

Faculty Development: The Vanderbilt System

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Disclosures

- None

Objectives

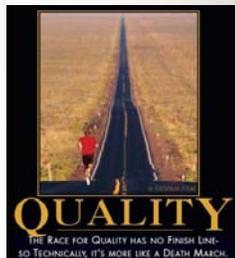
- Introduce the 'Why' of faculty development programs for one program
- Describe one department's approach
 - *for another day...*
- Discuss forces driving 'replacement' in anesthesia practice
- Review technological factors influencing the likelihood of complete disruption
- Give examples of how anesthesiologists can re-establish their fundamental value in healthcare
 - *...though these map right back to the 'why'*

A High Stakes Resource

- Anesthesiologists (anesthetists) are everywhere
- Necessary adjunct to procedural medicine
- Expensive!
 - Typical academic dept: 50 anesthesiologists
 - Total expense/FTE: about \$600K/year
- Revenue does not keep up with expenses
 - Institutional support to academic depts: averages about \$165K/FTE-year
- This is real money (\$8.25M/year)

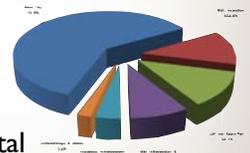
Rationale for Faculty Development

- Selfish motivation - to enhance engagement
- Engagement springs from:
 - Sense of purpose; Autonomy; Ability to exercise creativity
 - *also helpful:*
 - Compensation; Influence
- Only through engagement can we extract EFFORT exceeding the arithmetic sum of all the compensated time (and the arithmetic sum of all the available comp, for that matter)



Starts from the Comp Plan

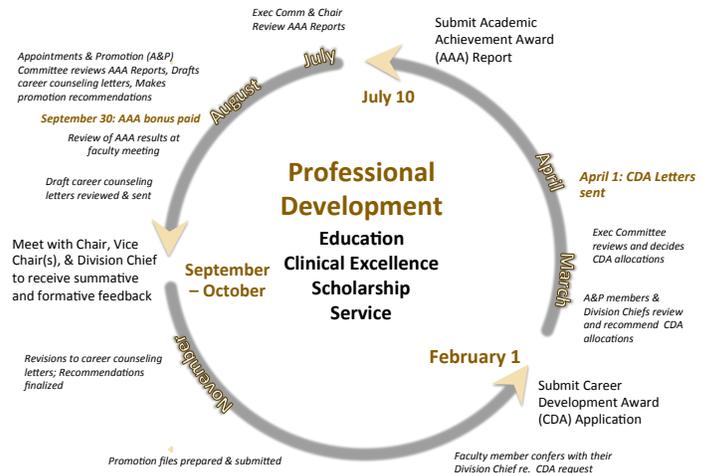
- In 2007, fortunately, someone forgot the science and created a comp plan that monetized academic and leadership output
- Two-thirds of total comp (~50th %ile AAMC Academic, National) as base
- One-third is variable
- Five-sixths of this is for clinical 'availability'
- One sixth (about 1/18th of total comp) is for academic and leadership productivity



Kicker: Academic Time is Not a Birthright

- Annual Application for and (review of) academic time:
 - What have you done this past year?
 - What are your plans for the coming year?
 - Got any funding?
- Formal application - no special deals
- Reviewed by Division Chiefs
- Smoky-room meeting
- Right-sized recommendations

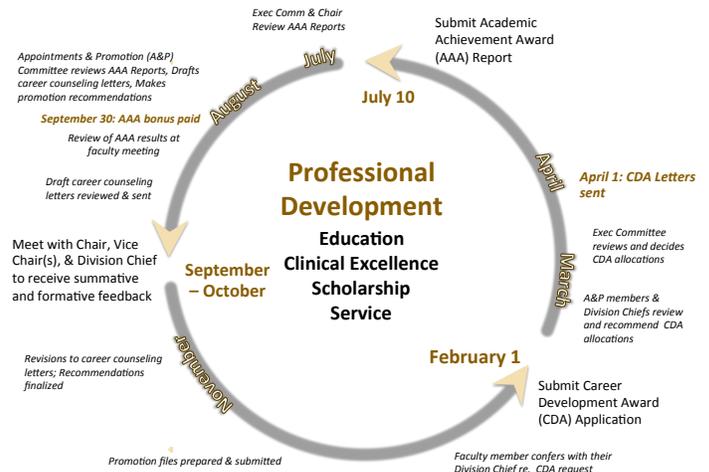
The Annual Academic Cycle



Career Development Award

- Formal application for time each year
 - It's an actual form: deliveries and goals
 - Project justifications - initial progress
 - Meant to be completed in consultation with Division Chief
- Completed apps reviewed by a non-home Division Chief - initial recommendations
 - Division Chief meeting to discuss and adjust initial allocations
- All dropped into a master spreadsheet - history, trajectory, track, funding

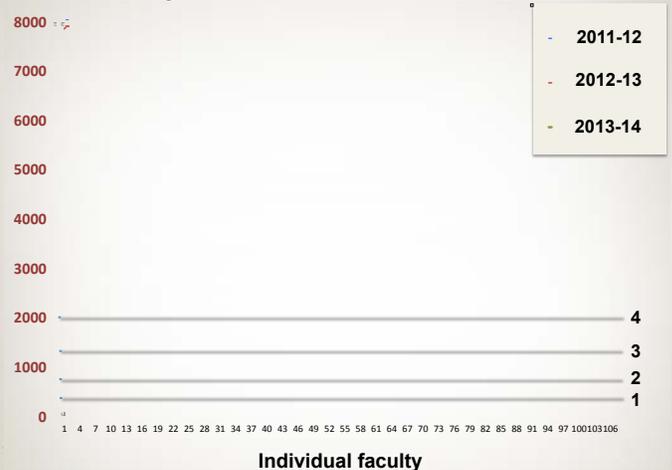
The Annual Academic Cycle



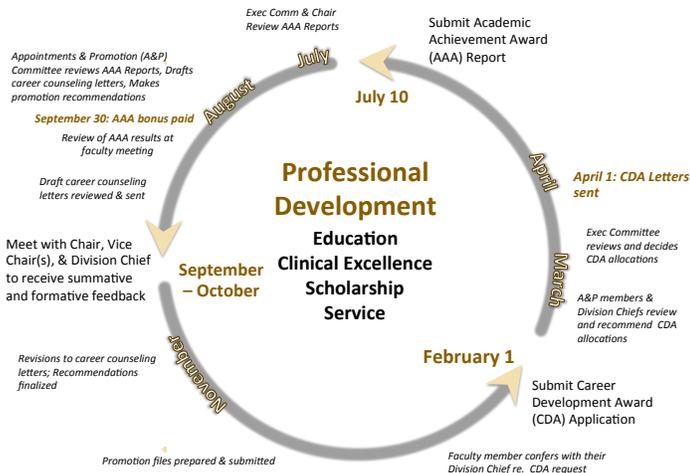
AAA 2014 Review Process

- Publications: CV database populated EXCEL spreadsheets.
- Spreadsheets sent back to each faculty member for additions and corrections.
- Administrative review and corrections.
- Every faculty report reviewed independently by at least two EC members
- If a faculty member had any chance of getting to the next threshold, did a third review – 30% were reviewed by at least three EC members.

Most People Get an Award



The Annual Academic Cycle

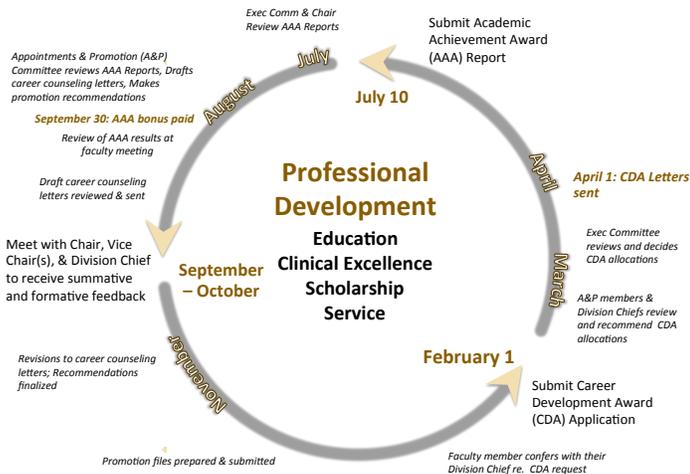


Annual Faculty Reviews

- AAA Report goes to A & P Committee
- Forms the basis of Annual Review letter
- F2F meeting w/ Chair, Div Chief, (Vice Chair)
 - Summative feedback
 - Teaching
 - Progress vs Plan
 - Next Steps
 - On the right academic track?
 - What can the Dept do to help you?

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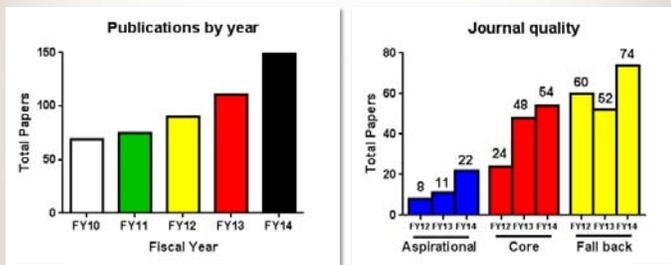
The Annual Academic Cycle



ASA Activities: Academic Excellence in Action

Type of Activity	2014	2013
Best of Abstracts	0	1
Symposiums/Forums	1	4
Refresher Courses	5	4
Oral Presentations	9	4
PBLDs	9	6
Panel Discussions	11	9
Workshops	20	22
MCCs	29	27
Poster Presentations/Discussions	16	28
Special Meetings/Events	3	*
Scientific & Educational Exhibits	3	*
<i>Other: Award presenter (Kelly McQueen – humanitarian award); Program co-chair (Ann Walia – International Liver Transplantation Society meeting); Meeting organizer (Ann Walia – Association of Veterans Affairs Anesthesiologists Annual Meeting)</i>		
TOTAL	109 activities	105 activities

Publications



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NIH Rankings Departments of Anesthesiology

2011	2012	2013
1 UNIVERSITY OF CALIFORNIA SAN FRANCISCO \$7,615,325	1 UNIVERSITY OF CALIFORNIA SAN FRANCISCO \$7,475,762	1 UNIVERSITY OF CALIFORNIA SAN FRANCISCO \$8,000,542
2 WASHINGTON UNIVERSITY \$7,607,346	2 WASHINGTON UNIVERSITY \$6,672,299	2 STANFORD UNIVERSITY \$7,887,305
3 STANFORD UNIVERSITY \$6,484,188	3 JOHNS HOPKINS UNIVERSITY \$6,665,755	3 STANFORD UNIVERSITY \$6,318,863
4 JOHNS HOPKINS UNIVERSITY \$6,115,553	4 STANFORD UNIVERSITY \$6,427,350	4 JOHNS HOPKINS UNIVERSITY \$5,989,220
5 UNIVERSITY OF CALIFORNIA LOS ANGELES \$5,027,947	5 UNIVERSITY OF WASHINGTON \$4,839,993	5 COLUMBIA UNIVERSITY HEALTH SCIENCES \$4,680,795
6 UNIVERSITY OF WASHINGTON \$4,762,571	6 UNIVERSITY OF CALIFORNIA LOS ANGELES \$4,418,680	6 UNIVERSITY OF CALIFORNIA LOS ANGELES \$4,566,024
7 PITTSBURGH \$4,641,351	7 DUKE UNIVERSITY \$4,364,979	7 UNIVERSITY OF WASHINGTON \$4,145,390
8 COLUMBIA UNIVERSITY HEALTH SCIENCES \$4,594,142	8 UNIVERSITY OF PITTSBURGH AT PITTSBURGH \$4,280,994	8 VANDERBILT UNIVERSITY MED CTR \$3,928,061
9 MEDICAL COLLEGE OF WISCONSIN \$4,236,896	9 UNIVERSITY OF PITTSBURGH AT PITTSBURGH \$4,134,606	9 UNIVERSITY OF PITTSBURGH AT PITTSBURGH \$3,816,823
10 ANN ARBOR \$3,581,097	10 MEDICAL COLLEGE OF WISCONSIN \$3,997,940	10 DUKE UNIVERSITY \$3,730,426
11 UNIVERSITY OF PENNSYLVANIA \$2,756,055	11 ARBOR \$3,393,818	11 UNIVERSITY OF MICHIGAN \$3,555,896
12 UNIVERSITY OF CALIFORNIA DAVIS \$2,573,841	12 VANDERBILT UNIVERSITY \$3,393,818	12 UNIVERSITY OF PENNSYLVANIA \$3,402,241
13 DUKE UNIVERSITY \$2,479,452	13 UNIVERSITY OF CALIFORNIA SAN DIEGO \$3,378,067	13 UNIVERSITY OF WASHINGTON \$2,887,532
14 UNIVERSITY OF CHICAGO \$2,273,478	14 YALE UNIVERSITY \$2,734,232	14 YALE UNIVERSITY \$2,431,526
15 UNIVERSITY OF CALIFORNIA SAN DIEGO \$2,271,402	15 UNIVERSITY OF CHICAGO \$2,600,955	15 UNIVERSITY OF ALABAMA AT BIRMINGHAM \$2,192,070
16 UNIVERSITY OF ALABAMA AT BIRMINGHAM \$2,087,706	16 UNIVERSITY OF CALIFORNIA DAVIS \$2,426,386	16 UNIVERSITY OF CALIFORNIA SAN DIEGO \$2,125,208
17 BIRMINGHAM \$2,076,761	17 BIRMINGHAM \$2,173,428	17 WAKE FOREST UNIVERSITY HEALTH SCIENCES \$2,045,573
18 YALE UNIVERSITY \$2,021,444	18 WAKE FOREST UNIVERSITY HEALTH SCIENCES \$2,117,717	18 UNIVERSITY OF CALIFORNIA IRVINE \$1,979,173
19 VANDERBILT UNIVERSITY \$2,004,751	19 OREGON HEALTH AND SCIENCE \$2,102,043	19 MEDICAL COLLEGE OF WISCONSIN \$1,916,483
20 CORNELL UNIV \$1,965,036	20 UNIVERSITY OF CALIFORNIA IRVINE \$1,970,802	20 UNIVERSITY OF CALIFORNIA DAVIS \$1,857,515

VANDERBILT UNIVERSITY MEDICAL CENTER

My Proposal:

- What separates '-ologists' from '-ists' are:
 - Complexity (management of)
 - Individual case level
 - System level
 - Management
 - Leadership
 - Policy
 - Creation of new knowledge that improves the science and the process

What I Ask Potential New Hires

- What is your appetite for change?
- Describe any quality improvement projects you have done, including implementation, uptake and assessment of outcomes / impact.
- Describe any ~~research~~ research projects that you carried out to the point of submission to a peer-reviewed journal.
- Who could I call at your prior institution who would describe you as a solution-oriented problem solver in the practice?

Comments?

