



Alliance for
Clinical Education

Annual Workshop in Clinical Education

Our mission:
to foster collaboration
across specialties to
promote excellence in
clinical education

AAMC November 4, 2008
San Antonio, Texas


Alliance for Clinical Education Resources



Louis Pangaro, MD
President

Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has

Margaret Mead



ACE
ASSESS • ADVISE • ANNO UNCE
STAY • ENCD • COORD

AAMC

What Must Clerkship Directors Do?

- Deliver their disciplines' core clerkship
 - Serve the students' needs
 - Serve the departments' needs
 - Serve the institutions' needs
- Trouble shoot
 - Personal conflicts
 - Natural disasters

ACE
ASSESS • ADVISE • ANNO UNCE
STAY • ENCD • COORD



What Else Is Mandated?

- Respond to national mandates
 - AAMC standards, e.g. ED-2, ED-8
 - Response to collegiate restructuring
 - Restructuring into competency language
 - Changing length of rotations
 - Response to departmental requirements
 - Clinical responsibilities
 - Academic expectations
-



How Do We Move Forward?

- Clerkship directors need dedicated time
 - Teaching/role modeling
 - Administration
 - Development of other educators
 - Advocating for needed resources
 - Data collection, analysis, reflection, improvement
-

As one of Margaret Mead's
small groups of committed
individuals....



The
**Alliance for Clinical
Education**

defined and published the guidelines for
the resource needs of clerkship directors.

2008 Alliance for Clinical
Education Program



- Lou Pangaro, MD will present ACE's guidelines for clerkship director resources
- Panelists will present findings/implications of the 06/07 national survey
- Barbara Schuster, MD will respond from the perspective of a longtime department head



The ACE Working Group: 2005

- Kim Ephgrave MD ASE
- Amy Brodkey MD ADMSEP
- Darlene Shaw PhD ADMSEP
- Richard Usatine MD STFM
- Katie Margo MD STFM
- Tom Painter MD CDIM
- Maya Hammoud MD APGO
- Chris White MD COMSEP
- Vern Juel MD CNCD
- Gary Beck MA ACE
- Kristi Ferguson PhD GEA



National Survey of Clerkship Director Demographics, Resources, and Professional Life

- **Kimberly Ephgrave, M.D.** Association for Surgical Education
- **Thomas Painter, M.D.** Clerkship Directors in Internal Medicine
- **Katherine Margo, M.D.** Society of Teachers of Family Medicine
- **Maya Hammoud, M.D.** Association of Professors of Gynecology and Obstetrics
- **Vern Juel, M.D.** Consortium of Neurology Clerkship Directors
- **Christopher White, M.D.** Council on Medical Student Education in Pediatrics
- **Darlene Shaw, Ph.D.** Association of Directors of Medical Student Education in Psychiatry
- **Louis Pangaro, M.D.** Alliance for Clinical Education



Clerkship Directors Demographics


Thomas D. Painter, MD
University of Pittsburgh
Clerkship Directors in Internal Medicine



Demographics


	Mean	Range
Age	47	30 – 70

Similar among specialties



Demographics

	Mean	Range
Years on faculty	12	0 – 43



Demographics

	Mean	Range
Years as CD	7	0 – 54

Shorter (less than 5 years) in
OB/Gynecology and Family Medicine




Academic Rank

- Professor 19%
 - Assistant Professor 38%
 - Associate Professor 38%
 - Instructor 3%
 - Other 3%
-
- More senior in Surgery
-




Tenure

- Non Tenure Track 74%
 - Tenure Track 26%
 - Tenured (of tenure track) 67%
-



% of Time Devoted to Clerkship

<ul style="list-style-type: none"> • Overall • Family Medicine • OB/Gynecology • Pediatrics • Psychiatry • Surgery • Internal Medicine 	<p>33%</p> <p>48%</p> <p>42%</p> <p>37%</p> <p>36%</p> <p>35%</p> <p>30%</p>
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Solo Clerkship Director

<ul style="list-style-type: none"> • Overall • Neurology • Psychiatry • Family Medicine • OB/Gynecology • Surgery • Pediatrics • Internal Medicine 	<p>48%</p> <p>81%</p> <p>60%</p> <p>49%</p> <p>48%</p> <p>47%</p> <p>41%</p> <p>31%</p>
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Compensation


	Mean	Range
% salary as CD	20	0 – 100
Decrease % Clinical	16	0 – 80




Administrative Support

	Mean	Range
% FTE	68%	0 – 300

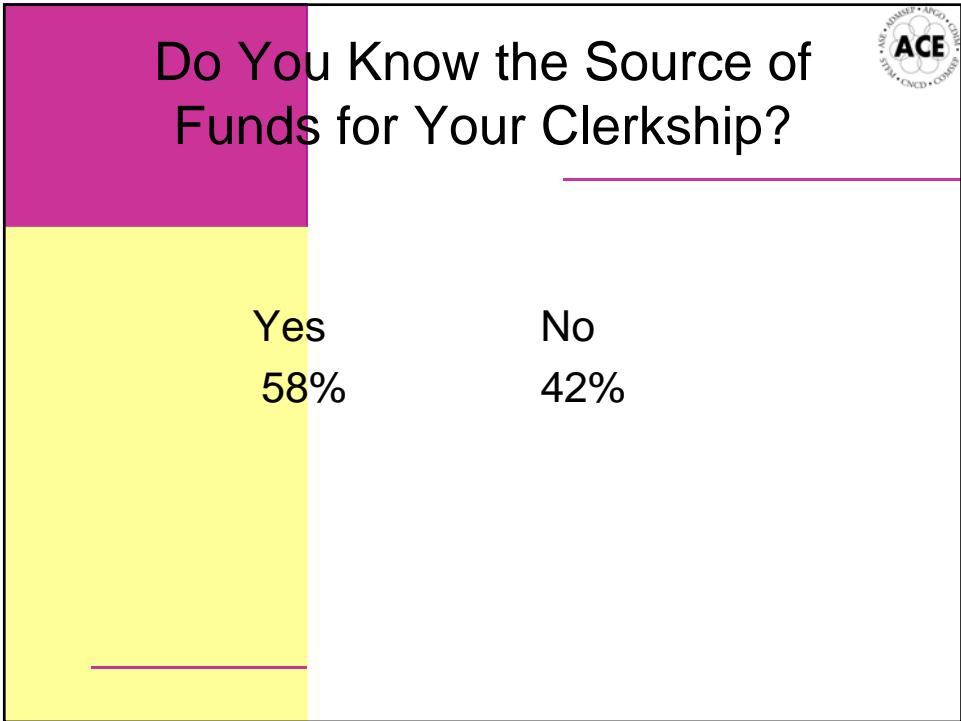
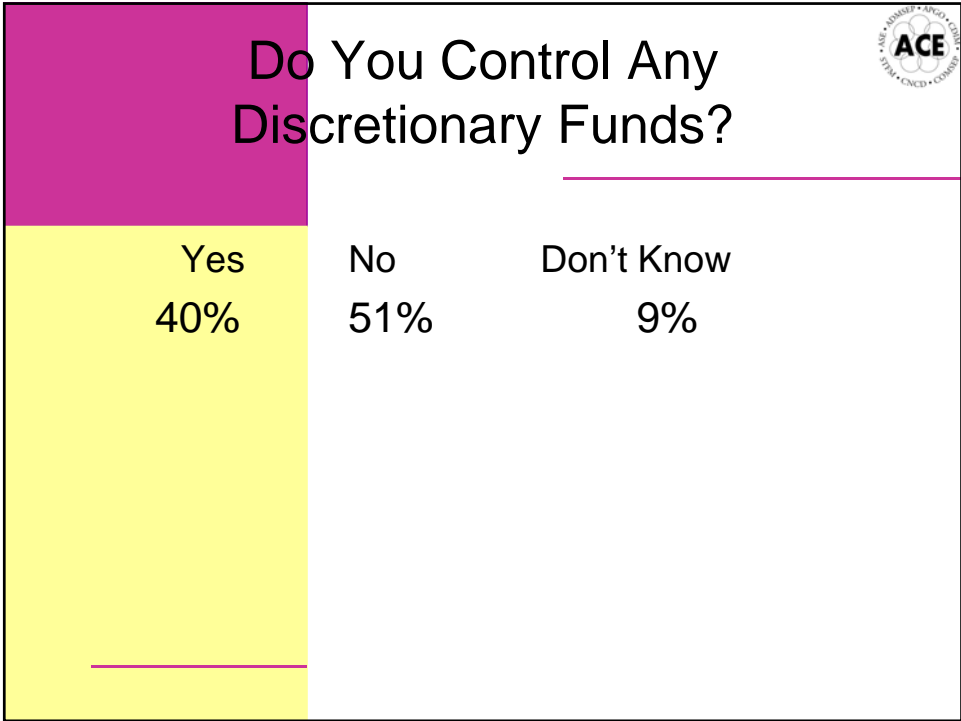
75% paid for by Department 25% by Dean



Professional Medical Educator	
• Yes	19%
• No	81%
• Paid for by Department	31%
• Paid for by Dean	38%



Is There a Line Item in Department Budget for Student Education?		
Yes	No	Don't Know
39%	20%	41%





Range of CDs Clinical Responsibilities

Katherine Margo, MD
University of Pennsylvania School
of Medicine
Society of Teachers
of Family Medicine



“Expectations paper” Recommendations

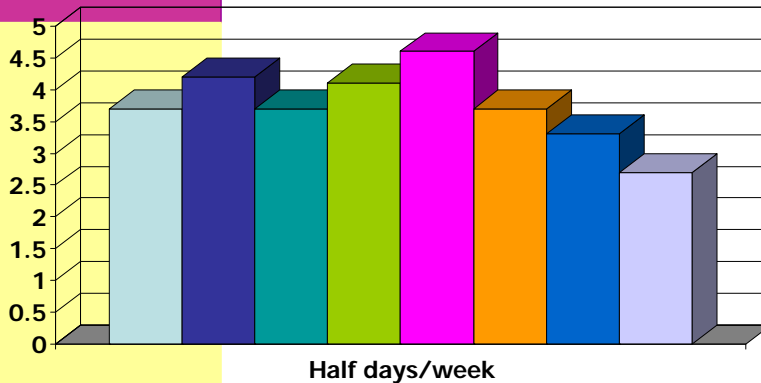
- 25% for administrative activities
- 25% for teaching and research
- Leaves 50% maximum for clinical activities



Our Survey

Questions asked	FM	IM	Neuro	Ob-gyn	Peds	Psych	Surg	Overall
12) How many half days of outpatient clinics do you staff in a typical week?	4.2	3.7	4.1	4.7	3.7	3.3	2.7	3.7
13) How many weeks per year do you typically have inpatient clinical responsibilities?	8.3	11.7	11.4	22.5	12.9	23.0	40.7	17.7

Outpatient Clinical Responsibilities



All
 Family Medicine
 Internal Medicine
 Neurology
 Obstetrics/Gynecol
 Pediatrics
 Psychiatry
 Surgery

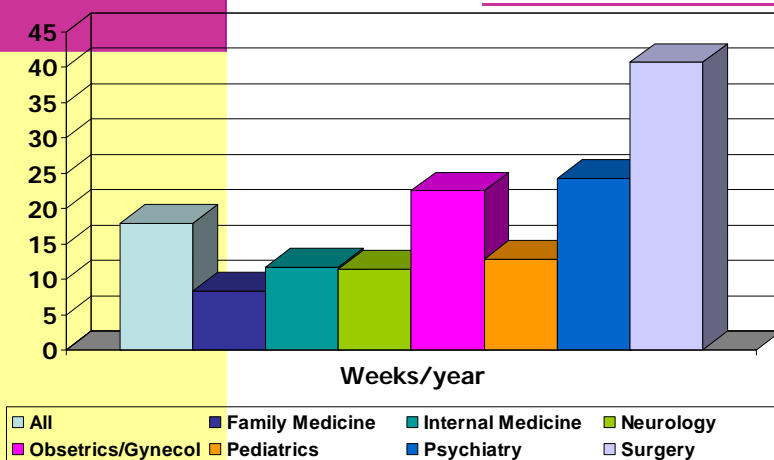


Outpatient Responsibilities

- Mean: 3.7 half days, Standard Deviation 2.1
- High: Obstetrics/Gynecology at 4.7 half days
- Low: Surgery at 2.7 half days



Inpatient Clinical Responsibilities



Inpatient Responsibilities and Discipline



- Overall mean 17.9 weeks/year, standard deviation 17.7
- Range 0-52
- High: Surgery @ 40.7 weeks/year
- Medium: Ob/Gyn and Psychiatry @ 23
- Low: Family Medicine, Internal Medicine, Neurology, Pediatrics @ < 13 weeks/year
- Hard to assess how much time involved

Results - Statistically Significant



- Half days of outpatient clinics
 - FM, IM, Neuro, OB > Psych, Surgery
- Weeks of inpatient clinical responsibilities
 - Surgery > OB, Psych, FM, IM, Neuro, Peds



How Are We Doing?

- Average - CDs spend 1/3 of year doing in-patient work (16-78%)
 - Average - CDs spend about 40% time in out-patient work (27-47%)
 - Likely more than the 50% recommended by expectations paper
-



Advantages of Clinical Time for CD

- Pays the department bills
 - Allows you to be an active teacher during clinical activities
 - Role model to students and other faculty
 - Experience first hand challenges of various clinical sites
 - Allows interaction with other preceptors and staff
-

Disadvantages of Amount of Clinical Time



- Always takes longer than time scheduled
- Conflict of interest if teaching some and not all students with regards to accessibility and evaluation
- Takes away time from doing other things - educational research especially

Research Associations



- Hemmer et al Acad Med 2001
 - Factors positively associated with publishing articles and receiving grants:
 - \leq Three clinical half days weekly
 - Fellowship/faculty development program
 - Teaching other courses
 - Discussing expectations with department chair



Conclusions

- CDs in general are doing more than the expectations paper recommends
 - Probably influences academic productivity
 - Not clear if it is realistic to decrease time
-



Academic Productivity and the Clerkship Director

Vern C. Juel, MD
Duke University Medical Center
Consortium of Neurology
Clerkship Directors

ACE Clerkship Survey: Academic productivity items



14) How many national or regional MEDICAL EDUCATION presentations have you contributed to in the last 5 years?

15) How many national or regional presentations IN TOTAL (not just related to medical education) have you contributed to in the last 5 years?

16) How many MEDICAL EDUCATION publications have you published in the last 5 years?

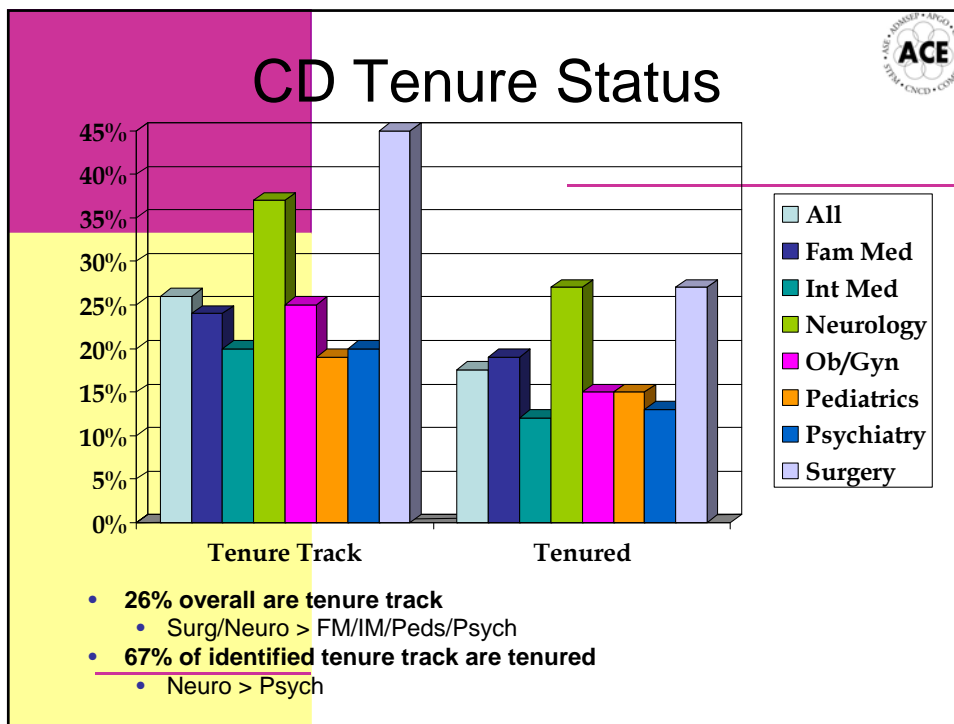
17) How many TOTAL publications (including those pertaining to medical education) do you have for the last 5 years?

20) If you have specific examples of how your clerkship director role has affected your professional development and/or satisfaction with your career, please describe: _____

Traditional Measures of Academic Productivity

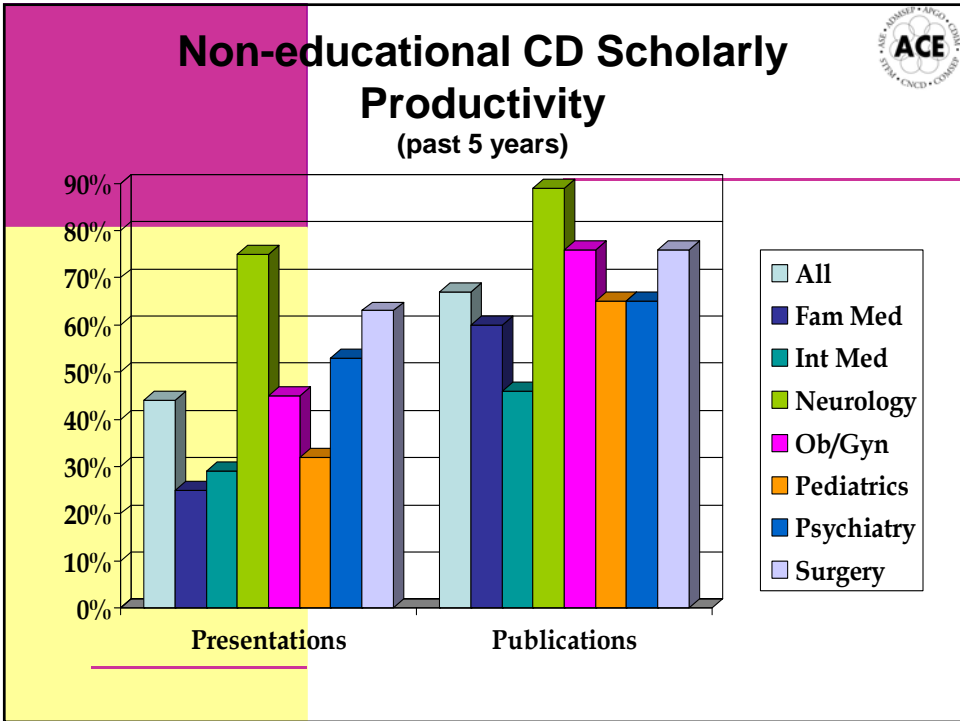
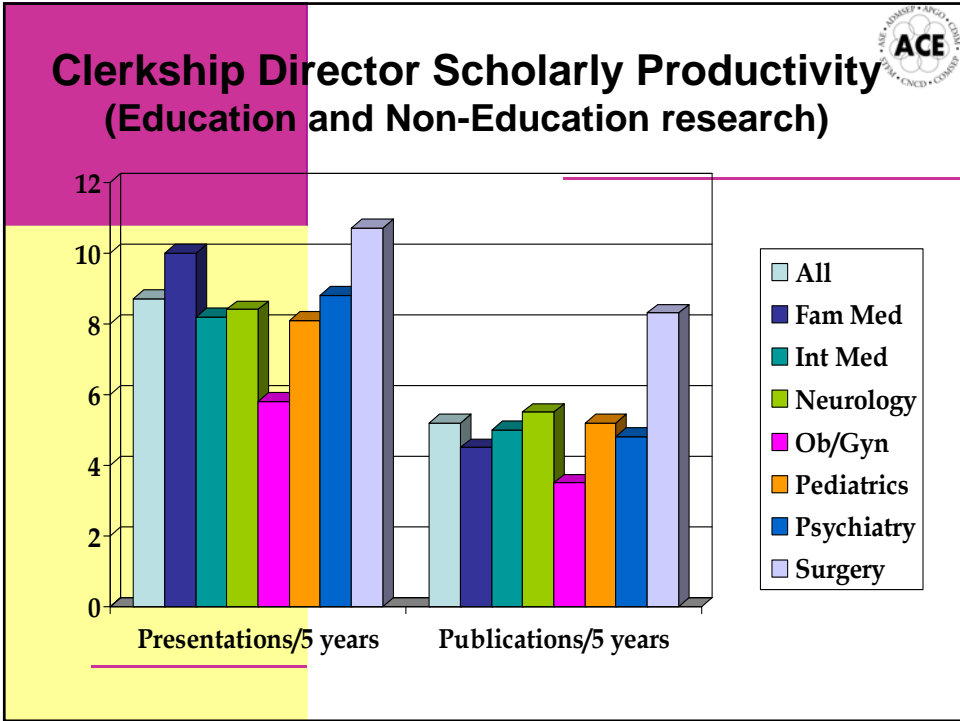


- Scholarly work
 - Peer-reviewed publications
 - Invited reviews/Book chapters
 - Books
 - Presentations
 - Scientific
 - Teaching
- Funding
 - Competitive grant support (e.g. NIH)
 - Other funding (gifts, contracts)



Q 20. Describe specific examples of how CD role has affected your professional development

- “Although teaching is satisfying, I spent years preparing for clinical research.”
- “My [non-educational] research output is zero since taking on the clerkship.”
- “[The clerkship] has really limited my time to do clinical research...I have had little time to devote to grant writing.”
- “...no time to do research...but it has increased my interest even further in teaching.”





Correlations with Academic Productivity

- **All academic presentations w/**
 - Age .09
 - Years on faculty .12
 - Years as CD .14
 - **Time staffing outpatient clinics -0.18**
- **All publications w/**
 - **Time staffing outpatient clinics -0.23**
 - Time staffing inpatient services .10
 - **FTE self-estimate for CD activity -0.13**
- *Correlation .08 to .10, p < .05 >.11, p < .01*



Conclusions

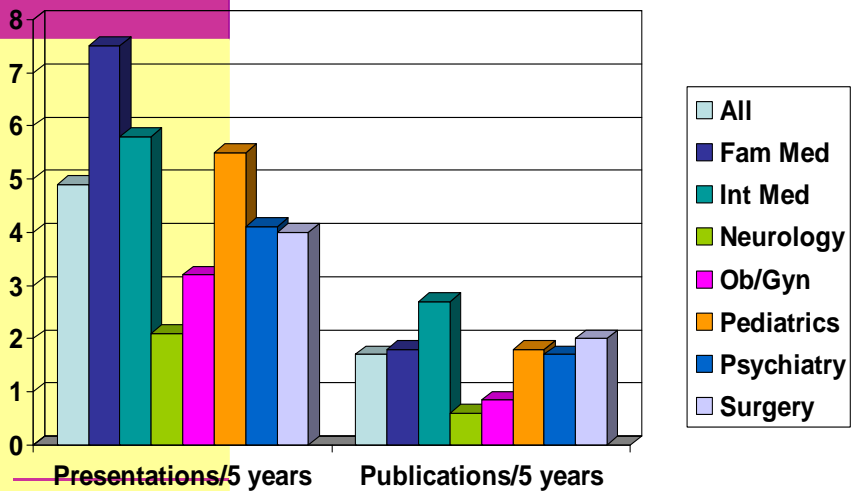
- Conflicts may exist between CD duties and non-education related academic productivity.
- Although the amount of academic productivity is not significantly different, there are wide differences in the relative amounts of education-related and non-education related scholarship between clinical disciplines.
- Excessive outpatient clinical responsibilities may impair CD academic productivity. Inpatient service time and academic productivity are correlated, however.

Clerkship Director Productivity in Educational Research



Chris White, MD
 Medical College of Georgia
 Council on Medical Student
 Education in Pediatrics

Clerkship Director Medical Education Scholarly Productivity





Pediatric Clerkship Director Scholarly Activity (5 years)

	1995	2004
Peer-reviewed articles	18.4	10.7(0-78)
Non Peer-reviewed articles	4.5	4.7 (0-65)
Book chapters (editor or author)	3.4	4.6 (0-42)
Books (editor or author)	0.5	0.4 (0-5)
Total publications in last 5 years	8.3	7.3 (0-58)

White et al. *Teaching & Learning in Medicine* 2007;19(3):264-270



Pediatric Clerkship Director Medical Education Productivity (5 years)

	1995	2004
Peer-reviewed articles	0.8	1.3 (0-12)
Non Peer-reviewed articles		0.5 (0-7)
Book chapters (editor or author)		0.4 (0-15)
Books (editor or author)		0.05 (0-1)
Total publications in last 5 years		1.6 (0-20)

White et al. *Teaching & Learning in Medicine* 2007;19(3):264-270

Reflections on Decreased Clerkship Director Academic Productivity

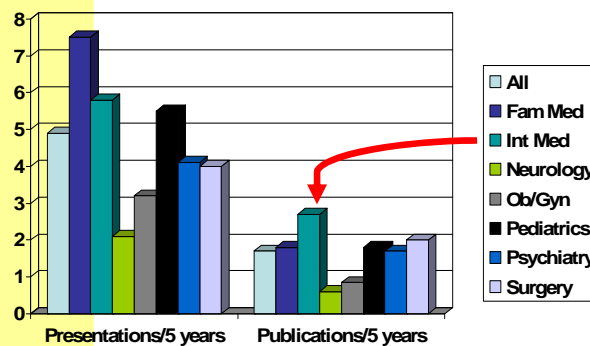


- Increased clinical demands
 - In ACE Survey, increased outpatient responsibilities were negatively correlated with all and medical education scholarly productivity
- Increased requirements on Clerkship Directors:
 - ED-2: Types of patients defined with oversight for ensuring all students meet objectives
 - ED-8: There must be comparable educational experiences and equivalent methods of evaluation across all instructional sites
- Fewer faculty tenured or on tenure track

Additional Reflections on Clerkship Director Academic Productivity



- Internal Medicine:
 - CDIM Annual Survey: Rich source of data for multiple publications each year



Additional Reflections on Clerkship Director Academic Productivity




- Internal Medicine:
 - CDIM Annual Survey: Rich source of data for multiple publications each year
- Online Resources
 - MedEdPORTAL
 - Family Medicine Digital Resources Library
 - Health Education Assets Library

Additional Reflections on Clerkship Director Academic Productivity



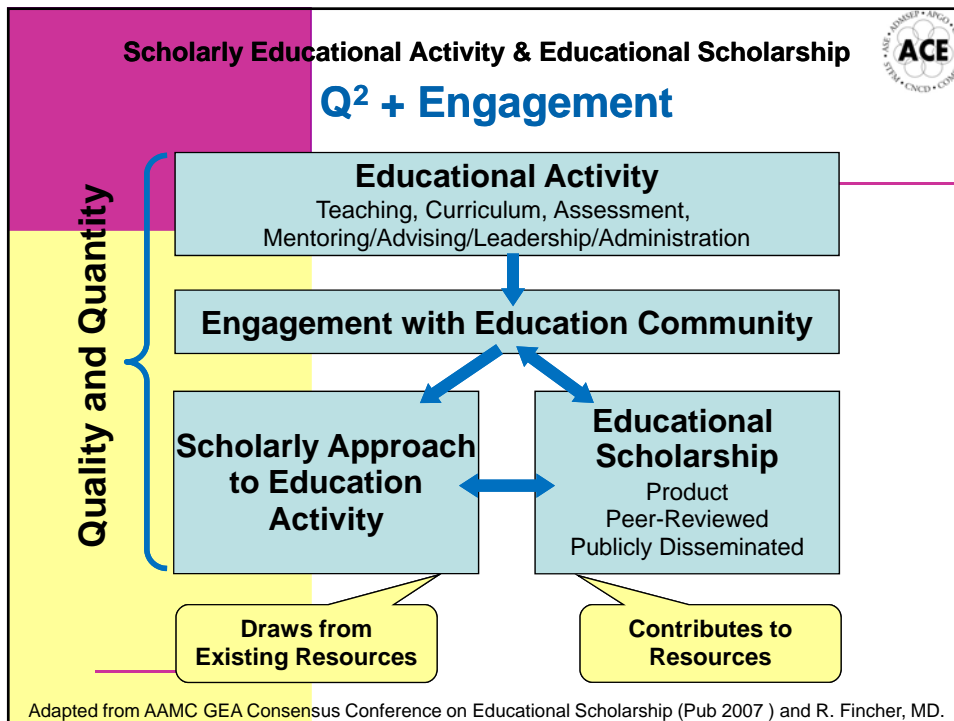
- Internal Medicine:
 - CDIM Annual Survey: Rich source of data for multiple publications each year
- Online Resources
 - MedEdPORTAL
 - Family Medicine Digital Resources Library
 - Health Education Assets Library
- Non-Traditional Scholarship: Example → Pediatrics
 - CLIPP (Computer-Assisted Instruction)
 - Curriculum Development
 - Workshops

Pediatric Non-Traditional Scholarly Activity (5 years)

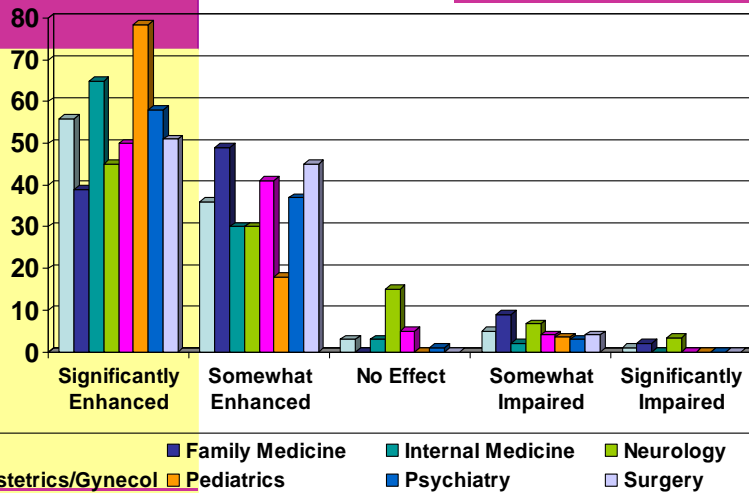


	# of Products			# Peer-reviewed and/or studied		
Curriculum	<i>113</i>	<i>2.7</i>	(0-40)	57	0.5	(0-6)
CD-ROM	57	0.8	(0-16)	40	0.2	(0-6)
Web site	83	0.6	(0-4)	44	0.09	(0-2)
Audio tape	65	0.25	(0-3)	41	0.02	(0-1)
Video tape	69	0.5	(0-5)	39	0.07	(0-1)
CAI	68	0.7	(0-10)	<i>46</i>	<i>1.43</i>	<i>(0-46)</i>
Other media	59	0.2	(0-2)	39	0.03	(0-1)
Workshops	<i>102</i>	<i>11.6</i>	<i>(0-250)</i>	54	0.8	(0-5)
Peer Reviewer	<i>71</i>	<i>1.6</i>	<i>(0-15)</i>			

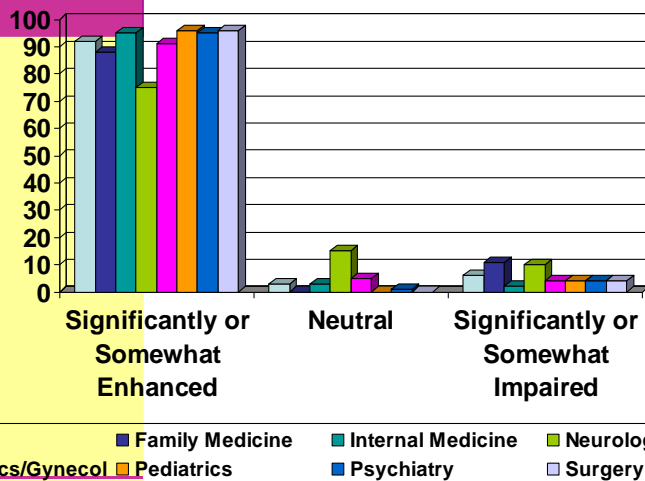
White et al. *Teaching & Learning in Medicine* 2007;19(3):264-270



Impact of Clerkship Role on Work Satisfaction



Impact of Clerkship Role on Work Satisfaction





Discipline Comparisons

- Internal Medicine, Pediatrics, and Psychiatry were significantly more likely than Family Medicine and Neurology to report the CD role enhanced satisfaction with work.
 - $p < .001$
-



Predictors of Enhanced Work Satisfaction from CD Role

- Stepwise regression analysis
 - All variables that had significant bivariate correlations with question 19
 - Variables: Effect on professional advancement, years as CD, % effort devoted to CD role, decreased % of time in clinic, age, years on faculty, salary support for others, academic rank, overall number of publications, medical education publications, overall number of presentations, and medical education presentations
-



Stepwise Regression Analysis Predicting Enhanced Satisfaction with Work from CD Role

Step	Variable Entered	Partial r-square	Model r-square	p-value
1	CD role has affected prof advancement	.1879	.1879	.0001
2	Years as CD	.0349	.2228	.0002
3	% effort devoted to CD role	.0239	.2466	.0018
4	Decreased % of time spent in clinic	.0086	.2552	.0580

Age, years on faculty, salary support for others, academic rank, overall number of publications, medical education publications, overall number of presentations, and medical education presentations were entered but were not statistically significant in the full model.



Leadership Opportunities for Clerkship Directors

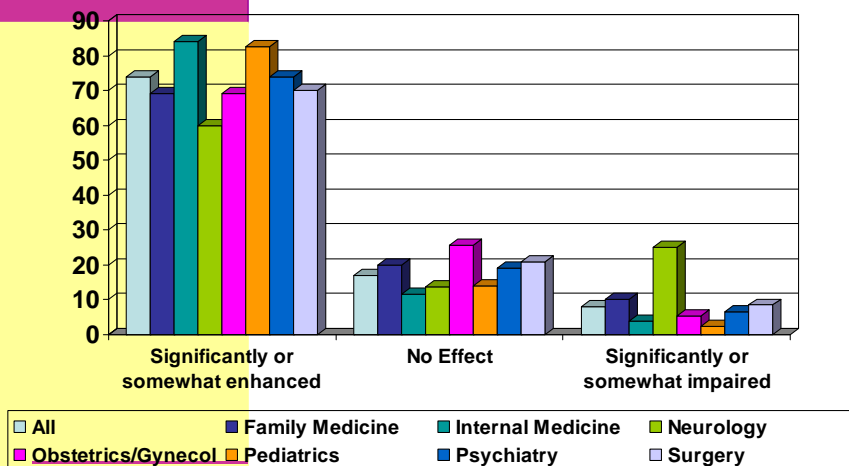
Maya Hammoud, MD
Weill-Cornell Medical College in
Qatar
Association of Professors of
Gynecology and Obstetrics

Leadership Opportunities for Clerkship Directors



- Role and responsibilities of Clerkship Directors allow for some unique opportunities for professional advancement at many levels:
 - Department
 - School/Institution
 - National organizations

Impact of Clerkship Role on Professional Advancement



Leadership Opportunities at Department Level



- Integral role in forming the medical student education program
- Integral role in Faculty (and Resident) Development Programs
- Education Leader in the department including opportunity to be Director of an Education Division
- Administrative role in budgeting, clinical education costs, and securing educational space

Leadership Opportunities at School Level



- Role in school-wide education committees:
 - Curriculum Committee
 - Promotion and Graduation Committee
 - LCME self-study
 - Curriculum Review Committees
 - Leading “Introduction to Patient Courses”
 - Directing/leading a Curriculum Component or Year
 - School Executive Committees
- Role in multidisciplinary programs and initiatives

Leadership Opportunities at National Level



- Participation in National Organizations within own discipline and interdisciplinary
 - As a participant
 - As a presenter
 - As an organizer
 - Getting involved in educational research within own institution and collaborations
 - Acquiring key ingredients relevant to medical school deanship and national leadership roles
-

Perspectives from Departmental Administration



Barbara Schuster, MD
Dean, College of Medicine
Medical College of Georgia –
Athens Campus



Thank you!

TIME FOR DISCUSSION
AND QUESTIONS
