For the last fifteen years I have been the director and primary facilitator of a longitudinal teaching scholars program. In that time, I have worked with 158 clinical teachers and educators at the University of Illinois-Chicago College of Medicine, and affiliated community sites. I would like to share some of the lessons I have learned about the practice of faculty development and what it means to be a faculty developer. Let me begin by describing our longitudinal program, the Scholars for Teaching Excellence Faculty Fellowship. Each year I recruit a cohort of health professions faculty who are interested in improving their skills in instruction and curriculum development. We meet for one afternoon a week for almost eight months. During that time we read about, discuss, and reflect on teaching in classroom and clinical contexts. Participants in the program also observe highly regarded teachers. Each of the teaching scholars develops and implements plans to improve his or her teaching. Many also begin to develop new curricula and educational programs. I would like to reflect on my experiences to chart my own deepening awareness of what it means to be a faculty developer.

The Scholars for Teaching Excellence is a faculty development community or “teaching commons”. As described by O'Sullivan and Irby¹ this faculty development community is composed of the participants in the program, the facilitator or faculty developer, and the faculty development program activities. The teaching commons is situated within the workplace community where clinical faculty care for patients, teach, conduct research, and provide service to the community. The participants, the facilitator, and the faculty development program connect the faculty development community with the workplace community. Both of these communities exist within the larger institutional context and culture. Within the faculty development community the facilitator and the participants learn with and from each other. The activities or curriculum of the teaching scholars program allow participants to learn about teaching and reflect on their capabilities and skills. Our activities also afford opportunities to understand the influence of the institutional culture on our teaching and educational work.

Lesson #1 - Faculty development is what participants choose to pursue to improve their capabilities

The participants in our teaching scholars program must apply for the fellowship, although no one is turned away after completing the
application process. Participants join the fellowship for their own personal reasons and sometimes at the request of their department heads. Important factors in choosing to apply to the program include prior experiences of teaching, perceptions about current teaching capabilities, and the desire to be connected to a group of likeminded clinical teachers. Steinert reminds us that faculty development is “all activities health professionals pursue to improve their knowledge, skills, and behaviors as teachers and educators, leaders and managers, and researchers and scholars, in both individual and group settings.”

Faculty development is what clinical teachers and educators choose to pursue in order to improve their capabilities. While I may facilitate learning and practice through faculty development, it is the participants who pursue and engage with faculty development activities.

Lesson #2 - The improvement in teaching that is possible is influenced by values, beliefs, and norms

Teaching is complex. There are many instructional activities that constitute “effective teaching.” Teachers need to select and apply instructional methods or activities in specific educational contexts for learning to occur. Experience and practice are also important. Prior experiences and interests allow some teachers to appear to be more intuitive in their teaching. As D’Eon and colleagues argue, effective teaching is more than simply the application of technique or a craft. Teaching is a social practice that is guided by the values, beliefs, and norms of the workplace community and institutional culture. As the facilitator of the teaching scholars program, I need to be attentive to the beliefs and values about “effective teaching” that any cohort of participants has at the beginning of the fellowship. I am able to influence and guide the development of group norms and expectations about teaching and learning through my own teaching and role modeling. Not only do I demonstrate the instructional skills that are an essential part of the curriculum, I also strive to embody an attitude towards learners. Collaborative learning activities are also important in providing participants with peer support as they move from a more teacher-centered to a more learner-centered approach to teaching.

Lesson #3 - Clinical teachers are seeking a community of like-minded colleagues

The participants in the faculty fellowship are genuinely motivated to enhance their teaching skills. Some perceive the organizational culture as one that does not value teaching as highly as they do. They join the fellowship because they are looking for like-minded colleagues who share their passion for teaching. As a faculty developer I use processes of negotiating, constructing, and attuning to shape the teaching commons of the fellowship. Negotiating is the process of acknowledging and working within the goals, structures, and routines of the workplace community. I design and refine program activities so that the participants learn to work more effectively within changing educational environments. Some participants need to learn new teaching methods for a medical education curriculum renewal. Others need to learn how to respond to evolving accreditation standards. I help participants make sense of the educational environment and to align their goals with those of the educational workplace. In constructing sessions within the program, I create opportunities to demonstrate and practice teaching skills that are required in the workplace community – and that reflect the values and beliefs of learner-centered teaching that are central to the faculty development community. I use the process of attuning during each session to recognize and respond to participants’ learning needs. Over time working with many different participants, I have developed an understanding of the questions and challenges faced by clinical teachers that allows me to adjust the focus and pace of activities in the moment. Reflective discussion, building relationships among participants, and introducing the language and frameworks of education contribute to a supportive community within which participants develop their identities as clinical teachers and educators.

In closing, in my experiences over fifteen years of practice I have learned important lessons about the participants’ motivations to participate in the teaching scholars program, the culture that we create together within the teaching commons, and the processes that I use to create a community of clinical teachers.
References


2. Steinert Y. Faculty development: core concepts and principles. In Steinert Y, editor. Faculty Development in the Health Professions: A Focus on Research and Practice. Dordrecht: Springer; 2014; p.4.

