Documenting your Teaching

Wayne State University School of Medicine Office of Faculty Affairs

Overview

Obtain your SET Scores

Demonstrate quality teaching

- Annual Documentation
 - CV
 - Teaching Grid: Selective Salary ("merit" increase)
- Promotion and Tenure
 - Teaching Portfolio
 - CV
 - Personal Statement

Improve your teaching Disseminate quality teaching

Obtaining SET scores

Charlene Brain Office of Faculty Affairs

SET Scores

- The Provost Office instructions for P&T require inclusion of a longitudinal SET score report at the end of the teaching portfolio
- The SET scores do not count against the 20 page teaching portfolio limit
- SET Scores can be obtained through Academica
- Link to step-by-step directions: <u>http://set.wayne.edu/weebly/uploads/2/2/2/5/</u> <u>22253384/faculty directions cognos repts (1)</u> <u>.pdf</u>

Finding Your SET Scores

Faculty_WorkSpace - IBM ×

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🕆 Faculty_WorkSpace

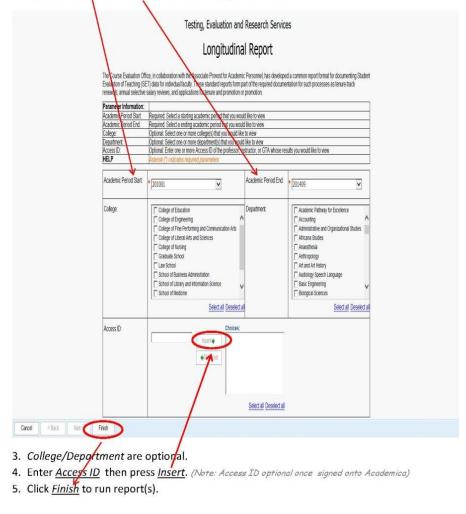
SET - Testing, Evaluation and Research

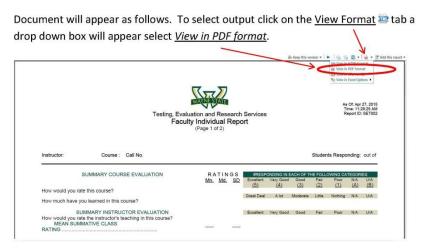
Testing, Evaluation and Research Services							
[Return to Main Menu - Pipeline use only]							
Submit	Report ID	Report Name	Business Purpose				
Chair	SET001	Chairs Department Summary Report	This report has been developed for chairs to summarize results for all the faculty in the entire department using the three contract items. Deans may also use this report to view a few or all departments in their college.				
Faculty	SET002	Faculty Individual Report	This report was developed to summarize the entire SET survey for faculty on an individual level.				
Deans, Chairs and Faculty	SET004	Longitudinal Report	This report has been developed for faculty to document their performance longitudinally on the three contract items going back multiple senseters. This was intended to help with selective salary, promotion, and tenure processes. It can be adjusted for one to seven years. Chairs and deans may also use the report by selecting one or more faculty members by entering access ids, or an entire department or college depending on their access level. If you do not have access to a view, you will see a blank page.				
			All reports may be saved as PDF, excel, HTML, or CSV. CSV allows the most flexibility in sorting many records but is the most difficult in terms of printing. PDF is the best option for a report which fits nicely on a page. Another option you may select is to print in portrait or landscape.				
Mar 23, 2016							

Microsoft Word 2010

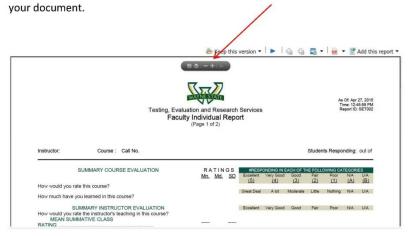
Longitudinal Report Requests

- 1. Select Academic Period Start from drop down menu.
- 2. Next select Academic Period End from drop down menu.





Hover over the top of the report until the following action bar appears to Save or Print



Documenting Teaching

Document ALL teaching activities & achievements

- Range of settings in which you teach
 - Individual/small group (lab? rounding?)/large group
- Course development
- Curriculum design
- Instructional innovation
- Mentoring and advising activities
- Supervisor, peer and student evaluations
- Student success after graduation
- Invitations to teach outside the SOM
- Teaching awards, esp. peer recognition as an excellent teacher

 For Laboratory Supervision and Clinical Teaching: Documentation can be particularly challenging since much of your teaching just "happens" – make sure you keep track of this. CV – Teaching components

Let's review our sample CV entries (see Word Document)

Annual Review and P&T: Teaching Grid

Submit 3 years' grids annually for merit review For P& T, submit grids since appointment or promotion

Type of Teaching Activity and Type of Learners	Your Role	Total # of contact hours each year	Total # of hours in preparation each year	Total # of Learners	Evaluation: Mean, SD (if appropriate and available; scoring scale; other evaluative/o utcome data)
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Teaching Grid

List types of teaching activities in the teaching grid **according to effort**, **from most to least**. Consider the following categories:

- Lectures
- Small-group interactive instruction
- Clinical bedside instruction
- Clinical procedure instruction
- Clinical ambulatory instruction
- Laboratory precepting
- Online instruction
- Mentoring/advising (Indicate number of mentees and time commitment for each: medical students, graduate students, postdoctoral fellows, faculty, others)
- Essays/Theses/Dissertations directed
- List students by name, level, title of project.
- Visiting Professor/Lecturer (e.g., invited short courses or lectures plus interactions with students/trainees)
- Other

In addition to documenting teaching at Wayne State University, you may include teaching at other institutions.

Teaching Grid

The last column of the grid should include summary evaluation data or other evaluative or outcome data.

Narrative information following grid

Describe your activities in curriculum development and administration of teaching, such as:

- Course/curriculum development and instructional design/development
- Departmental or school educational administration
- Educational committees or task forces (local, regional, national/international)

Teaching Grid Sample Entries

Let's review our Teaching Grid entries (see Word Document)

Why Maintain a Teaching Portfolio? (WSU Office for Teaching and Learning)

Development

 Reflection, clarify values, establish goals, identify areas for improvement

Demonstration

 Job search, presentation to peers, making the case of excellence in your teaching

Evaluation

Awards (merit), tenure, promotion

Teaching Portfolio – 20 pp. total **For Promotion and Tenure only**

Compose a **narrative that describes the cumulative "landscape"** of your teaching, teaching activities and outcomes. This is more detailed than the teaching component of your personal statement. Usually 2 – 3 pages.

Note: You may wish to introduce your approach to teaching in an introductory paragraph. *Consider:*

- Demonstrate reflection, assessment, and skill improvement over time
- Convey your identity as a teacher
- Define the role of teaching in relation to other responsibilities (research, service)

Teaching Portfolio: Narrative

NEXT:

Describe the scope of your teaching, including the settings in which you teach and the activities you carry out, such as course direction, delivery of lectures, mentoring, precepting, and advising. (usually 1 - 3 pp.)

Suggestion: Write at least one paragraph about each of your major areas of teaching.

Emphasize **innovations and/or quality improvements** you have contributed to teaching wherever you can.

Teaching Portfolio: After the narrative...

- Include teaching grids since appointment or promotion
- *Provide sample evaluation if you wish*
- Discuss significance of evaluation data (optional)
- Add documentation of recognition for your teaching awards, letters, peer review, etc. (optional)
- Document professional development activities in teaching
- Document dissemination of teaching activities, e.g., conference presentations, database submission (ex.: MedEdPORTAL)
- Letters from learners, colleagues, course directors, program directors, etc. are welcome

Teaching Portfolio Additional Notes:

- Condense grids if needed
- Additional evaluative data can be provided in the "Miscellaneous" section of the dossier

Beyond the Teaching Portfolio: Improve your Teaching and Conduct Medical Education Research

WSU Office for Teaching and Learning

http://www.otl.wayne.edu

Stanford Medical Teaching Course

Irichlin@med.wayne.edu

Your society may provide teaching development, too.

Disseminating Your Work

- The 3 P's
 - Public
 - Peer Reviewed
 - Platform for Others to Build on

Tewksbury, et al, Scholarship of application: When Service is Scholarship, MedEdPORTAL, 2009.

Educational Scholarship slides from: Walvoord E, Hobson-Rohrer W, Bogdewic S. Getting Promoted: Turning your Clinical Work into Scholarship. MedEdPORTAL; 2014. Available from: <u>www.mededportal.org/publication/9694</u>

Educational Scholarship Example

- Team Based Learning session presented in Physiology course
 - New case developed using Audience Response System
 - Collaboration between basic science and clinical faculty
 - Presented to 1st year students
- Published in MedEdPORTAL
- Workshop developed to assist others in creating TBL cases, peer-reviewed and presented at national meeting

Education Scholarship Example

- Associate program director acts as a mentor to a resident who needs remediation
- Collaborates with a national group of educators to create a *peer-reviewed workshop* on Remediation
 - Presents at national society meetings
 - Presents portions at local education workshop
- Publishes on *MedEdPORTAL*
- Continues with peer mentoring group to collaborate on other projects
- Authors asked to be *reviewers* for educational workshops

Educational Scholarship

- Students underperforming on Step 2 & 3 exams
 - Introduce more problem solving in early years
 - Curricular innovations Team Based and Problem based Learning (TBL/PBL)
 - Cases written
 - Student evaluations (self & team)
- Data analysis of change in learning outcomes
 - Early analysis
 - Step 2 & 3 exam scores
 - Residency placements
 - Residency program director survey
- Presentations & Paper

Explore MedEdPORTAL

A peer-reviewed, open-access journal that promotes educational scholarship and dissemination of teaching and assessment resources in the health professions

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Search Publications

MedEdPORTAL Selected for Inclusion in MEDLINE

The Association of American Medical Colleges is pleased to announce that *MedEdPORTAL: The Journal of Teaching and Learning Resources* has been selected for inclusion in MEDLINE, the premier bibliographic database of the U.S. National Library of Medicine. Selection is determined by the recommendations of an expert advisory committee that evaluates journals based on a rigorous review of scientific quality and scope. Only 15%-20% of journals that apply are recommended by the committee. MEDLINE contains bibliographic citations from more than 5,000 biomedical journals published worldwide and is freely searchable using PubMed at http://pubmed.gov.

Founded in 2005, *MedEdPORTAL* was designed as a repository of materials for faculty to submit scholarly works for peer review. Today, it has grown into an open-access publication, internationally recognized as the preeminent journal for publishing educational resources in the health professions, while providing free access to thousands of high-quality educational materials. *MedEdPORTAL* is accessed by over 4,500 academic and health organizations in more than 175 countries, and publications are downloaded approximately 3,000 times each month.

Inclusion in MEDLINE will advance *MedEdPORTAL's* growth by increasing its visibility and accessibility of published content. Scholars, researchers, educators, and health care practitioners around the world use MEDLINE as the authoritative gateway to access content from the most prestigious biomedical and health journals. In addition to equipping a broader community of readers with access to innovative and high-quality educational tools and resources, inclusion in MEDLINE solidifies *MedEdPORTAL* as the premier destination to publish teaching and learning materials in the health professions.

Editor-in-Chief:	Grace Huang, MD
	Harvard Medical School
Online ISSN:	2374-8265
Acceptance Rate:	30%
Downloads per Month:	3,000
Publication Frequency:	Continuous
Publications per Year:	250
First Year of Publication:	2005

Call for Submissions: Justice, Disparities, and Meeting the Needs of Our Most Vulnerable Populations

MedEdPORTAL is actively seeking submissions that feature curricula or learning activities that address an important topic that is both timeless and timely in medical education – the care of our most vulnerable populations. We have a responsibility as educators and leaders to highlight these issues in a scholarly way through commentary, research, and

MedEdPORTAL Publications

- Free online publication service
- Open to the general public around the globe
- **3. Peer reviewed** health education teaching & assessment materials
- 4. Publication includes intro, background, instructor guides and all educational tools, implementation history and advice

Sexual History Taking Curriculum: Lecture and Standardized Patient Cases

Rita Lee, MD, Danielle Loeb, MD, Austin Butterfield, MD

Abstract

This sexual history taking module engages medical students in discussion and practice with standardized patients in taking an inclusive (orientation- and gender-neutral) sexual history. An inclusive sexual history is critical to providing comprehensive patient care and an environment supportive of lesbian, gay, bisexual, and transgender (LGBT) patients. This case was developed for first- and second-year medical students who have had basic communication skills training. This session was designed to be delivered in one 40-minute large-group session followed by three 1-hour-long small-group sessions (with one third of the class participating in each session) with standardized patients. Four students per group is optimal. Faculty training should take approximately 30 minutes prior to the session as well as participation in the large-group session.

The materials associated with this publication include guidelines for faculty facilitators and students to prepare them for the large-group discussion and small-group practice sessions with standardized patients. Also included are four standardized patient cases, a slide presentation using an audience response system for the large-group session, and an evaluation form.

The average response to "Overall, this session was effective in improving my sexual history taking skills" has been 4.3 out of 5. Our communication needs assessment has shown a statistically significant improvement in those reporting increased importance, confidence, and performance of a sexual history between the first and second year of medical school (before and after the curriculum). In addition, students reported performing more components of the sexual history after the session. This sexual history taking module has been incorporated into our Foundations of Doctoring communications curriculum and has been rated as highly effective by learners. Performing an inclusive sexual history is critical to providing comprehensive patient care as well as providing an environment supportive of LGBT patients.

Please see the end of the Educational Summary Report for author-supplied information and links to peer reviewed digital content associated with this publication.

1

Introduction

It is well known in the literature that health care providers do not routinely perform a complete sexual history.^{1,2} One of the most commonly cited reasons is lack of education and lack of comfort around how to do this. We recognized that our core communications curriculum did not include sexual history taking. Thus, this session was created to address this need and to allow students to practice a challenging communications skill.

In addition, an inclusive sexual history is one method lesbian, gay, bisexual, and transgender (LGBT) patients use to

Originally published on July 30, 2014

MedEdPORTAL Publications, 2014

recognize a health care provider as being LGBT-friendly.³ A secondary goal of this educational session was to improve student awareness of LGBT health disparities and to provide foundational skills in caring for LGBT patients, predominantly from a cultural standpoint. Most medical schools, including our own curriculum, provide minimal education on LGBT health topics.⁴

In 2008, we conducted a needs assessment of our communications curriculum. We found that while 87.7% of our students felt a sexual history was important, only 70.1% (p < .0001) felt confident in conducting and 51.9% (p < .0001) routinely performed a sexual history. Of the students, 72% and 85% reported wanting to learn about and practice sexual history taking skills, respectively. Thus, this curriculum was developed to address this need.





Lee R, Loeb D, Butterfield A. Sexual History Taking Curriculum: Lecture and Standardized Patient Cases. MedEdPORTAL Publications; 2014. Available from: https://www.mededportal.org/publication/9856 http://dx.doi.org/10.15766/ mep_2374-8265.9856

"Educational Summary Report" – Content & Format

I. Title

- II. Abstract
- **III.** Educational Objectives
- IV. Introduction
- V. Methods
- VI. Results
- VII. Discussion
- VIII. References
- IX. Appendices

Word Document
10 pt, Calibri
Bold Headings
1" margins

Questions?

Documenting your Teaching

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