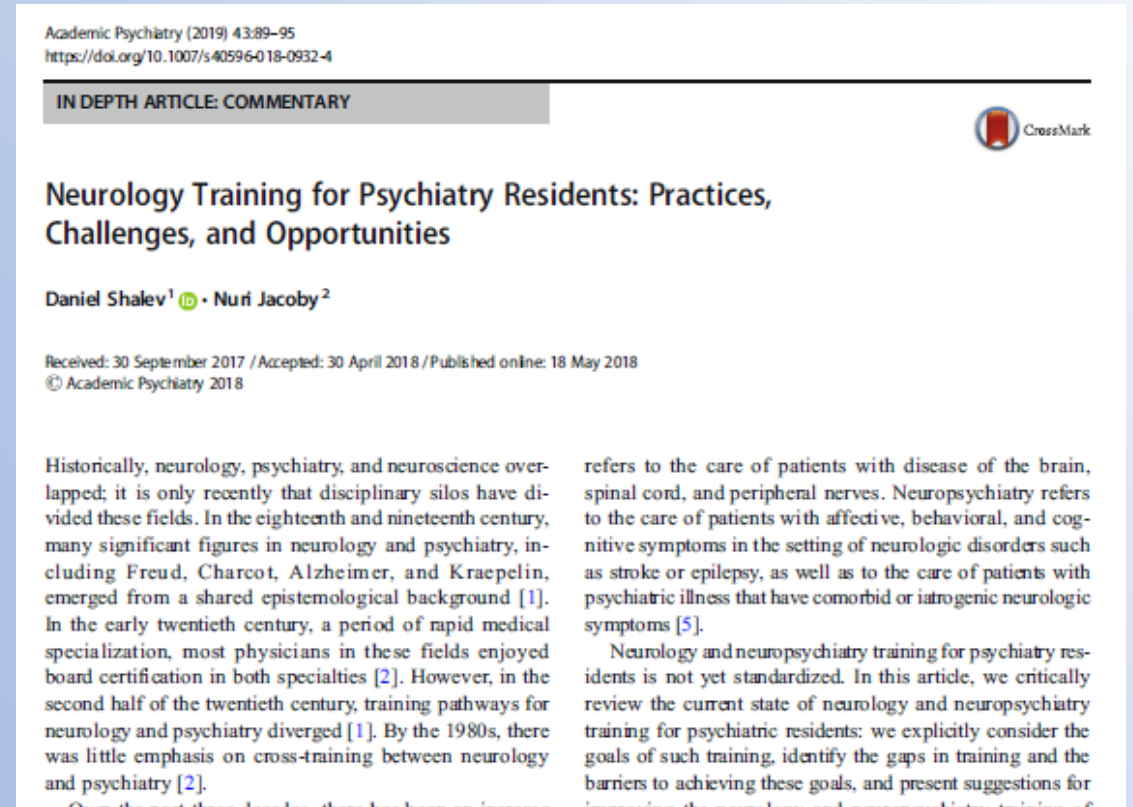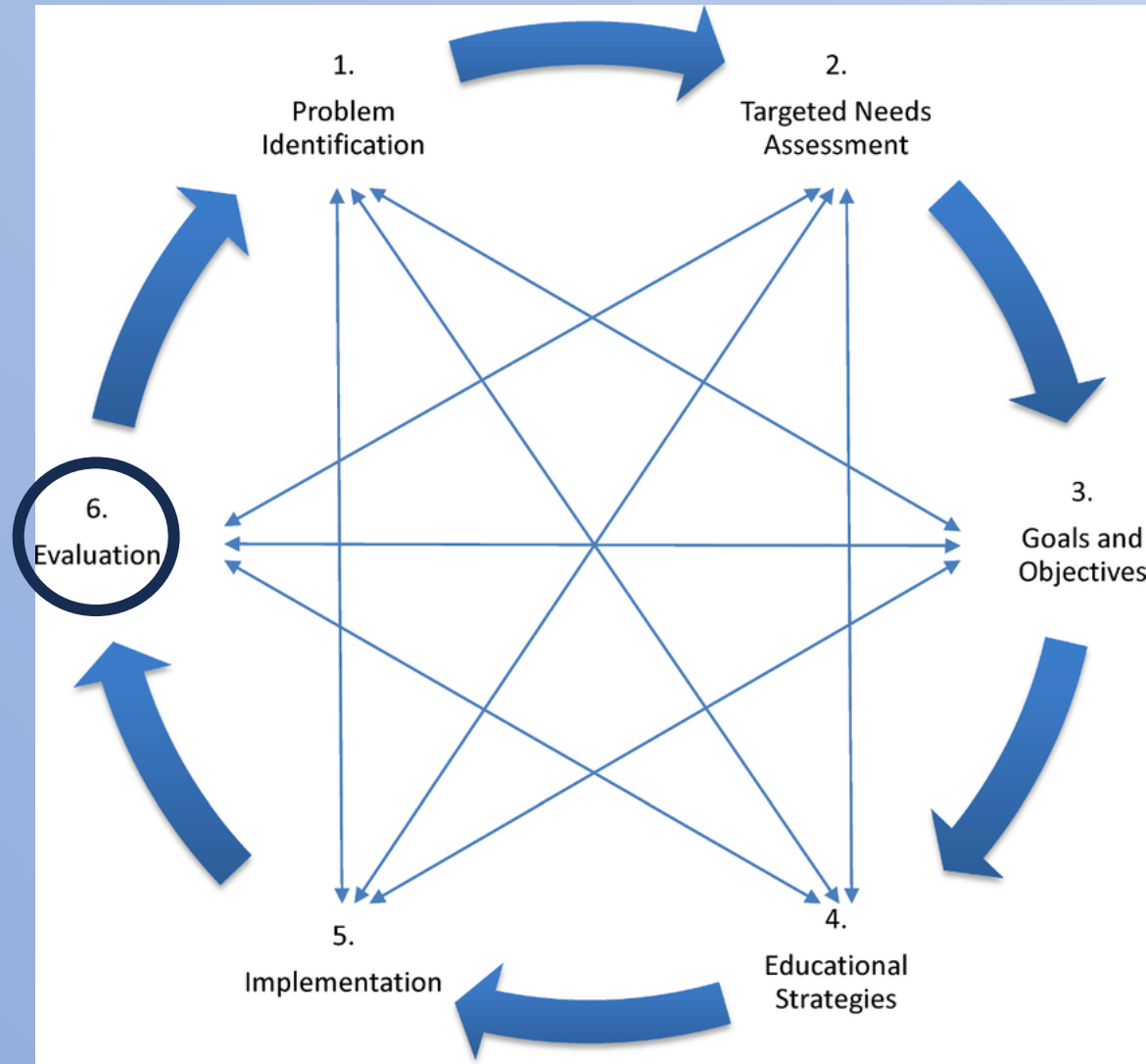
Jacob, Williams, and Chisty 2022

Tip #3

Utilize your learners to help inspire ideas and remember that there are MANY types of learners.

How can neurology training for psychiatry residents be improved?

1. Better standardization of neurology rotations focusing on consult service and outpatient

2. Develop longitudinal clinical experiences, especially with patients with neuropsychiatric diagnoses

3. **Develop a targeted didactics curriculum for psychiatry residents**

Shalev and Jacoby 2019

Academic Psychiatry (2019) 43:89–95
https://doi.org/10.1007/s40596-018-0932-4

IN DEPTH ARTICLE: COMMENTARY

Neurology Training for Psychiatry Residents: Practices, Challenges, and Opportunities

Daniel Shalev[1] · Nuri Jacoby[2]

Received: 30 September 2017 / Accepted: 30 April 2018 / Published online: 18 May 2018
© Academic Psychiatry 2018

Historically, neurology, psychiatry, and neuroscience overlapped; it is only recently that disciplinary silos have divided these fields. In the eighteenth and nineteenth century, many significant figures in neurology and psychiatry, including Freud, Charcot, Alzheimer, and Kraepelin, emerged from a shared epistemological background [1]. In the early twentieth century, a period of rapid medical specialization, most physicians in these fields enjoyed board certification in both specialties [2]. However, in the second half of the twentieth century, training pathways for neurology and psychiatry diverged [1]. By the 1980s, there was little emphasis on cross-training between neurology and psychiatry [2].

refers to the care of patients with disease of the brain, spinal cord, and peripheral nerves. Neuropsychiatry refers to the care of patients with affective, behavioral, and cognitive symptoms in the setting of neurologic disorders such as stroke or epilepsy, as well as to the care of patients with psychiatric illness that have comorbid or iatrogenic neurologic symptoms [5].

Neurology and neuropsychiatry training for psychiatry residents is not yet standardized. In this article, we critically review the current state of neurology and neuropsychiatry training for psychiatric residents: we explicitly consider the goals of such training, identify the gaps in training and the barriers to achieving these goals, and present suggestions for
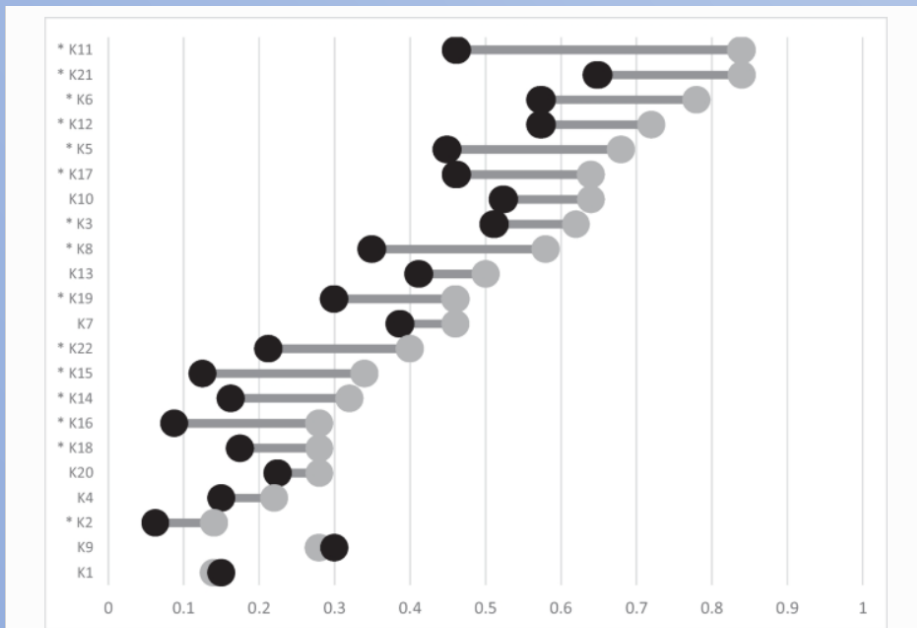
Tip #4

Use a framework when creating an educational innovation, and **ALWAYS** evaluate your educational initiative, and map it out **BEFORE** the implementation

Evaluation of my e-learning curriculum

Pre- and post-test mean percent correct of individual knowledge (K) items. Pre-test means are shown in black and post-test means are shown in gray. Items with a statistically significant change (p-value ≤ 0.05) are marked with asterisks

Category	Item	Mean pre	Mean post	df	t-statistic	p-value
Attitude	*Overall mean*	2.68	2.51	59	0.96	0.170
A1	I prefer treating patients with chronic psychiatric disorders such as depression rather than dementia	1.92	1.93	59	0.08	0.470
A2	Much can be done to improve the quality of life for people with dementia	2.04	1.75	59	− 2.97	0.998
A3	Managing dementia is more often frustrating than rewarding	2.32	2.68	59	2.71	**0.004**
A4	The early detection of dementia benefits the patient	1.48	1.53	59	0.49	0.314
A5	Psychiatrists are crucial to helping patients and caregivers with dementia	1.62	1.50	59	− 1.49	0.929
A6	I feel frustrated because I do not know how to effectively treat people with dementia	2.05	2.95	59	6.27	**0.000**
A7	Dementia is better treated by neurologists	3.13	3.25	59	0.92	0.180
A8	I prefer to have nothing to do with the care of dementia patients	3.52	3.60	59	0.51	0.305
A9	I would enjoy pursuing further training on working with patients with neuropsychiatric disorders	1.95	2.18	59	1.70	**0.047**
Confidence	*Overall mean*	2.67	2.11	59	− 5.01	1.000
C1	I feel confident in my ability to diagnose dementia	2.39	2.02	59	− 3.68	1.000
C2	I feel confident in my ability to communicate a diagnosis of dementia to a patient	2.51	1.98	59	− 4.75	1.000
C3	I feel confident in my ability to treat the neuropsychiatric symptoms in dementia patients	2.84	2.25	59	− 5.56	1.000
C4	I feel confident in my ability to provide advice about managing dementia related symptoms	2.84	2.27	59	− 4.53	1.000
C5	I feel confident in my ability to conduct a neurocognitive exam	2.87	2.13	59	− 5.64	1.000
C6	I feel confident in my ability to appropriately triage a patient who presents with neuropsychiatric symptoms	2.57	1.98	59	− 6.27	1.000

Jacoby et al. 2023
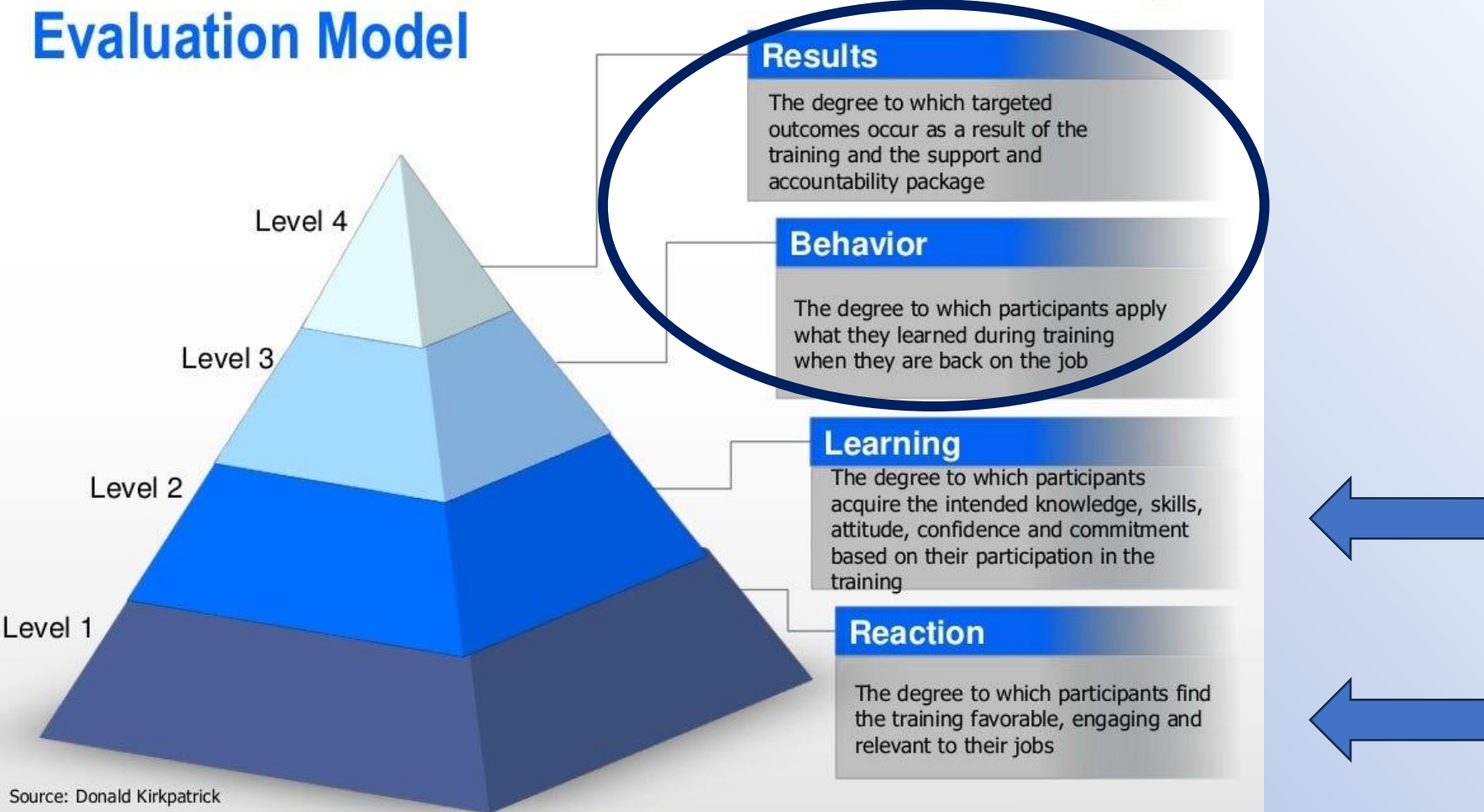
If outcome measures are determined AFTER an educational initiative is completed

Teaching and Communication Simulation Curriculum for Neurology Residents

PGY-2

- 1-minute preceptor
- Recognizing an impaired physician

PGY-3

- Feedback
- Delivering a diagnosis of functional neurologic disorder

PGY-4

- Professionalism
- Delivering bad news

A Failed Attempt at Kirkpatrick Level 3

Evaluated mid clerkship feedback narratives pre-and post-simulation using the narrative evaluation quality instrument (NEQI)

3 components:

1. 8 Performance domains: ➡

   - Overall performance
   - Clinical skills
   - Clinical reasoning skills
   - Prepares for/participates in patient care activities
   - Fund of knowledge
   - Written and/or oral skills
   - Initiative
   - Professionalism

2. Specificity of comments (including supporting evidence and examples)

3. Usefulness to the reader

Kelly et al. 2020

Maimonides Health

DOWNSTATE HEALTH SCIENCES UNIVERSITY

Tip #5

Collaborate, collaborate, collaborate

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Thank you!

Overall Points for Success

- Know exactly what you want to do

- Communicate this to your superiors

- Find a mentor

- Be versatile and patient

- Concentrate on local excellence

- Develop a national portfolio

Early Phase

- Do a fellowship

- Teach often and well

- Teach in a basic science course

- Join local education committees

- Get involved in national organizations

- Publish on education

Middle Phase

- Run a course, clerkship or residency

- Take a sabbatical

- Get education grants

- Increase your national committee work

- Teach in other medical specialties

- Develop international medicine programs

Late Phase

- Continue to teach locally and nationally
- Continue your clinical work
- Become a mentor
- Remain a model "citizen" in your institution
- Remain enthusiastic
- Be a visiting professor

Summary

- Success is not that difficult

- Conviction and focus are most important

- Enthusiasm is key

- Support from a mentor is invaluable

2024 Krakow UR Residents and Students

2024 University of Navarra (Pamplona) Students

Objectives

Identify medical education leadership opportunities

Discuss leadership development programs

Disclaimer

The leadership opportunities and programs discussed will by no means be exhaustive.

Content discussed will primarily be experiential.

Clerkship Director Appointment

Generally, doesn't require prior leadership training

Demonstration of passion for/excellence in teaching and clinical care

Stepping stone (gem) to other leadership opportunities

Establish your goals

Reflect on your own professional vision and mission

Develop an individual strategic plan

Identify a mentor and/or coach

Explore available roles in your department, institution, regional and national organizations

Discuss your interest with a leader in the desired area and pitch the value you bring

Consortium of Neurology Clerkship Directors (CNCD) Survey Summer 2024:

After becoming a clerkship director, what other leadership roles in medical education have you held?

Subspecialty clerkship director	Course leader/ Advanced neurology elective director	Neurology career advising director/SIGN faculty advisor	Residency director
Department vice-chair	Core clerkship curriculum work group chair	Director of scholarly inquiry for medical education	Medical college advanced clinical track leader • Prepare all 4th year students for residency
	LCME faculty lead	Assistant dean • Clerkship education • Accreditation and continuous quality improvement	

CNCD Survey Summer 2024:
After becoming a clerkship director, what other leadership roles in medical education have you held?

- Research committees, regional and national

- National undergraduate education committee

- AAN CNCD co-chair

- AAN Undergraduate Education Subcommittee chair

- AAN Director Mentorship Leadership committee

- ABPN Innovation in Education committee

- Alliance for Clinical Education treasurer, president

- AUPN council

CNCD Survey Summer 2024:

After becoming a clerkship director, what other leadership roles in medical education do you aspire to have?

- Department chair
- Department vice-chair of education
- Dean
- Assistant/Associate dean
  - Career Advising
  - Assessment
  - Other
- Medical school director
  - All clerkships/M3 curriculum
- Medical education committee

Non-neurology CD Survey Summer 2024:

After becoming a clerkship director, what other leadership roles in medical education have you held?

Department
- Director/Assistant Director
    - Undergraduate Medical Education: Electives/Acting internships
    - Residency
    - Fellowship
- Subspecialty advisor
- Vice-Chair, Education
- Chair

Medical school
- Director, Interprofessional education

Chair/co-chair of various school committees
- Curriculum committee/subcommittees
    - Core clerkship workgroup vice chair
    - Clinical sciences planning and evaluation
- Promotion committees for students/faculty
- LCME self study

Non-neurology CD Survey Summer 2024:

After becoming a clerkship director, what other leadership roles in medical education have you held?

Dean's Office
- Assistant Dean
  - Learning Environment; Clinical Sciences; Professional Development
- Associate Dean
  - Curriculum; Clinical Years; Professional Development; Accreditation/Quality Improvement
- Senior Associate Dean
  - Curriculum; Medical Education
- Vice Dean
- Interim/Permanent Dean

Division Chief of Medical Educational Programs and Liaison to Allied Programs

Designated Institutional Official (DIO)

Membership on university search committee for provost/president

Chair of national medical education organizations
- Specialty consortium
- NBME
- Alliance for Clinical Education
- AAMC Group on Educational Affairs (GEA)

CNCD Survey Summer 2024:

What resource(s) would be most helpful in achieving aspirational leadership roles?

Mentorship
- Including chairs or deans
- How other leaders have balanced their clinical vs education work efforts

Leadership training (most helpful if not a neurology-sponsored, program)

Executive coaching

A panel discussion with medical education leaders

Seminars regarding faculty development and career advancement

Opportunities for research and publications in the education space

Funding to obtain Master's in (Medical) Education

More time to teach

More support to make sure that all learners on the team are supported and taught

Additional supported time and more resources for managing things like learning environment concerns

More training in interpersonal conflict resolution

More formal training on curricular design and implementation

Non-neurology CD Survey Summer 2024:

What resource(s) would be most helpful in achieving aspirational leadership roles?

How to work towards best positioning **one**self to be open to opportunities

Access to resources for medical education scholarship (e.g. statistician)

Financial support to pursue degrees such as Master's in Heath Sciences/Health Professions Education

Finding a good mentor

Leadership training

Degree (e.g. Master of Public Health)

National program

Resources found to be the most helpful

Networking

Peers

Mentors (formal or informal)

Opportunities at regional/national meetings

Leadership development programs

Career coach

Leadership Development Programs
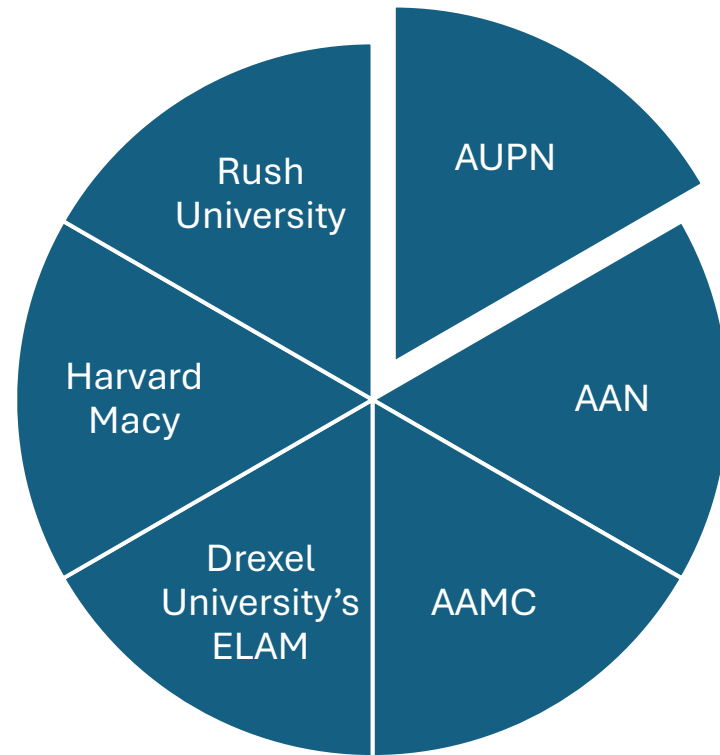
Association of University Professors of Neurology: Leadership Programs

Annual Fall Meeting
- Clerkship Director Workshop

Leadership Minute Podcast/Video
- Highly focused summary, practical advice
- Clinical practice
- Education
- Leadership – Administration, Faculty, Fiscal
- Research
- VA Affiliations

https://www.aupn.org/i4a/pages/index.cfm?pageid=3912
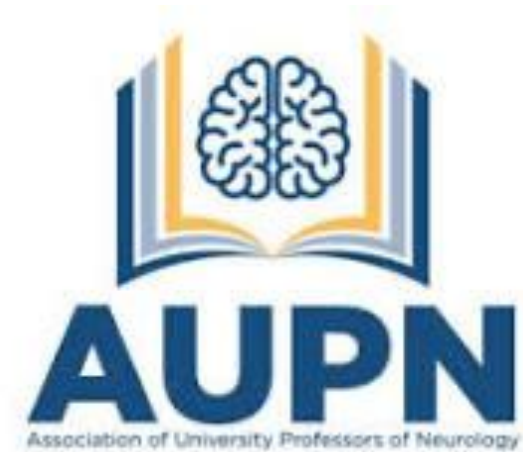
American Academy of Neurology Leadership Programs

Direct Mentorship*
  - New CDs, residency/fellowship directors/associate directors

Training, personalized coaching and mentoring
  - Diversity Leadership
  - Emerging Leaders
  - Palatucci Advocacy
  - Practice Leadership
  - Transforming Leaders*
  - Women Leading in Neurology*

Leadership University at Annual Meeting/Fall Conference

12 clerkship director participants/graduates

* Application period currently open

https://www.aan.com/education/leadership-programs
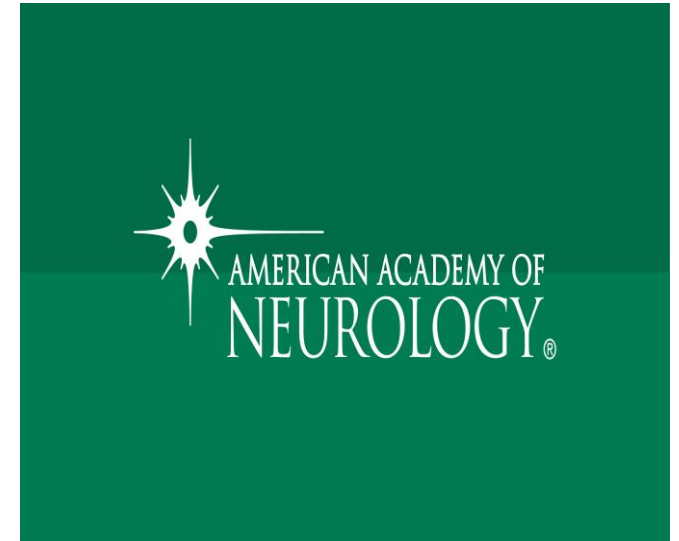
Association of American Medical Colleges

CORE Leadership Development Program

- New series of progressive learning experiences as career stages evolve
    - Leading for Impact February 2025
    - Others being piloted

LEAD Certificate Program

- 12-month experience
- Early to mid-career faculty; 60 per year
- Workshops, reflective learning, professional development activity, coaching

Various virtual and in-person programs

- GME Leadership Development Certificate Program
- Organizational Leadership in Academic Medicine for New Associate Deans and Department Chairs an
- Minority Faculty Leadership Development Seminar

https://www.aamc.org/career-development/leadership-development

Drexel University Executive Leadership Programs

12-month part-time fellowship program

Women faculty in medicine, dentistry, public health and pharmacy

Develop professional/personal skills for senior/advanced leadership roles

Special attention to unique challenges facing women in leadership positions

Drexel University Executive Leadership Programs

Executive Leadership in Academic Medicine (ELAM)

- Focus on education and research
- Prepare women for senior leadership roles in academic centers

Executive Leadership in Health Care (ELH)

- Focus on clinical operations and health care delivery in hospitals/health care systems
- Designed for senior-level women leaders interested in CEO, CMO, CFO positions

Harvard Macy Institute Professional Development Courses

- Health Care Leadership Series
  - Innovations in teamwork
  - Business strategy
  - Economics
  - Reducing racial disparities
  - Digital health

- Health Care Leadership Certificate of Specialization
  - After successfully completing 3 courses within 18 months

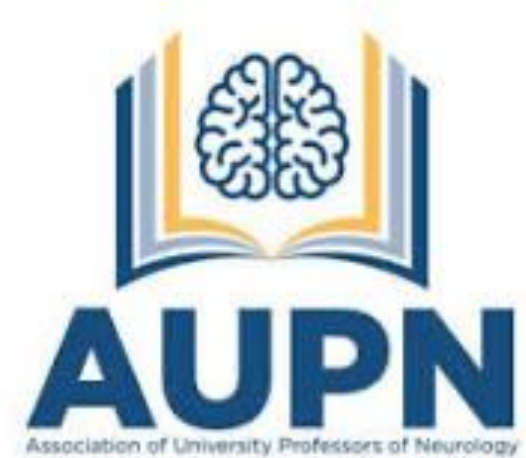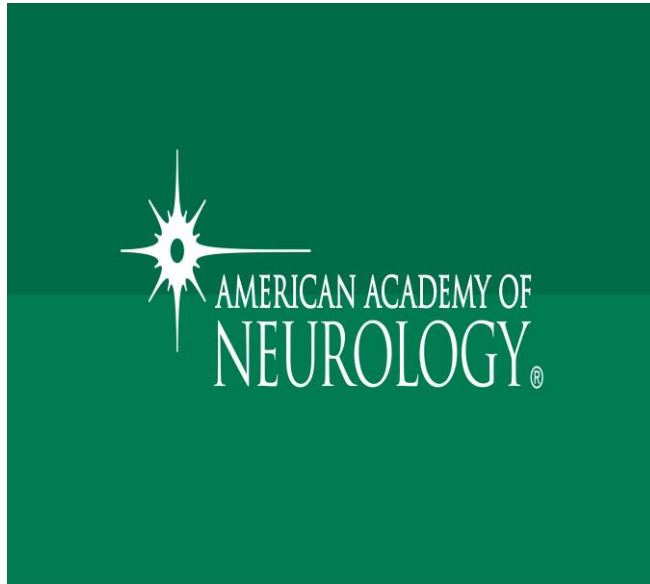# Rush University Center for Innovative and Lifelong Learning

Immersive leadership development retreats

- Beyond Problem Solving: Leading with Appreciative Inquiry
- Making Strategic Choices when Everything Seems Important
- Transforming Conflict to Strategic Collaboration
- Negotiating Essentials for Getting What You Need
- Designing & Implementing Your Leadership Brand
- High Impact Communication Strategies for Leaders
- Values-based Influencing for Leaders
- Building Engaged, High Impact Teams
- Motivating & Developing Future Leaders

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