Health Disparities Faculty Scholars Program

BACKGROUND

Clinician-Educators face many challenges regarding their ability to produce Educational Scholarship

- Lack of Skills and Experience
- Lack of Resources and Mentoring
- Limited Dedicated Time

Assumptions

External Factors

THE MAIN QUESTION

How can a family medicine department support busy clinician-educator faculty in overcoming barriers to producing written educational scholarship?

Projects will support the mission of the department, especially health disparities

Lack of written scholarship a barrier to promotion for clinician-educator faculty

• Faculty will need time, mentoring, and skill development

Standards from Peer-Reviewed Educational Research

Healthy People 2010 Objectives

INTERVENTION

Health Disparities Faculty Scholars Program created in 2005 to enhance faculty knowledge and skills in educational scholarship and to increase publications in educational research among clinician educators at an urban family medicine department.

ASSESSMENT

How do we assess the progress, outcome, and impact of the Health Disparities Faculty Scholars Program?

LOGIC MODEL FOR FOSTERING & PROMOTING SCHOLARSHIP THE HEALTH DISPARITIES FACULTY SCHOLARS PROGRAM

MEDIUM TERM SHORT TERM TARGET AUDIENCE **RESOURCES ACTIVITIES IMPACT OUTCOMES OUTCOMES** Submission of the project Department faculty buy-in Recruit/Select scholars Increased confidence, comfort, and ability with as a manuscript for & support Small group meetings various aspects of the publication Past scholars research process & Project updates with Submission to a Digital scholarship skills: ie. HRSA grant support group feedback Resource Library, if •Educational research Faculty leadership and applicable Manuscript drafts methods support staff (MD, EdD, presented in segments Presentation or poster MPH) IRB submission Increase the quality presentation at a Individual meetings and quantity of faculty Creating a scholarly professional meeting Program coordinator educational scholarship Organization & logistic poster in the department. Individual faculty project Moving from 0-1 meetings Scholars will develop coordination publication AND Project specific content and implement an meetings educational project idea Expertise in care of the Recognition of the Expanding a network of underserved and cultural Individual colleagues with similar quality of educational Educational product to interests or professional communication and competency scholarship in the share with regional and activities follow-up on project department by national national colleagues Faculty mentors from the progress colleagues Defining a "Line of Community, Clinical, i.e. a practice Scholarship" **Education and Research** Skills seminars/workshops management curriculum **Divisions** Consultation and guidance i.e. online magazine Faculty protected time – from an external Building internal and 26 half-days for 1 year educational expert external networks National organizations and Structured project work experts supporting time scholars interests

Supported by The AAU Faculty Scholars & Health Disparities Program HRSA Grant # D54HP05263

• Scholars will be able to follow through with their projects without in-depth individual consultations

• Barriers to Productivity – Clinical and teaching demands; lack of insight by the scholar regarding skill level

• Faculty are inexperienced with educational publication and research

Barriers to Education – Uneven skill level of scholars based on previous experience

Barriers to Sustainability – Grant funding, faculty turnover

needed to achieve success