

SCHOLARLY ACTIVITY FOR CORE FACULTY: YOU KNOW IT WHEN YOU SEE IT

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Disclosure statement:

The author is a member of the ACGME Anesthesiology Residency Review Committee (RRC). The opinions expressed in this document, and in the presentation, are the author's opinions and not those of the RRC.

Objective:

Upon completion of this presentation, participants will be able to describe endeavors that constitute scholarly activity for faculty members.

Definition of Scholarly Activity

Medical educators have long discussed what constitutes scholarly activity for academic clinicians. In 1990, Boyer described 4 components of scholarship: discovery (meaning advancing knowledge), integration (meaning synthesizing knowledge), applications (meaning applying existing knowledge), and teaching (meaning dissemination of exiting knowledge).¹ In 2012, Grady et al. reviewed faculty promotion criteria at representative US medical schools as well as the existing scholarly activity rubrics of 6 RRCs.² They proposed a baseline rubric for all ACGME RRCs based on Boyer's 4 components of scholarship (Figure 1).

Figure 1.

Component of Scholarship	Examples	Assessment Criteria
Discovery = advancing knowledge	Published paper Work resulting in abstract	All 4 components of scholarship should be present when looking at the sum of the <u>core faculty</u> members' work Each <u>resident</u> should be exposed to each of the 4 components of scholarship and should complete at least one scholarly activity during the residency training period More stringent requirements may be instituted by the specialty-specific RRC as needed
Integration = synthesizing knowledge	Case studies or reports Patient education projects	
Application = applying existing knowledge	Participation in national guideline panels Participation in professional societies	
Teaching = disseminating current medical knowledge	Preparing and delivering lecture(s) Curriculum development Development of web-based modules, etc	

ACGME Program Requirements:

The ACGME Program Requirements for Graduate Medical Education in Anesthesiology³ state that the Program Director “must have significant academic achievements in anesthesiology, such as publications, the development of educational programs, or the conduct of research” (II.A.3.e). The Program Requirements go on to state that

“Some members of the faculty should also demonstrate scholarship by one or more of the following: peer-reviewed funding, publication of original research or review articles in peer-reviewed journals, or chapters in text books; publication or presentation of case reports or clinical series at local, regional, or national professional and scientific meetings; or participation in national committees or educational organizations” (II.B.5.b).

ACGME Accreditation Data System:

The ACGME ADS (Accreditation Data System) requires that programs annually upload information about faculty scholarly activity (Figure 2).

Figure 2.

Template for Faculty Scholarly Activity that occurred during the previous academic year between 7/1/2013-6/30/2014										
Faculty Member	Pub Med Ids (assigned by PubMed) for articles published in the previous academic year. List up to 4. Pub Med ID (PMID) is a unique number assigned to each PubMed record. This is generally an 8 character numeric number. The PubMed Central reference number (PMCID) is different from the PubMed reference number (PMID). PubMed Central is an index of full-text papers, while PubMed is an index of abstracts.				Number of abstracts, posters, and presentations given at international, national, or regional meetings in the previous academic year	Number of other presentations given (grand rounds, invited professorships), materials developed (such as computer-based modules), or work presented in non-peer review publications in the previous academic year. Articles without PMIDs should be counted in this section. This will include publication which are peer reviewed but not recognized by the National Library of Medicine.	Number of chapters or textbooks published in the previous academic year	Number of grants for which faculty member had a leadership role (PI, Co-PI, or site director) in the previous academic year	Had an active leadership role (such as serving on committees or governing boards) in national medical organizations or served as reviewer or editorial board member for a peer-reviewed journal in the previous academic year	In the previous academic year, held responsibility for seminars, conference series, or course coordination (such as arrangement of presentations and speakers, organization of materials, assessment of participants' performance) for any didactic training within the sponsoring institution or program. This includes training modules for medical students, residents, fellows and other health professionals. This does not include single presentations such as individual lectures or conferences.
	PMID 1	PMID 2	PMID 3	PMID 4	Conference Presentations (#)	Other Presentations (#)	Chapters / Textbooks (#)	Grant Leadership (#)	Leadership or Peer-Review Role (Y/N)	Teaching Formal Courses (Y/N)

The seven headings in this table serve to define that areas of scholarly activity monitored by the ACGME. These 7 categories of academic productivity indirectly answer the question: What constitutes scholarly activity? Entered data represent faculty scholarly activity for the previous academic year. These data are reviewed by the ACGME annually. Lack of documentation of faculty scholarly activity is a trigger for more in-depth review of individual programs.

Category 1: Pub Med IDs (assigned by PubMed) for articles published in the previous academic year. List up to 4.

Category 2: Number of abstracts, posters, and presentations given at international, national, or regional meetings.

Category 3: Number of other presentations given (grand rounds, invited professorships), materials developed (such as computer-based modules), or work presented in non-peer review publications. Articles without PMIDs should be counted in this section. This will include publications which are peer reviewed but not recognized by the National Library of Medicine.

Category 4: Number of chapters or textbooks.

Category 5: Number of grants for which faculty member had a leadership role (PI, Co-PI, or site director).

Category 6: Active leadership role (such as serving on committees or governing boards) in national medical organizations or served as reviewer or editorial board member for a peer-reviewed journal (Y/N).

Category 7: Responsibility for seminars, conference series, or course coordination (such as arrangement of presentations and speakers, organization of materials, assessment of participants' performance) for any didactic training within the sponsoring institution or program. This includes training modules for medical students, residents, fellows and other health professionals. *This does not include single presentations such as individual lectures or conferences (italics mine).*

Faculty Scholarly Activity:

Several statements from the Program Requirements bear emphasis. II.B.5. states that “the faculty must establish and maintain an environment of inquiry and scholarship with an active research component (core)” and II.B.5.c states that “faculty should encourage and support residents in scholarly activities (core).” The Program Requirements also state that “some members of the faculty should also demonstrate scholarship...” (II.B.5.b) and “all above scholarship components must be present in the program (core)” (II.B.5.d). In my opinion, it is unlikely that a training program can adequately support residents in scholarly activities unless the majority of faculty members are themselves participating in these activities.

After completing data entry for the annual ADS survey, a table of scholarly activity is generated (Figure 3). I suggest looking at each *row* of the table. There should be very few, if any, faculty members who have all zeros (0) and all no's (N). This constitutes no scholarly activity for that individual. Most (a healthy majority) core faculty should have activity in at least one, if not more than one, category. Within each *column* there should be some activity. There should be no columns with all zeros or all N's because this implies that there are some scholarship components are not present among the program's faculty members.

Figure 3.

Faculty Scholarly Activity


Faculty Member	PMID	Conference Presentations	Other Presentations	Chapters Textbooks	Grant Leadership	Leadership or Peer-Review Role	Teaching Formal Courses
[REDACTED]	<ul style="list-style-type: none"> - 1 24332518 - 2 24799312 - 3 24356155 - 4 23756912 	10	8	3	0	Y	Y
[REDACTED]	<ul style="list-style-type: none"> - 1 24102675 - 2 24447499 - 3 empty - 4 empty 	1	1	0	0	Y	Y
[REDACTED]	<ul style="list-style-type: none"> - 1 empty - 2 empty - 3 empty - 4 empty 	0	1	0	1	Y	Y
[REDACTED]	<ul style="list-style-type: none"> - 1 24333052 - 2 empty - 3 empty - 4 empty 	0	2	1	0	N	Y
[REDACTED]	<ul style="list-style-type: none"> - 1 empty - 2 empty - 3 empty - 4 empty 	2	0	1	0	Y	Y
[REDACTED]	<ul style="list-style-type: none"> - 1 empty - 2 empty - 3 empty - 4 empty 	2	1	0	0	N	Y

References:

1. Boyer EL. Scholarship Reconsidered: Priorities of the Professorate. Princeton, NJ: Princeton University Press. 1990.
2. Grady EC, Roise A, Barr D, et al. Defining scholarly activity in graduate medical education. J Grad Med Educ 2012; 4: 558-61.
3. ACGME Program Requirements Graduate Medical Education in Anesthesiology. <http://www.acgme.org/acgmeweb/tabid/128/ProgramandInstitutionalAccreditation/Hospital-BasedSpecialties/Anesthesiology.aspx>. Accessed October 2014.

Scholarly Activity for Core Faculty: You Know It When You See It


Cynthia A. Wong, MD
AACPD Annual Meeting
November 2014



The Windy City



The Chicago River




Stagg Field




Jane Addams




Nobel Peace Prize 1931



800 N. Halsted Street (UIC Campus)



The Loop



Impressionist Paintings

Longest Running Record in Professional Sports

Disclosures

- Member, Anesthesiology RRC
- Opinions presented in this talk are mine, and not that of the RRC

Objectives

Upon completion of this presentation, participants will be able to

- describe endeavors that constitute scholarly activity for faculty members.

Definition of *Scholarly Activity*^a

- Discovery
- Integration
- Application
- Teaching

^aBoyer EI. Scholarship Reconsidered Priorities of the Professoriate. Princeton, NJ: Princeton University Press; 1990

Grady EC. J Grad Med Educ 2012;4:558-61

Definition of *Scholarly Activity*^a

- Discovery: advancing knowledge
- Integration: synthesizing knowledge
- Application: applying existing knowledge
- Teaching: dissemination of existing knowledge

^aBoyer EI. Scholarship Reconsidered Priorities of the Professoriate. Princeton, NJ: Princeton University Press; 1990

Grady EC. J Grad Med Educ 2012;4:558-61

ACGME NEWS AND VIEWS


Defining Scholarly Activity in Graduate Medical Education

Journal of Graduate Medical Education, December 2012

ERIN C. GRADY, MD
ADAM ROYAL, MD, MPH
DANIEL BAKER, MD
DOUGLAS LINCK, MD
KATHERINE BAD-SHAN LEE, MD, MA
TIMOTHY DASKIVICH, MD
AMAR DHAND, MD, DPHIL
FRANK D. BUSLER, MD, MPH

TABLE 2 PROPOSED BASELINE RUBRIC FOR ALL ACCREDITATION COUNCIL FOR GRADUATE MEDICAL EDUCATION (ACGME) RESIDENCY REVIEW COMMITTEES (RRCs)


Component of Scholarship	Examples	Assessment Criteria
Discovery = advancing knowledge	Published paper Work resulting in abstract	All components of scholarship should be present when looking at the sum of the candidate's scholarly work
Integration = synthesizing knowledge	Case studies or reports Patient education projects	Each resident should be exposed to each of the 4 components of scholarship and should complete at least one scholarly activity during the residency training period
Application = applying existing knowledge	Participation in national guideline panels Participation in professional societies	More stringent requirements may be instituted by the specialty-specific RRC as needed
Teaching = disseminating current medical knowledge	Preparing and delivering lecture(s) Curriculum development Development of web-based modules, etc.	



ACGME Accreditation Council for Graduate Medical Education

ACGME Program Requirements for Graduate Medical Education in Anesthesiology


<http://www.acgme.org/acgmeweb/tabid/128/ProgramandInstitutionalAccreditation/Hospital-BasedSpecialties/Anesthesiology.aspx>



Program Director

II.A. Program Director

II.A.3.e) faculty experience, leadership, organizational and administrative qualifications, and the ability to function effectively within an institutional governance. The program director must have significant academic achievements in anesthesiology, such as publications, the development of educational programs, or the conduct of research. ^(C,PS)



Program Requirements , page 10

Faculty

II.B.5. The faculty must establish and maintain an environment of inquiry and scholarship with an active research component. ^(C,MS)

II.B.5.a) The faculty must regularly participate in organized clinical discussions, rounds, journal clubs, and conferences. ^(Detail)

II.B.5.b) Some members of the faculty should also demonstrate scholarship by one or more of the following:

II.B.5.b).(1) peer-reviewed funding; ^(Detail)

II.B.5.b).(2) publication of original research or review articles in peer-reviewed journals, or chapters in textbooks; ^(Detail)

II.B.5.b).(3) publication or presentation of case reports or clinical series at local, regional, or national professional and



Program Requirements, page 12-13


Faculty (cont.)

scientific society meetings; or, ^(Detail)

II.B.5.b).(4) participation in national committees or educational organizations. ^(Detail)

II.B.5.c) Faculty should encourage and support residents in scholarly activities. ^(C,MS)

II.B.5.d) All above scholarship components must be present in the program. ^(C,MS)



Program Requirements, page 12-13

Faculty

II.B.5. The faculty must establish and maintain an environment of inquiry and scholarship with an active research component. ^(C,MS)

II.B.5.a) The faculty must regularly participate in organized clinical discussions, rounds, journal clubs, and conferences. ^(Detail)

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II.B.5.b).(3) publication or presentation of case reports or clinical series at local, regional, or national professional and



Program Requirements, page 12-13

Faculty Scholarly Activity

Number of grants for which faculty member had a leadership role (PI, Co-PI, or site director) between 7/1/2011 and 6/30/2012

Faculty Member	R1	R2	R3	R4	R5	R6	R7	R8	R9
John Smith	1	2	3	4	5	6	7	8	9

Grant Leadership: 3

Enter a number

Northwestern Medicine Council for Graduate Medical Education Information Current as of December 2, 2013

Faculty Scholarly Activity

Had an active leadership role (such as serving on committees or governing boards) in national medical organizations or served as reviewer or editorial board member for a peer-reviewed journal between 7/1/2011 and 6/30/2012

Faculty Member	R1	R2	R3	R4	R5	R6	R7	R8	R9
John Smith	1	2	3	4	5	6	7	8	9

Leadership or Peer-Review Role: Y

Answer Yes or No

Northwestern Medicine Council for Graduate Medical Education Information Current as of December 2, 2013

Faculty Scholarly Activity

Between 7/1/2011 and 6/30/2012, held responsibility for seminar, conference series, or course coordination (such as arrangement of presentations and speakers, organization of materials, assessment of participants' performance) for any didactic training within the sponsoring institution or program. This includes training modules for medical students, residents, fellows and other health professionals. This does not include single presentations such as individual lectures or conferences.

Faculty Member	R1	R2	R3	R4	R5	R6	R7	R8	R9
John Smith	1	2	3	4	5	6	7	8	9

Teaching Formal Courses: N

Answer Yes or No

Northwestern Medicine Council for Graduate Medical Education Information Current as of December 2, 2013

Faculty

II.B.5. The faculty must establish and maintain an environment of inquiry and scholarship with an active research component. (Core)

II.B.5.a) The faculty must regularly participate in organized clinical discussions, rounds, journal clubs, and conferences. (Detail)

II.B.5.b) Some members of the faculty should also demonstrate scholarship by one or more of the following:

- II.B.5.b.(1) peer-reviewed funding. (Detail)**
- II.B.5.b.(2) publication of original research or review articles in peer-reviewed journals, or chapters in textbooks. (Detail)**
- II.B.5.b.(3) publication or presentation of case reports or clinical series at local, regional, or national professional and**

Northwestern Medicine Program Requirements, page 12-13

Faculty (cont.)

II.B.5.b.(4) scientific society meetings; or, participation in national committees or educational organizations. (Detail)

II.B.5.c) Faculty should encourage and support residents in scholarly activities. (Core)

II.B.5.d) All above scholarship components must be present in the program. (Core)

Northwestern Medicine Program Requirements, page 12-13

0431604005 - McGaw Medical Center of Northwestern University Program

Diabetic anesthesiology - Chicago, IL

Faculty Scholarly Activity

Faculty Member	PI	Co-PI	Editorial Board	Chapters	Case Reports	Leadership or Peer-Review Role	Teaching Formal Courses
Scottie King	1	2	3	4	5	6	7
Michael Cook	1	2	3	4	5	6	7
Joseph Barlow	1	2	3	4	5	6	7
Christopher Cavaliere	1	2	3	4	5	6	7
Lucia Diabrona	1	2	3	4	5	6	7
Brian Foster	1	2	3	4	5	6	7
Sean Corbin	1	2	3	4	5	6	7

Northwestern Medicine

ACGME NEWS AND VIEWS

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Integration = synthesizing knowledge	Case studies or reports Patient education projects	Each resident should be exposed to each of the 4 components of scholarship and should complete at least one scholarly activity during the residency training period
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Teaching = disseminating current medical knowledge	Preparing and delivering lectures Curriculum development Development of web-based modules, etc.	



Thank You!

The Start, In Chicago

Adams St (Jackson St.) and Michigan (Lakeshore Drive)