

Pearls for Early Career Faculty Educators  
Academy of Educators  
September 26, 2014

I have always been convinced that "thinking out loud" is critical to optimal bedside teaching. The underlying idea is that the teacher should never assume that a concept is too simple to review or discuss. The idea is also to allow the learner to obtain an upfront view of the teacher's entire thought process in approaching a clinical problem or finding. – Dr. Andrew Greganti

Know where your learners are even if it means sending them a short quiz beforehand. Also be enthusiastic, sometimes hard if you are exhausted, but can't expect your learners to be enthusiastic if you are not! –Dr. Anne Mounsey

The advice I tried to keep is to say "yes" – even at first, if the job does not seem to be exactly your "dream" job, say "yes", get involved, get a seat at the table. Often, you can shape the job, and the job will shape you! – Dr. Deb Bynum

Always have a manuscript that you are writing at all times. - Dr. Anthony Charles

Before implementing a new educational strategy/ intervention, talk to someone with experience doing educational research and see if you can design a way to measure the effectiveness of your intervention. Much better to do this before you start your new program, not after. –Dr. Kevin Biese

- Don't be afraid to start something (or put time and effort into something) for fear it might not work out or amount to anything. The simplest things can turn into great successes and nothing will ever get accomplished if you don't get it started. If you look back over time, you realize how significant something would have become if you had only started it when you first thought about it.
- Be flexible about where your career might take you. Look for opportunities and don't be overly dogmatic about what you want to have happen and/or how it's going to happen. Take advantage of even small opportunities and be willing to volunteer for unglamorous things to get started.
- Finish what you start and don't be late in getting things done that you commit to. People will notice if you do things well but also if you are on time. –Dr. Michael Meyers

Keeping at least one mentor outside of my department and even outside of the school has continually provided me with fresh perspectives without pressure or bias. How to go about that? Remember the people important to your career goal development in medical school and residency. Remember that person you connected with at a meeting. And just contact them with a question, then keep conversation going. Learn about what they are doing, as well. A cup of coffee or glass of wine doesn't hurt. I think that some of the best mentoring relationships really just sort of happen--you don't need to ask them to be your mentor. You just click. –Dr. Erin Malloy

I am well aware of the traditional advice about academic success involving selecting a niche, negotiating protected time, etc. None of that applies to me. So, if my experience is relevant, recognizing that it applies to me but not to everyone, my advice is to search inside yourself to find what is most meaningful to you in terms of happiness and satisfaction; then, pursue it. For me, happiness at work not only results in productivity but in happiness at home, patience with families, etc. (The converse is also true.) The limiting factor I'm frequently told by trainees and junior faculty is that they don't have that self-awareness, often because there are many appealing options or because their focus is on what jobs are available. The following projective test may be helpful: If, say 10 years from now, someone you don't know asks a colleague of yours who you are, what would you want them to say? It may help reveal what is important to you. – Dr. Ken Roberts

Esse quam videri. NC state motto - to be rather than to seem. To me this means be authentic, be marked by your integrity and your work ethic. –Dr. Allen Liles

1. Figure out what niche you hope to fill (must be one that is a realistic possibility)
  2. Make sure you have all the knowledge and skills needed to fill that niche. If you do not have the knowledge and skills, get them.
  3. The pearl: make sure the “powers that be” are fully aware of you, your skills, and your (eventual) desire to fill that niche. Do not assume that just because you have the right skills that people in power will notice and automatically consider you for the job. Actually schedule a “get to know me better” meeting with the Division Chief/Dept Chair/other appropriate leader to introduce yourself and describe your interests and (more subtly) your talents.
  4. Continue doing all you can (volunteering if needed) to utilize and enhance your skills applicable to that niche. In other words, be visible on the radar screen.
  5. Then cross your fingers that your desired niche becomes available. If it does, and you have done #3 and #4, then hopefully you will be at the top of the list of candidates to fill the niche.
- Dr. Christopher Klipstein

**FIND A NETWORK OUTSIDE YOUR OWN NICHE AND COLLABORATIVELY ENGAGE IN RESEARCH! –Dr. Amelia Drake**

“You have time! That is my pearl. Let me explain a little. New faculty members often feel immense pressure to contribute in all domains of academic life. This pressure is sometimes real (messages from chair, promotions committee etc) but more often it is a self-imposed burden. The beauty of academic life is that you can change your focus over time. Follow your passions. Teach a lot. Get really good at seeing patients. Keep your ears and eyes open for opportunities to get involved in research projects and leadership roles...but don't over-commit. You probably have a 20-30 year career ahead of you. Keeping your professional life reasonably in balance will help you keep your energies for those 20 years. Departments don't want burnt out faculty. Don't always say no, but say yes selectively. –Dr. Beat Steiner

Find like-minded faculty and “stick with the plan” to teach- just like the practice of medicine, you should practice teaching every day and take the feedback you get to heart. Have fun! –Dr. Ana Felix

Think about what you love to do clinically (off-site clinic, OR, staffing resident clinic) and from an education standpoint (medical students, residents, course administration, curriculum development, etc.), and then negotiate to maximize those experiences in your job description while minimizing the experiences you don't. If you don't know, try it out. Early in my career, I didn't realize I actually really love course administration until I tried it. Being a clinician educator is like having 2 jobs at once so you need to focus in those two arenas on the tasks/responsibilities that you enjoy. The reality of course is that you have to take some of the bad with the good but think intentionally about what those will be. – Dr. Alice Chuang

Identify and engage a career mentor to guide you through advancement in your academic career. This is crucial and essential to accomplish early. In addition, everyone should have multiple mentors that satisfy diverse areas of interest with professional and personal life. –Dr. Kenya McNeal-Trice

Develop some specific area of focus in medical education for your scholarly productive activity. Have one or two mentors in that area and early on develop a “game plan” which will optimize your ability to produce tangible scholarly work (i.e. published articles, workshops/posters at national meetings, membership on national committees in organizations like APPD, COMSEP, etc.). The idea is to be creative in developing new approaches to medical education and to get your ideas and supporting work into the national discussion. – Dr. Harvey Hamrick

“Some people hesitate, feeling inferior, while others gain experience becoming superior.” – Dr. Julie Byerley (via Dr. Anna Marie Connolly)

Say yes sometimes. – Dr. Julie Byerley

Build sessions around clinical cases, keeping discussions pertinent to the actual practice of medicine. If students additionally are given time to learn the basic science of the topic of the session as well as its clinical applications, they are more likely to remember it. If a live patient is available, who can give the students a human story and picture to associate with their learning, the lesson will last. – Dr. Bob Gwyther

As a senior individual among young learners, without realizing it you become a model for them to accept or reject. One cannot be “in performance mode” all the time and hopefully the real substance of oneself will offer positive elements to emulate. Finally in that realm, learners must see that you enjoy what you are doing, and you exemplify that with enthusiastic performance, which can help keep learners interested by transference of the positive energy for the task at hand. – Dr. Wally Brown

The teachers is forever a learner. –Dr. Wally Brown