

A New Program to Reward and Retain Volunteer Clinical Faculty at the Medical College of Wisconsin

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ABSTRACT

Background and Problem: Volunteer clinical faculty (VCF) are vital to the educational mission of medical schools. At the Medical College of Wisconsin (MCW), VCF are increasingly relied upon to meet clinical training needs in medical student and resident education. However, many VCF receive little or no preparation to excel in their teaching roles, and they are under increasing time demands that limit their availability to teach.

Methods: Beginning in 2001, the primary care departments at MCW began a series of initiatives called “ExCEED” to promote VCF teaching excellence and efficiency through two main program components: Advisory Councils, made up of VCF leaders, and Support Services, such as web-based resources and teaching workshops.

Results: Preliminary ExCEED findings show that VCF have acquired important knowledge, skills, and tools that have better prepared them for their teaching roles.

Conclusion: ExCEED is a systematic, multi-method approach to engage VCF that is positively influencing the clinical education of MCW students and residents.

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“Volunteer faculty members create islands of pure education in the sea of bottom-line medicine.”

—Michael J. Dunn, MD, Dean and Executive Vice President,
Medical College of Wisconsin

BACKGROUND

Volunteer clinical faculty (VCF), sometimes called community preceptors, are physicians who primarily practice at non-university/non-medical school-owned facilities and who contribute to medical students’ and/or residents’ education by teaching at their clinical practice sites, supervising learners in university/medical school-affiliated clinics, or contributing to teaching sessions.¹ At the Medical College of Wisconsin (MCW), students and residents receive a crucial portion of their clinical education through VCF members.

MCW rotations and clerkships place students and residents into community clinics and health centers, and under VCF supervision these students are changed by first and lasting impressions as they work—*often for the first time*—with practicing physicians and real patients. Third-year medical students made the following comments:

“This was my first rotation and was the best experience.”

“I was actively involved with patients and expected to formulate my own plan for their care.”

“I was taught to think and problem-solve like a clinician.”

“I couldn’t have had a more valuable experience.”

It is important to focus on rewarding and retaining VCF because of their vital roles in medical education. A report of the Council of Graduate Medical Education describes the selection, support and rewarding of community preceptors as “fundamental priorities of medical schools and residency training programs.”² The ultimate beneficiaries of good clinical training are patients, families, and communities. More immediate clinical training outcomes are reflected in student exams and grades, and

there is evidence that relationships with clinical faculty influence the choices students make about their specialty and future practice location.³ Teaching may also contribute to the professional vitality of VCF, fulfill their personal desires to contribute to the education of the next generation of physicians, and expose them to new information that contributes to lifelong learning.⁴ But along with these opportunities exist some concerns. Volunteer faculty may be professionally under-prepared to teach and evaluate students. From the clinical practice perspective, teaching may be associated with longer workdays, reduced patient volume, and some patients may be uneasy about having a student present in the examining room.⁵

In light of these important opportunities and concerns, a systematic array of supports and services have been instituted for VCF affiliated with the Department of Family and Community Medicine, the Department of Medicine's Division of General Internal Medicine, and the Department of Pediatrics' Division of General Pediatrics at MCW.

NEED FOR MCW'S VOLUNTEER CLINICAL FACULTY SUPPORT PROGRAM

In fall 2000, MCW's Department of Family and Community Medicine experienced a dramatic increase in medical student teaching demands in the mentor program that provides first and second year students clinical contact with experienced clinicians, an "introduction to the clinical exam" course in the second year, and in a new, required third year family medicine clerkship. Concurrent with these increased needs for clinical faculty, we recognized the growing clinical demands and time pressures being faced by our volunteers. These needs were confirmed when we conducted phone interviews with 20 of our most active volunteer clinical faculty. While still committed to teaching, many of these VCF felt they had less time to teach and needed to improve their efficiency as teachers. Among these 20 VCF, we were surprised to learn that only one reported having experience in clinical teaching workshops or faculty development activities. Since that assessment in family medicine, similar concerns have been found among general pediatrics and general internal medicine VCF.

To address these needs, in 2001 MCW's Department of Family and Community Medicine began a series of initiatives to serve and support VCF. One year later these new services and supports were instituted in the Department of Medicine, Division of General Internal Medicine, and the Department of Pediatrics, Division

of General Pediatrics. These initiatives were called ExCEED: "Excellence in Clinical faculty Education, Exchange and Development." In the sections below we describe ExCEED's goals and methods and present some of the early outcomes of program activities.

EXCEED GOALS AND ACTIVITIES

ExCEED has two main goals: effective and regular communication between MCW and primary care VCF, and excellence and efficiency in clinical teaching through well-targeted VCF services and supports.

To achieve these goals we needed active advisory councils, which we instituted within each specialty to communicate with VCF leaders and keep ExCEED regularly attuned to the needs of our community-based faculty. We also needed a cluster of supports and services targeted to the needs and interests of our VCF. ExCEED's main elements are described in more detail below.

ADVISORY COUNCILS: ENGAGING COMMUNITY-BASED PHYSICIANS AS LEADERS

Southeast Wisconsin is rich with experienced leaders who are also active clinical teachers. Tapping into this network has provided early and ongoing advice about the specific programs and activities needed for our community faculty to excel as teachers.

Separate advisory committees for family medicine, general internal medicine, and general pediatrics are important because each of these specialties has unique cultures, each is responsible for different teaching programs, and each has corresponding differences in faculty abilities and needs.

Advisory Council meetings are conducted twice annually, and each meeting has two main components. The first component is the "business meeting," which covers such activities as review of proposed programmatic initiatives, strategies for effective communication with VCF, and council recommendations for enhancing VCF experiences and skills as preceptors. For example, the Advisory Council recommended that a patient education brochure titled *Your Doctor is also a Teacher* be created and made available in VCF waiting rooms to educate patients about the role of clinical training in physician education. The brochure was drafted and then revised at a subsequent meeting and is now distributed upon request to VCF. At another advisory committee meeting it was recommended that this brochure also be available in Spanish, a project that is now underway.

The second component of Advisory Council meetings is a CME-approved faculty development session. Topics have focused on new clinical resources, teaching methods, and student assessment strategies. The Advisory Council serves as the pilot group for these sessions, which are then revised before they become broadly available to other VCF. For example, during the November 2002 Advisory Council meeting, the CME session was a demonstration and hands-on practice with on-line clinical resources, including evidence-based medicine databases and on-line journals.

SUPPORTS AND SERVICES FOR CLINICAL FACULTY: TARGETED AND ACCESSIBLE

Based on recommendations from the three specialty Advisory Councils, ExCEED has developed a variety of activities that extend the influence of ExCEED well beyond the MCW campus. These include workshops and exhibits at existing specialty meetings, the quarterly newsletter *Branching Out News*, websites for clinical teachers,⁶ and a recently unveiled collaboration for on-line resources that are offered to our volunteer clinical faculty in recognition for their contributions as teachers.

Statewide Specialty Meetings

As a complement to on-campus meetings for Advisory Council members, the ExCEED program exhibits and teaches at statewide professional meetings for primary care specialties. The intent of these outreach efforts is to move our faculty initiatives to where our VCF naturally congregate, including the general internal medicine annual meeting in Door County, and the Winter Refresher Course for Family Practice held annually in Waukesha, Wis.⁷ For example, at the October 2002 Door County Update in Primary Care, ExCEED faculty presented a session titled *Applying Your Clinical Teaching Strategies to Today's Technology Oriented Learner*, focusing on the use of PDAs in teaching. At the January 2003 Winter Refresher Course, ExCEED sponsored an exhibit that included an evidence-based medicine Internet search demonstration and a preceptor recognition luncheon.

"Branching Out News" and Websites

A second way that ExCEED reaches out to volunteer clinical faculty is through the newsletter *Branching Out News* and regularly updated websites. *Branching Out News* is published four times a year and contains such features as achievements of our clinical teachers, notice of upcoming meetings, and clinical and teaching resources. It is distributed to over 100 of the active vol-

unteer clinical faculty within the three ExCEED specialties.

Specialty-specific resources are made easily accessible through pediatrics, family medicine, and medicine web pages, which can be accessed directly from the ExCEED home page.⁶ VCF can efficiently access information regarding Advisory Council activities, current and past issues of *Branching Out News*, postings of upcoming workshops, and interesting links. For example, a link on the pediatric site takes VCF to a clinical teaching site hosted by the University of North Carolina, which includes interactive modules to be completed for fun or for CME credit (www.med.unc.edu/epic/).

Collaboration for On-line Resources

Advisory Council input underscored VCF interest in teaching efficiency and evidence-based approaches to teaching and patient care. Because medical student education now emphasizes point-of-care, evidence-based approaches, students are expected to use and master certain search tools and procedures. In response, ExCEED has joined a collaboration to get evidence-based tools and skills into VCF teaching practices, which is currently being piloted in all ExCEED specialties.

In collaboration with MCW's Office of Faculty Affairs and MCW Libraries, an array of on-line resources have been made available to our current VCF. These resources include clinical and educational evidence-based data sources such as the Cochrane Library and Medical InfoRetriever, as well as such on-line journals as *JAMA*, *Family Practice*, *Annals of Internal Medicine* and *Journal of Pediatrics*. A brochure that outlines these resources is available through ExCEED and the MCW Libraries.

PROGRAM EVALUATION RESULTS

The ExCEED evaluation is based on a model that examines different levels of program outcomes: program *reactions* and participant *learning* focus most directly on the immediate outcomes of training activities. Other measures of significant interest are those that address *impact*—longer-term outcomes that show how the program has influenced practices, careers, patients, and/or students.⁸

Participant reactions to the various elements of ExCEED have been very positive. For example, we assessed program reactions using self-ratings of Advisory Council members (N=24) who attended on-campus CME workshops. Using a scale where 1=poor and

7=excellent, ratings have averaged 6.7 on "satisfaction with session presenters" and 6.5 on "satisfaction with session content."

Learning evaluation has indicated that CME session attendees have "very much improved" knowledge and skills in areas such as "perform Internet searches of evidence-based resources" such as Medical InfoRetriever. In addition, some Advisory Council members have commented that their most important learning has come from interaction with their teaching colleagues, with whom they have shared stories about effective teaching strategies, struggles, and achievements.

Assessing the impact of ExCEED will take longer than the single year that we have been up and running, but there are important and positive indications of the program's impact. For example, the brochure recommended and reviewed by the Family Medicine Advisory Council on *Your Doctor is also a Teacher* has been disseminated to over 200 VCF offices, over 20 requests for reprints have been met, and as previously noted, the brochure is being translated to Spanish to match a need identified by all three ExCEED Advisory Councils. A second program impact has come from our presence at statewide specialty meetings and exhibits, where new community-based faculty have been recruited to teach, and where some inactive teachers have decided to reconnect with one of MCW's teaching programs. Finally, ExCEED is beginning to foster collegial interactions and collaborations among campus and community faculty around their common interest—excellence in medical student and resident clinical teaching.

CONCLUSION

The ExCEED program for volunteer clinical faculty is a multi-method model for recognizing VCF and advancing their vital roles as teachers and members of MCW's academic community. During ExCEED's first year, experienced leaders from the campus and community have joined together to positively influence the clinical education of students and residents. Though much more needs to be done, ExCEED initiatives are starting to build bridges to link the teaching and learning resources of the academic medical center with the resources available at individual and group practices of VCF. In the coming years ExCEED will continue to develop and implement innovative and evidence-based educational resources to benefit students, residents, and clinical faculty. We are confident that these initiatives will help MCW achieve its educational mission, benefit patient care, and improve the health of communities in Wisconsin.

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REFERENCES

1. Walling AD, Sutton LD, Gold J. Administrative relationships between medical schools and community preceptors. *Acad Med.* 2001;76:184-187.
2. Council on Graduate Medical Education. Physician Education for a Changing Health Care Environment. DHHS Publication HRSA-99-18. Rockville, MD. US Health Resources and Services Administration, 1999.
3. Meurer LN. Influence of medical school curriculum on primary care specialty choice: Analysis and synthesis of the literature. *Acad Med.* 1995;70:388-397.
4. Kumar A, Kallen DJ, Mathew T. Volunteer faculty: What rewards or incentives do they prefer? *Teaching and Learning in Medicine.* 2002;14:119-123.
5. Levy BT, Gjerde CL, Albrecht LA. The effects of precepting on and the support desired by community-based preceptors in Iowa. *Acad Med.* 1997;72:382-384.
6. The ExCEED website for pediatrics at <http://www.mcw.edu/edserv/facdev/exceedp.htm>. Accessed April 17, 2003.
7. Meeting websites can be found at <http://www.intmed.mcw.edu/gimcme/> and also at http://www.family.mcw.edu/CME_WRC.htm. Accessed April 17, 2003.
8. Kirkpatrick D. *Evaluating Training Programs: The Four Levels* (2nd Ed). Berrett Koehler. 1998.



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