

New Faculty Orientation

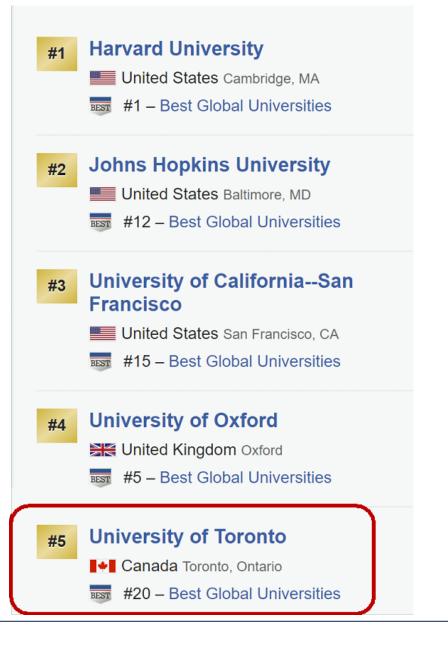
Department of Medicine at the University of Toronto



WELCOME!

USNEWS EDUCATION

Best Global Universities for Clinical Medicine





Agenda

Time	Topic	Presenter / Grouping
8:15-9:00	Introduction to U of T & the Dept. of Medicine	Dr. Gillian Hawker / Assigned Table 1*
9:00-10:00	Roundtable Discussion 1: Life as an Academic Physician	Assigned Table 1*
10:00-10:15	Break	
10:15-11:15	Roundtable Discussion 2: Your Academic Position Description	Assigned Table 2*
11:15-12:15	Crafting Your Story	Dr. Ed Etchells / Assigned Table 2*
12:15-1:00	Lunch	New faculty and DoM leaders / No assigned tables

^{*} On the back of your nametag



Roundtable Discussion 1	Roundtable Discussion 2
Mentor/mentee relationship Time management Wellness Role as teacher/educator Policies & procedures – e.g. relations with industry	Academic plan – expectations at CFAR Q&A with those who have gone before CV management



University of Toronto

Founded as King's College 1827





Fully Affiliated Teaching Hospitals

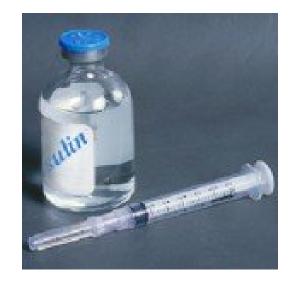
- Toronto General Hospital (1819)
- Woman's Medical College (1883)
 - Women's College Dispensary 1891
- St Michael's Hospital (1892)
- Toronto Western Hospital (1896)
- Toronto Jewish Old Folks Home (1918)
 - Baycrest Centre for Geriatric Care (1967)
- Mt Sinai Hospital (1922)
- Sunnybrook Veteran's Hospital (1946)





Major discoveries & milestones

- 1921 Insulin (Banting & Best)
- 1930 Pablum (Tisdall, Drake & Brown)
- 1936 Purification of Heparin (Scott & Charles)
- **1936** First Mobile Transfusion Unit (Noman Bethune)
- 1951 First Electronic Heart Pacemaker (Bigelow)
- 1961 Discovery of Stem Cells (Till & McCulloch)
- 1981 The Glycemic Index (David Jenkins)
- 1981 First Single Lung Transplant (Pearson & Cooper)
- 1984 T-Cell Receptor Gene (Tak Mak)
- 1988 First Nerve Transplant (Hudson & MacKinnon)
- 1989 The Cystic Fibrosis Gene (Lap-Chee Tsui)
- 1991 Cell Receptor Discoveries Enable Development to New Cancer Drugs (Pawson)
- 1995 Discovery of Genes Responsible for Early-onset Alzheimer's (St. George-Hyslop)
- **2010** Stem Cells Restore Sight to Blind Mice (van der Kooy)
- **2015** Opening the Blood-Brain Barrier (Mainprize)





The *Toronto* Advantage

We're the largest

Department of Medicine in North America

Faculty of Medicine

Percentage of the 3090+ full-time faculty members in each of the Faculty of Medicine's 22 departments

Dept. of

Paediatrics 2 4 1

= Approx. 10%

Dept. of Psychiatry

= Approx. 13%

Dept. of Family & Community

Medicine

= Approx. 12%

Department of Medicine = Approx. 27%

Approx. 24% of full-time faculty members are spread across 16 departments

...... Subspecialty divisions in the Department of Medicine

Cardiology Clinical Immunology & Allergy Clinical Pharmacology & Toxicology Critical Care Dermatology Endocrinology & Metabolism Emergency Medicine Gastroenterology General Internal Medicine Geriatric Medicine Hematology Infectious Diseases Medical Oncology Nephrology Neurology Occupational Medicine Palliative Medicine Physical Medicine & Rehabilitation Respirology Rheumatology



Dept. of Anaesthesia

= Approx. 8%

Dept. of Surgery

= Approx. 9%











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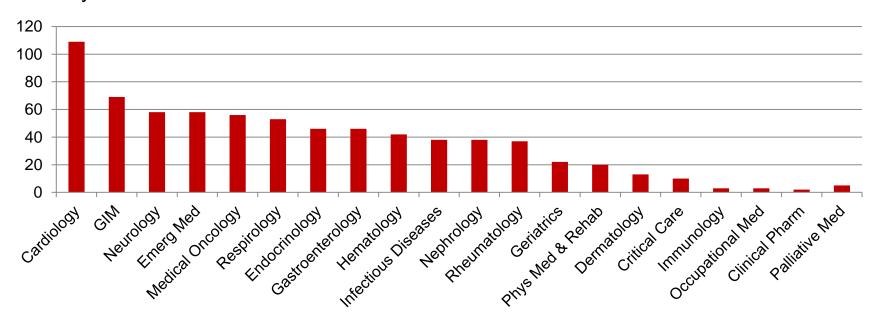
DEPARTMENT OF MEDICINE 101



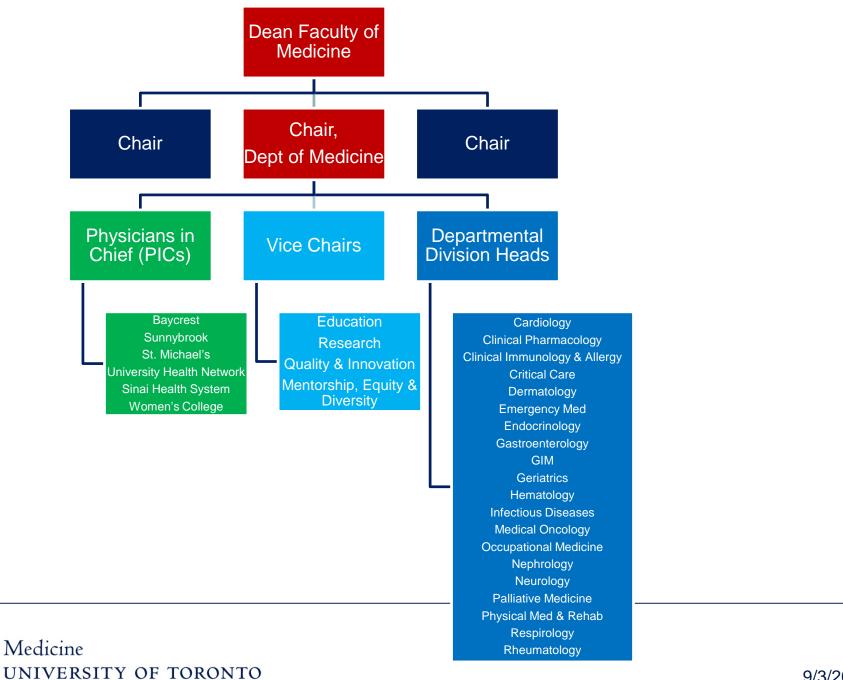
The Department of Medicine at U of T

- ONE DoM & training program across 6 fully-affiliated teaching hospitals
- ~ 1,500 faculty members (~ 830 full-time)... 27% of Faculty of Medicine
- 20 specialties (divisions)
- We train ~ 1:2 Ontario's & 1:3 Canada's internal medicine specialists

faculty







MISSION

 Through the discovery, application, translation and communication of knowledge, we prepare future physician leaders, contribute to our communities and improve the health and health care experiences of individuals and populations.

VISION

 We meaningfully impact health through international leadership in education, research and the translation of new knowledge into better care and health outcomes

Department of Medicine Priorities

Guiding Principles 2014-2019

- 1. Patients & their experiences drive our work
- 2. Promoting equity, diversity & professionalism
- 3. Social accountability
- 4. Training to meet population needs
- 5. Generation & translation of new knowledge to impact health
- 6. Inclusiveness (we are better together!)
- 7. Mentorship across the academic lifespan
- 8. Raise funds to achieve our goals



Culture & Inclusion



http://www.deptmedicine.utoronto.ca/professionalismcodeconduct

https://medicine.utoronto.ca/about-faculty-medicine/professionalism





Culture & Inclusion TBD

Education

A. Kumagai



Education
Scholarship
S. Ginsburg & R. Brydges

Continuing Educ. / QI B. Wong



Patient Involvement Andreas Laupacis

Research M. Farkouh

Big Data & Al
M. Ghassemi

K. Shojania

Quality & Innovation





Gary Naglie Baycrest

Ilture & Inclusion

Education

A. Kumagai



Continuing Educ. / QI

B. Wong





Quality & **Innovation**

K. Shojanja



Michelle Hladunewich Sunnybrook



Big Data & Al M. Ghassemi



Paula Harvey omen's College



Chaim Bell Sinai Health System



You have two appointments

- University faculty appointment
 - Rank (Lecturer to Full Professor)
 - Academic Position description
 - License to practice medicine (CPSO)

Departmental / Hospital Division Heads

- Affiliated hospital appointment
 - Clinical appointment (e.g. Courtesy, Active staff)
 - Credentialing (CPSO/CMPA, resource impact)
 - Practice plan (income, resources)

Chair's office

PIC's office



You are Members of a Practice Plan (PP)

- Participation in a conforming academic practice plan (or equivalent) is necessary for maintenance of *University* appointment status
 - PPs support clinical faculty economically to achieve their academic goals without the constraints of competitive and financiallyunrestricted private practice
- Each practice plan member must have an explicit <u>academic</u> <u>position description</u>, with specific clinical & academic responsibilities for each appointee

Conforming PP Requirements

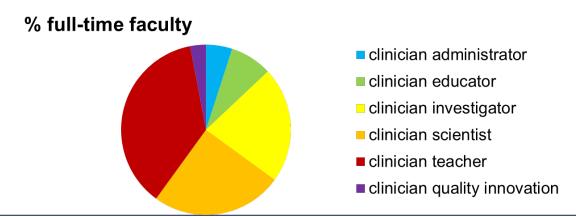
- Economic mechanisms to support & reward academic activities
- A well understood, transparent, and equitable decisionmaking mechanism for allocating resources (to include, but not be limited to, time, income, and infrastructure) to PP members
- An internal dispute resolution mechanism & acceptance of the University's role in protecting academic freedom

Make sure you understand how your PP works!



Academic Position Descriptions

- Department-specific
- Set out expectations re:
 - Time devoted to each of scholarship, teaching (formal and informal), clinical activities and administrative service & focus of your scholarly work
 - http://www.deptmedicine.utoronto.ca/academic-positiondescriptions





Your Academic Plan

Outlines:

- Academic Position Description (APD)
- Formal mentor
- Sign off of key stakeholders (PIC, DDD, VP Res, etc.)
- Roles & responsibilities for next 3-5 years
- Goals for next 3-5 years

Your guide for the next 3-5 years



University Faculty Teach

(Informal = in context of clinical care; formal = outside of clinical care)

- Teachers are expected to:
 - Provide appropriate level of clinical & procedural supervision to ensure safe patient care
 - Limit other activities when in-patient attending
 - Answer calls / pages promptly / be available
 - Assume primary care for patients when clinical workload exceeds what learners can safely manage
 - Provide constructive, timely feedback (CBD evaluations)
 - Address learners with difficulties
 - Adhere to PARO rules & policies, e.g. duty hour restrictions, end-ofshift/end-of-day dismissal



Teaching Resources

Resident in Difficulty Process Map http://www.deptmedicine.utoronto.ca/policies-guidelines

PARO policies: http://www.myparo.ca/your-contract/

Teaching expectations for each APD:

http://www.deptmedicine.utoronto.ca/teaching-educational-expectations

CBD: http://www.deptmedicine.utoronto.ca/competency-based-medical-education

https://medicine.utoronto.ca/about-faculty-medicine/education-vice-deansmedical-education-related-policies



Teacher Evaluations

http://www.deptmedicine.utoronto.ca/teaching-evaluation-scores

- POWER (postgraduate learners, including fellows)
- MEDSIS (undergraduate learners)
- Seek feedback on your teaching
 - Review your evaluations (scores, comments)
 - Appeal mechanism if you feel the evaluation is retaliatory or otherwise unfair
 - Seek help if consistent pattern of feedback indicating need for improvement

Give learners time at rotation end to evaluate you... Ensure you give yourself time to evaluate them



Graduate Appointments

http://www.deptmedicine.utoronto.ca/graduate-appointments

- Required for graduate teaching & supervision
- Wilson Centre for Research in Education
 - Shiphra Ginsburg & Ryan Bridges
- Institute for Medical Sciences (IMS) in Faculty of Medicine
 - Basic & Translational Sciences (Lucy Osbourne & Richard Horner)
- Institute for Health Policy, Management & Evaluation (IHPME) @ Dalla Lana School of Public Health
 - Clinical Epidemiology & Health Care Research (Rob Fowler & Jill Tinmouth)
 - Quality Improvement & Patient Safety (Kaveh Shojania)



Faculty Perks

- Hart House
- Athletic Club
- Faculty Club
- UofT courses



Scholarship program for dependants

http://www.deptmedicine.utoronto.ca/information-new-faculty

Relationships with Industry

- Acceptable (standardized disclosure slide):
 - Unrestricted educational grants (clear accountability for spending; no strings attached re use)
 - Scientific collaborations
 - Meetings with reps by appointment in your admin office/space (value?)

Unacceptable:

- Gifts (e.g. dinner, travel, fellowships)
- Speaking engagements organized by/funded by industry where you do not have control
 of topic, slides, audience
- Industry reps in clinical space (ONLY if demonstrating equipment use)
- Providing trainee emails to industry reps
- Industry reps interacting with residents / trainees without faculty present (even then ...)
- Marketing related work for/with industry, including CME and potentially advisory boards
- http://www.deptmedicine.utoronto.ca/professionalismcode-conduct

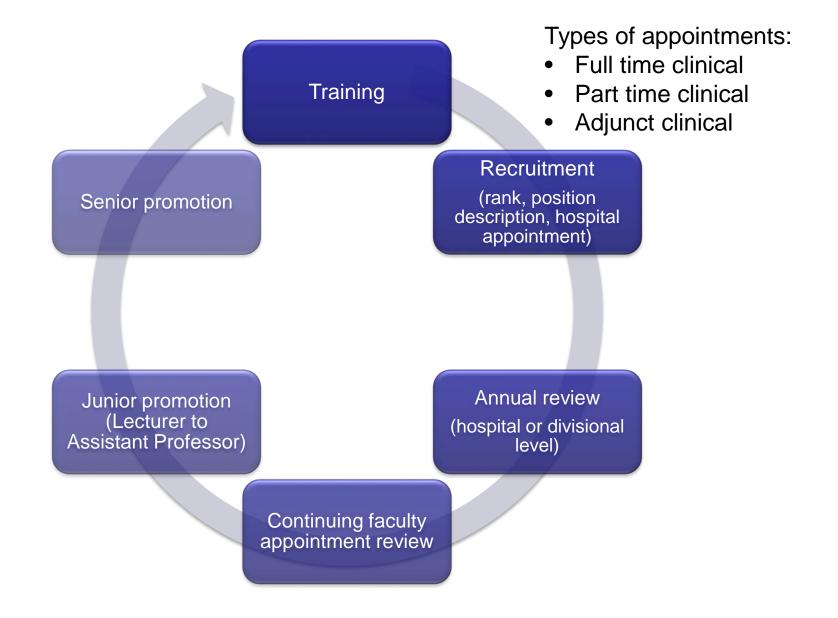




New Faculty Orientation

ACADEMIC LIFE CYCLE





Faculty Member's Name: Academic Year:		A so so col D ovelove		
Academic Position Description:	Reviewers' Names:			Annual Review
Discussion Item	Discussed?	Comments	Action items	
Highlights (past year)				Preparation for Review
Challenges (past year)				-
Goals (next year)				 What are your priorities for discussion?
Wellness				Review your academic plan and
Meeting APD expectations				expectations of your APD <i>ahead</i> of time – are you meeting on
Teaching (quality, quantity)				track? If not why not?
Mentorship				 Review & reflect on quantity & quality of teaching evaluations
Professional development				What is going well and where
Career Milestones				might adjustments be required?
Professionalism				
Citizenship	http://www.deptmedicine.utoronto.ca/			
Finances	newsletter Chair's Column Feb 2019			
Hospital Policies				
University Policies				
Planned career changes				
Eligibility awards & honours				9/3/2019

DoM Check-in at 1.5 Years

(DoM Vice-Chair and/or Chair)

- Academic Plan are you on track?
- Proactively identify issues
 - Balance of time (time management)
 - Teaching type, quality, quantity
 - Completion of graduate training / MTP?
 - Research focus, grants, publications, etc.
 - CPA statement what is your story?
 - Mentorship



Junior Promotion

(Lecturer to Assistant Professor)

- Can occur whenever you meet the recruitments for appointment as Assistant Professor (advanced training & demonstration of scholarship relevant to APD)
 - Your PIC and DDD must request



Continuing Faculty Appointment Review (CFAR)

http://www.deptmedicine.utoronto.ca/continuing-faculty-appointment-review-cfar

- All UofT appointments are probationary for three to five years
- Continued appointment beyond this time is contingent upon a successful Continuing Faculty Appointment Review (CFAR)

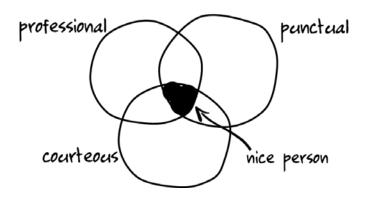
CFAR *usually* takes place 3 years from initial appointment

Timing depends on initial month of appointment, leaves of absence during this period



CFAR: What are we looking for?

- Advancing as expected?
- Demonstrated teaching effectiveness?
- Behaviour consistent with codes of conduct?



http://www.deptmedicine.utoronto.ca/newsletter
Chair's column Oct 2018



CFAR Outcomes

- Recommendation to the Dean for:
 - Continuing faculty appointment
 - Continuing faculty appointment once (explicit deliverables).... (no re-review required)
 - Change APD & re-review in 2 years
 - Not sure... continued probation & re-review in 1-2 years (VERY FEW)
 - 192 reviews since 2014
 - 90% recommended for continuing appt at 3 years
 - 100% recommended by 5 years



Reasons for Extended Probation

- Insufficient protection of the time allotted for scholarship
- Disproportionate focus on obtaining grants at the expense of publications
- Failure to complete graduate training
- Inadequate demonstration of teaching effectiveness (quality or quantity)
- Failure to address repeated unprofessional behaviour



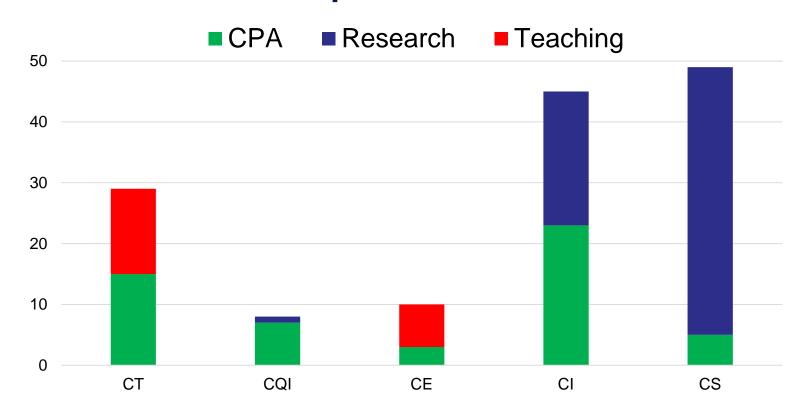
Senior Promotion (Associate & Full Professor)

- Criteria: Demonstrated EXCELLENCE in at least one of:
 - Research
 - Creative professional activities (CPA: activities that promote your profession's practice)
 - Teaching (everyone must be at least competent)
- For Research & CPA, 'excellence" defined as:
 - National reputation (Associate Prof)
 - International reputation (Full Prof)
 - REPUTATION does not mean IMPACT nationally or internationally!!!

You are welcome to attend a Senior Promotion Workshop



Criteria for Senior Promotion by Position Description (n=141)









Work-Life Balance

- Figure out what you love to do and make sure you have time to do
 it be authentic
 - Don't guilt yourself out if you don't 'fit' societal expectations
- Time management
 - Set priorities & delegate time-consuming & unimportant tasks
 - If available, let family, friends support you (let go)
 - Recognize when you are no longer working efficiently/effectively & take a break (recharge batteries)
- Take some time to get unplugged (from technology), e.g. go device-less, silence it... dinnertime?
- Be flexible (pick your battles)
- Identify role models & mentors reach out



Formal Mentor(s) - Role

- Provide guidance re. personal and professional development
 - Be a "safe place" for you to share concerns and issues
 - Assist you with work-life integration and wellness!
 - Be available for (encourage) regularly scheduled meetings
 - Provide timely feedback on work in progress, grants, manuscripts
 - Give you honest, constructive feedback & advice
 - Help you learn to say no & when you should say "yes"





A New Way of Thinking About Sponsorship

Sponsorship is not an either/or role—either committing fully or not at all. It's a spectrum of different kinds and degrees of support.

Mentor
Provide advice, support,
or coaching.

- 2 Strategizer
 Share "insider information" about advancing; strategize getting ahead.
- Connector
 Make introductions to influential people; talk her up with your peers.
- Opportunity giver Provide a high-visibility opportunity.
 - Advocate Publicly advocate a promotion; fight for her in settings where she can't fight for herself.



Role of the Mentee

- Be clear what you need & come to meetings prepared
- Drive the relationship
- Be open to feedback, criticism
- Follows-up and check in with the mentor (at least 2-3 times per year before CFAR)
- When problems arise, develop possible solutions to present to the mentor
- Be respectful of mentors (their time, experience)
- Be honest



Physician Wellness Resources

- http://php.oma.org/wellnessResourcesP.html
- The Centre for Mindfulness Studies in Toronto
 - Mindfulness-based therapies for anxiety, depression, healthy eating, ADHD and coping with cancer http://www.mindfulnessstudies.com/
- https://www.cmpa-acpm.ca/physician-wellness
 - Dealing with a complaint, adverse event
- http://php.oma.org/CPHI.html (Canadian Physician Health Institute)
- ePhysicianHealth.com
 - Comprehensive, online physician health and wellness resource developed by Canadian experts
 - Provides evidence-based information and innovative, user-friendly tools for self-help and collegial support

Clinical Faculty Advocate

- Role is to ensure all full- & part-time clinical faculty members have rapid, cost-effective access to support at all stages of a dispute resolution process or allegations of a breach of academic freedom
 - An excellent resource for faculty members to consult in terms of professionalism and conflicts of interest
 - Dr. Carl Cardella carl.cardella@uhn.on.ca



Your finances are your responsibility

- Get advice from an expert
 - Get an accountant!
 - Incorporation?
- Get disability insurance
- Pay taxes
- Start saving for retirement now



Your CV

- Continuing to use WebCV until further notice
- U of T faculty of medicine CV template
- Start NOW... update regularly



http://www.deptmedicine.utoronto.ca/webcv



Acknowledgements



- Provide hospital & University of Toronto affiliation on <u>all</u> manuscripts and posters & at beginning of all presentations
- Power-point template
 http://www.deptmedicine.utoronto.ca/communication-resources





Department Admin Contacts

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- Senior Promotion: dom.srpromotion@utoronto.ca
- CFAR: dom.cfar@utoronto.ca
- Communications: dom.communications@utoronto.ca



Where to find us

- Currently: TGH 3rd floor Elliot Building Room 805
- This fall, moving to Naylor Building 3nd floor
- Website: <u>www.deptmedicine.utoronto.ca</u>





- @uoft_dom
- @uoftdomchair

http://www.deptmedicine.utoronto.ca/communication-resources

I've learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.

Maya Angelou, American author and poet



Questions?

