

The Wake Forest Health Professions Education Institute's Educator Conference: Supporting a community of educators by providing an outlet for dissemination of teaching scholarship

Roy E. Strowd, M.D., M.Ed.¹

Introduction

Faculty development is vital to the success of academic physicians. Continuing professional development (CPD) brings together continuing medical education and faculty development to prepare faculty to fulfill the academic missions including patient care, education, research, and health advocacy. CPD for clinician educators is critical yet often under-resourced.¹⁻³ In particular, opportunities for educators to generate, disseminate, and critique teaching scholarship have been identified as a major career development gap.^{4,5}

Over the last 30 years, definitions of scholarship have evolved. In 1988, the World Federation for Medical Education identified a need to “train teachers as educators, not content experts alone, and reward excellence in this field as fully as excellence in biomedical research or clinical practice.”⁶ Despite significant advances to change our understanding of scholarship in medical education, major gaps remain for faculty. Scholarship in medical education may include any of the four categories defined by Boyer: scholarship of discovery, integration, application, and teaching.⁷ Scholarship in any of these areas as defined by Glassick should have clear goals, be adequately prepared, use appropriate methods, achieve outstanding results, be communicated effectively, and allow for reflective critique.⁸ Most recently, a consensus conference statement by the Association of American Medical Colleges identified five educational activities commonly identified as scholarship by health educators including: teaching, curriculum development, advising and mentoring, education leadership and administration, and learner assessment.⁹ In short, scholarly work spans the many roles of a health educator and must be made public, be available for peer review and critique, and allow scholars to build upon the work of other educators. Infrastructure to support medical educators is critical to facilitate public dissemination. This may occur through grand rounds, conferences, meetings, television or radio media, newspapers or interviews, blogs, podcasts, e-Learning platforms, and others.¹⁰⁻¹² Online methods include both traditional peer-reviewed publications such as MedEdPORTAL which uses citation metrics or non-periodical methods for web resources or videos that may incorporate alternative metrics including number of downloads, “clicks”, or views.^{11,13} Academic institutions recommend use of educator portfolios for tracking the quantity and quality of teaching efforts for purposes of promotion.¹⁴ However, these resources often do not sufficiently protect and support teachers to produce scholarly work. Salary support principally protects time to design, deliver, and ensure certification of training programs for program directors, clerkship directors, or core teaching faculty.^{15,16} There has been a proliferation of education academies and societies but often limited local infrastructure.¹⁷

Structured programs that build communities of educators can address these

¹Departments of Neurology and Internal Medicine, Section on Hematology and Oncology, Wake Forest School of Medicine, Comprehensive Cancer Center of Wake Forest University, Winston Salem, NC

Address Correspondence To:
Roy Strowd, M.D., M.Ed.
Director, Health Professions Education Institute
Department of Neurology
Wake Forest School of Medicine
Winston Salem, NC 27104
rstrowd@wakehealth.edu

gaps by providing a forum for dissemination of evidence-based teaching, facilitating interprofessional collaboration, and generating mechanisms for dissemination and peer review of education scholarship.^{18,19} This paper describes the development and implementation of an institutional Educator Conference as a space to publicize works, generate peer review, and facilitate reflective critique.

Design of the Educator Conference

In 2015, Wake Forest School of Medicine's Faculty Forward Survey identified faculty development as a major institutional need. A 2016 survey of departments conducted by the institution's Faculty Development Committee identified teaching techniques, assessment and feedback, student evaluation, and forums for dissemination as topics of particular interest. To address these gaps in medical education scholarship, the first annual Educator Conference was hosted on Monday, April 22nd, 2019 by the Wake Forest Health Professions Education Institute (HPEI). The meeting hosted a community of educators who shared their work and could build on other's teaching practices. The conference was convened with three primary aims: (1) to create a public forum for dissemination of teaching scholarship that has been developed at Wake Forest, (2) to facilitate peer review and critique of teaching activities, and (3) to generate an interprofessional community of educators that will exchange best-practices and build on each other's teaching practices through collaboration.

An interdisciplinary planning committee was convened with representatives from the Wake Forest Schools of Medicine, Physician Assistant Program, Nurse Anesthesia and Doctor of Nursing Practice Programs, the Graduate School of Arts and Sciences, and Pharmacy Program. A half-day conference was recommended including abstract submissions, platform and poster presentations, and skill-building workshops to address knowledge and skill gaps.

Summary of Conference Feasibility, Attendance, and Impact

Of the 91 registered participants, 79 attended the conference including 43 physicians (57%), 14 physician assistants (18%), eight healthcare education staff (11%), six students (7%), two nurses (3%), two graduate school faculty (3%), and one

pharmacist (1%). Of these, 34 (42%) submitted a peer-reviewed abstract, six were selected for oral platform presentation, 17 for poster presentation, and 10 for roundtable presentation and discussion. Abstract presenters were from the School of Medicine faculty (n=13), School of Medicine students (n=6), Physician Assistant Program (n=5), School of Medicine housestaff (n=3), Pharmacy Program (n=2), Healthcare Education (n=2), CRNA Program (n=1), and Nursing (n=1). Four breakout workshops provided skill-building in evidence-based teaching. Seventeen attendees completed the post-conference survey with 88% agreeing that the content was relevant, 94% agreeing that the presentations stimulated interest in medical education, 94% agreeing that the poster presentation allowed for public dissemination of work, and 76% agreeing that they were able to identify a potential collaborator. The impact of the conference on each of the three program aims is provided with a description of how this responds to current gaps for academic educators.

Aim 1: Creating a Public Forum for Dissemination

Problem: National and regional meetings exist for medical educators, but few institutional forums are available for teachers to present their work to an interprofessional audience that includes educators from across teaching disciplines. At Wake Forest, the HPEI Education Grand Rounds began in 2016 to fill this gap and provide a quarterly forum for presentation and public dialogue. However, the grand rounds series invites only a limited number of speakers to varied audiences and may not include all interested trainees who may want to present work publically.

Solution: In response, the Educator Conference kicked off with an hour of platform presentations. These oral talks provided students, trainees, and faculty with a public forum and moderated discussion to disseminate their medical education research and curriculum innovation scholarship (Figure 1).

Medical Education Research Oral Presentations

Oral presentations opened the conference and set a high bar for scholarship presented throughout the meeting. Topics included burnout, communication skills training, and interprofessional collaborative practice. Margaux Wooster (School of Medicine, Class of 2019) identified an unintended consequence of rising burnout rates on how students learn



Figure 1. Educator Conference creating a forum for interdisciplinary collaboration and dissemination

by linking higher burnout to a loss of self-regulated learning abilities in medical students. Christine Marlow (WFU, Class of 2021) proposed the use of patient teach-back to help empower patients to be teachers and allow students to improve their communication skills in clinical clerkships. Dr. Courtney Brown (Faculty, CRNA Program) showed how interprofessional education through an inquiry-based learning method improves collaborative practice and boosts attitudes toward team-based care.

Curricular Innovations Oral Presentations

Curricular innovations were also presented and highlighted innovative technologies that are improving how students learn, how residents are mentored, and how trainees learn through patient care. Dr. Rita Poon (resident, Internal Medicine) discussed a real-time QR code tool for identifying and coaching struggling interns which has expanded its use within the medical school. Dr. Brandon Stacey (faculty, Internal Medicine - Cardiology) presented data on the impact of an interactive audience response system to improve student recognition of cardiac murmurs and boost academic achievement. Dr. Nancy Denizard-Thompson (faculty, Internal Medicine) and Sarah Martin (School of Medicine, Class of 2020) provided a discharge checklist that allowed medical students to participate in discharge planning, identify obstacles to discharge, and learn transitions of care.

Aim 2: Facilitating Peer Review and Critique of Teaching Activities through a Call for Abstracts

Problem: Effective scholarly teaching takes place in a

community that generates data, critiques findings, and engages in public discourse.^{20,21} Peer review is important in evaluating and improving the quality of scholarship and has been shown to provide meaningful faculty development in the area of clinical teaching.²² However, limited opportunities exist for formative peer review in education scholarship.

Solution: The Educator Conference included structured peer review of submitted abstracts to provide opportunities for peer reviewers to engage in critical appraisal of education literature and for participants to receive reflective critique. In addition to oral and poster presentations, 10 Works in Progress were further peer reviewed at the meeting in a roundtable discussion that paired senior and junior teachers for multidisciplinary reviews of their abstracts.

Call for Abstracts

The Educator Conference Call for Abstracts requested structured submissions in three topic areas including medical education research, curricular innovations, and works in progress. In total, 33 abstracts were submitted and reviewed by 12 education experts from the School of Medicine, Nursing, PA School, Department of Medical Education, and Pharmacy Program. Abstract reviews provided an opportunity to recognize faculty reviewers and provide critique to participants. Each abstract decision included comments and suggested revisions to be considered prior to presentation at the conference.

Poster Presentations

Poster presentations highlighted the tremendous breadth and depth of medical education scholarship being conducted at Wake Forest and allowed an opportunity for educators to discuss and critique their work. Fourteen posters were presented from the School of Medicine, four from the PA program, three from Pharmacy, one from CRNA, and one from the Healthcare Education staff. A range of topics were spanned, such as high school immersion programs, longitudinal skills training, health disparities, mentoring, healthcare management and leadership, interprofessional education, and professional identity formation.

Works in Progress (WIP) Workshops

WIP are early innovative projects that have not yet been completed but have high potential to change the way we

teach, train, and educate health professionals in the future. These projects are early in development and in need of critique and debate with colleagues. This WIP roundtable workshop allowed teachers to present their work, receive constructive comments, and identify collaborators to drive these projects towards implementation and completion. Topics included a resiliency training curriculum, a workflow for student integration into ambulatory clinics, medical Spanish certificate program, and an obstetrics and gynecology bootcamp curriculum.

Aim 3: Creating an Interprofessional Community of Educators

Problem: Learning today increasingly occurs through participation and social interaction. In business, Communities of Practice (CoP) have been promoted as a mechanism for sharing knowledge efficiently, sparking innovation, reducing the learning curve for new staff, and creating social capital in employees.²³ CoP have increasingly been integrated into healthcare to guide management decisions, improve performance, and facilitate learning.²⁴ In medicine, many CoP exist (e.g. institutional department or division, state specialty society, national society) which often exert a stronger influence on educators than an institutional community of teachers.

Solution: The Educator Conference intentionally aimed to create an interprofessional Community of Educators (CoE). Skill-building workshops brought together educators from different health professions programs (e.g. School of Medicine, PA Program, etc). In these workshops, attendees discussed common topics and were able to network with a community of educators.

Skill-Building Workshops

Workshops included topics that would appeal to four different communities of educators: clinical educators, non-clinical educators, early career educators, and mid-career educators. For clinical CoE, a clinical breakout session focused on “How to integrate a student into ambulatory clinic,” and for non-clinical CoE, a concurrent classroom breakout session focused on “How to write multiple choice questions.” A skill development breakout session titled “Writing, reviewing, and critiquing the education literature” targeted a community of mid-career educators. Meanwhile, junior and senior

educators engaged in the WIP workshop.

Lessons Learned and Future Directions

Several lessons were learned. Attendees requested that breakout sessions be offered in both the morning and afternoons to allow for increased flexibility required to balance clinical responsibilities. Guided poster tours were offered to create structured opportunities to network and review posters but were under-utilized by attendees who informally reviewed poster presentations. Trainees were heavily involved in the conference but desired dedicated sessions that would allow them to engage with other trainees. Future conferences will be adjusted to respond to these concerns.

Conclusion

Ultimately, the HPEI Educator Conference successfully achieved its mission. As a result, institutional investment was pledged to use this forum to recognize outstanding educators. Four top abstract awards were presented to Margaux Wooster (School of Medicine, Class of 2019), Christine Marlow (WFU, Class of 2021), Dr. Rita Poon (PGY-4, Assistant Chief of Medicine) and Dr. Brandon Stacey (Associate Professor, Internal Medicine – Cardiology). Two Excellence in Education Scholarship Awards were also presented. The Early Career Excellence in Education Scholarship award recognized two current trainees with strong future potential as educators: Dr. Rita Poon and Dr. Bitu Nickkholgh (Postdoctoral Research, Instruction, and Mentoring Experience scholar). The Excellence in Education Scholarship award recognized two faculty members who have demonstrated commitment to education scholarship: Ms. Sobia Hussaini (PA Studies) and Dr. Vera Luther (Associate Professor, Internal Medicine - Infectious Disease).

In summary, institutions need infrastructure to support medical educators and foster early and sustained career development. The Wake Forest Educator Conference was successful in adding to existing infrastructure to support scholarship in medical education. A full list of peer-reviewed abstracts highlights the breadth and depth of educational scholarship that was presented (<https://school.wakehealth.edu/About-the-School/Faculty-Affairs/Faculty-Development/Health-Professions-Education-Institute/2019-Education-Conference>).

Disclosures

No financial support given. Authors report no conflicts of interest.

References

- Chen HC, Wamsley MA, Azzam A, Julian K, Irby DM, O'Sullivan PS. The Health Professions Education Pathway: Preparing Students, Residents, and Fellows to Become Future Educators. *Teach Learn Med.* 2017;29(2):216-227. doi:10.1080/10401334.2016.1230500
- Swanwick T, McKimm J. Professional development of medical educators. *Br J Hosp Med.* 2010;71(3):164-168. doi:10.12968/hmed.2010.71.3.46982
- Roberts DH, Schwartzstein RM, Weinberger SE. Career Development for the Clinician-Educator. Optimizing Impact and Maximizing Success. *Ann Am Thorac Soc.* 2014;11(2):254-259. doi:10.1513/AnnalsATS.201309-322OT
- Ander DS, Love JN. The evolving definition of education scholarship: What the clinician educator needs to know. *West J Emerg Med.* 2017;18(1):1-3. doi:10.5811/westjem.2016.12.33326
- Darden AG, DeLeon SD. Transitioning From Medical Educator to Scholarship in Medical Education. *Am J Med Sci.* 2017;353(2):137-144. doi:10.1016/j.amjms.2016.11.015
- Bauman MD, Howell LP, Villablanca AC. The Women in Medicine and Health Science Program. *Acad Med.* 2014;89(11):1462-1466. doi:10.1097/ACM.0000000000000403
- Campion MW, Bhasin RM, Beaudette DJ, Benjamin EJ. Mid-career faculty development in academic medicine: How does it impact faculty and institutional vitality? *J Fac Dev.* 2016;30(3):49-64. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5145005/pdf/nihms-826668.pdf>.
- World Federation for Medical Education. The Edinburgh declaration. *Med Educ.* 1988;22(5):481-2. <https://wfme.org/download/the-edinburgh-declaration/?wpdmdl=898&refresh=5d55b71f8eab51565898527>. Accessed August 15, 2019.
- Boyer EL. Scholarship Reconsidered : Priorities of the Professoriate. Carnegie Foundation for the Advancement of Teaching; 1990. <https://eric.ed.gov/?id=ED326149>. Accessed September 1, 2019.
- Glassick CE. Boyer's expanded definitions of scholarship, the standards for assessing scholarship, and the elusiveness of the scholarship of teaching. *Acad Med.* 2000;75(9):877-880. doi:10.1097/00001888-200009000-00007
- Simpson D, Fincher R-ME, Hafler JP, et al. Advancing educators and education by defining the components and evidence associated with educational scholarship. *Med Educ.* 2007;41(10):1002-1009. doi:10.1111/j.1365-2923.2007.02844.x
- Brownson RC, Eyler AA, Harris JK, Moore JB, Tabak RG. Getting the Word Out: New Approaches for Disseminating Public Health Science. *J Public Health Manag Pract.* 2018;24(2):102-111. doi:10.1097/PHH.0000000000000673
- Amath A, Ambacher K, Leddy JJ, Wood TJ, Ramnanan CJ. Comparing alternative and traditional dissemination metrics in medical education. *Med Educ.* 2017;51(9):935-941. doi:10.1111/medu.13359
- Thammasitboon S, Ligon BL, Singhal G, Schutze GE, Turner TL. Creating a medical education enterprise: leveling the playing fields of medical education vs. medical science research within core missions. *Med Educ Online.* 2017;22(1):1377038. doi:10.1080/10872981.2017.1377038
- Reynolds RJ, Candler CS. MedEdPORTAL: Educational scholarship for teaching. *J Contin Educ Health Prof.* 2008;28(2):91-94. doi:10.1002/chp.163
- Moore JB, Maddock JE, Brownson RC. The Role of Dissemination in Promotion and Tenure for Public Health. *J Public Health Manag Pract.* 2018;24(1):1-3. doi:10.1097/PHH.0000000000000691
- Gottlieb M, Dehon E, Jordan J, et al. Getting Published in Medical Education: Overcoming Barriers to Scholarly Production. *West J Emerg Med.* 2018;19(1):1-6. doi:10.5811/westjem.2017.11.35253
- Schwartz A, Young R, Hicks PJ, Appd Learn FA. Medical education practice-based research networks: Facilitating collaborative research. *Med Teach.* 2016;38(1):64-74. doi:10.3109/0142159X.2014.970991
- Searle NS, Thompson BM, Friedland JA, et al. The Prevalence and Practice of Academies of Medical Educators: A Survey of U.S. Medical Schools. *Acad Med.* 2010;85(1):48-56. doi:10.1097/ACM.0b013e3181c4846b
- Karimbux NY. Promoting the Scholarship of Teaching and Learning Through Peer Review and Public Presentation. *J Dent Educ.* 2014;78(10).
- Schimanski LA, Alperin JP. The evaluation of scholarship in academic promotion and tenure processes: Past, present, and future [version 1; referees: 2 approved]. *F1000Research.* 2018;7. doi:10.12688/f1000research.16493.1
- Moon JY, Schullo-Feulner AM, Kolar C, et al. Supporting formative peer review of clinical teaching through a focus on process. *Curr Pharm Teach Learn.* 2018;10(6):771-778. doi:10.1016/j.cptl.2018.03.011
- Lesser EL, Storck J. Communities of practice and organizational performance. *IBM Syst J.* 2001;40(4):831-841. doi:10.1147/sj.404.0831
- Ranmuthugala G, Plumb JJ, Cunningham FC, Georgiou A, Westbrook JJ, Braithwaite J. How and why are communities of practice established in the healthcare sector? A systematic review of the literature. *BMC Health Serv Res.* 2011;11:273. doi:10.1186/1472-6963-11-273