

2014 Duke AHEAD Grant Proposal

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(Limit 5 pages)

**Title:** Identifying Health Professions Educator Competencies: A useful process and tool for self- and 360-assessment, faculty development programming and promotion criteria

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**Focused question:** What are the required competencies (skills, knowledge and practice behaviors) of health professions educators and how can the competencies be used to develop self- and 360-assessment tools to inform faculty development programming and promotion criteria?

**Background:** In the ever-changing context of the American healthcare system, health professions educators are increasingly challenged and yet insufficiently resourced. Furthermore, there are changing and growing accreditation requirements and expectations from home institutions and professional organizations for many, including those in teaching roles. Despite the fact that health professions educators have been successful in designing and teaching in programs that produce competent graduates, the aim of excellence in education continually pushes schools to ensure that evidence-based teaching practices are used to guide program development, implementation and evaluation. Additionally, it is increasingly expected that educators develop educationally-sound and innovative curricula, are student-centric in their approaches, and take responsibilities to shape the future of health professions education. Unfortunately, there is no clear set of nor is there consensus regarding competencies that both validate and recognize the scope of responsibility of health professions educators and the complexity of that role. This project was undertaken to address this gap.

The PIs of the project proposed here have collaborated for several months to begin to outline and seek consensus on competencies that have applicability for faculty teaching in medical, nursing, physician assistant and physical therapy programs. A review of literature and members' personal work yielded a set of nationally-endorsed competencies for nurse educators (Halstead, 2007), lists of competencies for medical educators (Harden & Laidlaw, 2013; Srinivasan, et al, 2011), and an institution-based list of competencies for physical therapy educators (Department of Physical Therapy, n.d.). The team compiled these lists to identify commonalities and unique areas; sorted them into 8 unique areas of competence that had relevance across disciplines; shared the competencies with peers to seek feedback on their relevance, importance, and clarity; and refined the list of competencies.

This process has generated excitement among the health professions educator community at Duke University, and there is a commitment to continue to move forward with refining the list of health professions educator competencies. Once the list is refined, the Duke community sees great potential for using the competencies as the basis for the specific aims outlined below.

**Specific aims:** This project seeks to refine the competencies and then use them to develop both self- and 360-assessment tools. The tools will then be used to help individual educators (a) “map” their strengths related to educator knowledge, skills and achievements and (b) develop plans for ongoing development in the role. The tools also will be used to identify the professional development needs of health professions educators as a whole, thereby helping institutions develop faculty-wide development programming in teaching and learning. The project will also relate the competencies to promotion criteria specific to health professions educators.

**Methods**—The PIs will use this opportunity to continue and enhance the development and implementation of Health Professions Educator Competencies with the above aims guiding the process.

### ***Focus Groups***

While the Educator Competencies in their current form have been drafted, revised and vetted with a small number of those not directly involved in their conception, it is critical to gather input from a diverse group of faculty. Upon IRB approval, the PIs propose to conduct one focus group for each of the 8 competencies with approximately 10 participants/focus group. A trained facilitator will be used to moderate the focus group sessions. These sessions will be recorded, transcribed, de-identified and the qualitative data analyzed with the goal of refining each of the competencies.

A proposal to share the process and goal of this project was submitted to the ACGME national conference as a workshop and accepted. The facilitators (PIs) will use that opportunity to engage the participants of the workshop and gather additional feedback on the Educator Competencies.

### ***Development of Assessment Tools***

PIs will identify and work with an assessment expert to use the competencies as framework to develop assessment tools. Development of assessment items, scale, format, platform, etc will occur for a self, 360 and supervisor assessment. Each of these will go through a testing phase in order to establish reliability and validity.

### ***Pilot Implementation***

Given the initial motivation to develop these competencies (as a guide for faculty development needs assessment) and the shared characteristics of the Duke AHEAD members (dedicated to their role as educator), the PIs plan to recommend offering members (to be determined if this will be a small subgroup as a pilot or all members) to self assess using the newly developed tool. Another option (although not definitive at this time) is to ask Duke AHEAD members to identify peers who could evaluate them in their educator role and use the 360 assessment tool.

Before collecting these data, the project will be submitted to the IRB for review.

### ***Data Analysis***

Quantitative and qualitative data from the focus groups, national workshop and self-assessments will be organized and analyzed. All data will be de-identified and the PIs do not intend to link any responses to responders in any way. The PIs will use data findings to further refine the competencies and then begin to identify gaps in faculty development offerings – prioritizing areas where faculty identify themselves as less competent.

**Challenges:** As with most research projects, there are inherent challenges in the implementation of the proposed methodologies. The PIs anticipate challenges in recruiting busy professionals to participate in focus group sessions. One of the ways we plan to overcome this challenge is by plying potential focus group participants with food. Another anticipated challenge will be the translation of the 8 Educator Competencies into assessment tools. These tools will necessarily require the appropriate level of item granularity and scale development for accurate self-, 360- and/or supervisor assessment. By collaborating with an assessment design consultant, the PIs seek to overcome this challenge. Pilot testing of initial assessment tools will also inform the development process by elucidating any issues unanticipated during the translation/design phase of tool development.

**Sustainability:** The PIs believe this work will foster ongoing interprofessional relationships with our Duke AHEAD partners and with faculty inside our own Duke health professions community. The project outcomes, including the 8 well-defined educator competencies, assessment tools, recommendations for areas of faculty development and work with leadership, AHEAD and AP&T committees, will be valuable assets for continued and future use within our educator community.

**Opportunities for subsequent scholarship:** The PIs believe this work will be meaningful to colleagues across the country. Just as the initial work was accepted as a workshop for a national conference, we plan to share our findings to promote the work of Duke AHEAD and also to support others in using these Competencies in a way that enhances health professions education and supports health professions educators in their teaching roles. We plan to develop and submit proposals for additional workshops, abstracts and a manuscript describing the process and outcomes.

**Broader Impacts:** The PIs will recommend using the educator competencies as a way to categorize all Duke AHEAD offerings and for individuals to organize their professional development efforts/accomplishments (expected to be helpful for e-portfolio).

The PIs also envision that the competencies would be used by health professions educators at schools other than Duke and that our colleagues might even be called on to provide consultation on their use for ongoing faculty development and evaluation.

Lastly, the PIs will work with Duke AHEAD Leadership and the Executive Committee – together with AP&T committee leaders – to identify opportunities to inform committees on faculty members professional development efforts and accomplishments in their role as educator.

**Timeline:** see table below

Exploratory Research	Completed
Submit project proposal to IRB for review and approval	Nov 2014
Recruit focus group participants	Nov 2014 – June 2015
Conduct 1 focus group session/competency	Dec 2014 – July 2015
Create focus group transcriptions and analyze data	Dec 2014 – July 2015
Use national conference (workshop proposal accepted) to gather additional feedback from national colleagues	March 2015
Work with consultant to design assessment tools	July 2015 – Aug 2015
Recommend initial pilot or implementation assessment tool as self assessment (inviting all Duke AHEAD members to assess themselves across the 8 areas)	Aug 2015
Recommendations for institutional faculty development programming (based on data gathered from focus groups and Duke AHEAD member de-identified self assessments)	Aug 2015 – Sept 2015
Recommendations for faculty promotion criteria (based on data gather from focus groups)	Aug 2015 – Sept 2015

Formal scholarly write-up of results for submission to journal and/or scholarly presentation of results at conference	Sept 2015 – Oct 2015
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## References

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