

MEDICAL AND HEALTH PROFESSION

Faculty Development Recommendations

MEDICAL AND HEALTH PROFESSION FACULTY DEVELOPMENT CONTEXT

The world of medicine and health is rapidly changing, and these changes have profound implications for medical education and practice. These changes include demographics, epidemiological transition, environmental challenges, emphasis on clinical quality and patient safety, financial challenges, and rapid advances in information technology, big data, and artificial intelligence. While these changes will vary within and between countries, faculty often receive limited training related to educational principles and teaching methodologies, student assessments, and on content related to local priority needs in the communities the institution serves including, public health, communication, and topics relevant to the social determinants of health.

To increase the number and quality of the teaching faculty and to improve their skills in education and research, some institutions establish a faculty development program either as part of an education department or as a separate program. Such departmental development programs support continuous professional education using information technology and other communication tools. Faculty development programs may draw on various resources from the other departments at their university such as social and political sciences, engineering, other faculties of health sciences, and community-based organizations, all to shape a comprehensive curriculum on the social determinants of health and community development to prepare medical students for their community placements, and to support the community engaged service-learning education program. Faculty members can be instructed in pedagogical principles of interprofessional education and active student-centered and service learning during student community placements. Such programs can provide teaching and pedagogical resources to community practitioners recruited as adjunct faculty to improve their attributes/skills to be effective mentors, teachers, and preceptors.

FACULTY DEVELOPMENT RECOMMENDATIONS

Practice Recommendation 1: Create policies and practices that meet the faculty development standards and indicators as outlined in the [Indicators for Social Accountability Tool](#).

Standard: The institution assesses faculty performance and community engagement; and provides faculty development programs aligned with the goals of socially accountable health professional education including active, student-centered and community-based learning.

Indicators:

1. Proportion of faculty who completed clinical skills training relevant to identified priority health care needs.
2. Proportion of faculty who completed professional development in effective community engagement.
3. Proportion of faculty who are engaged in social accountability aligned education, research, and service.
4. Proportion of faculty members from the local health workforce (including practitioners and community members) who have completed courses on teaching methodologies including inter-professional education and community service.
5. Faculty, especially those from underrepresented groups, receive personalized development and career enhancement.
6. The institution has a program to reward the quality of teaching and community engagement.
7. Faculty are apprised of best practices and strategies to respond to society's health needs and are recognized and rewarded for doing so.
8. The institution includes Social Accountability Standards as part of recruitment, hiring (contracts), orientation, and promotion.
9. The institution provides a program to bring awareness of and promote Social Accountability.

Practice Recommendation 2: Provide training courses for faculty on how to align health workforce education with community needs.

Standard: Faculty development programs include content on essential elements of health workforce education for the public good and instruction on teaching tools to deliver that content.

Indicators:

Course content that contains:

1. Social Accountability: Assist faculty with development and implementation of local projects that promote alignment with community needs
2. Interprofessional Education and Collaborative Care: Delineate the elements of a curriculum focused on community needs
3. Appreciative Inquiry: Build on identified institutional and faculty strengths
4. Transformational Leadership: Assist faculty in developing or using the levers of change in education, e.g., accreditation, program evaluation, leadership, research
5. Teaching tools: specific, measurable objectives, realistically designed lesson plans, focus on application of knowledge, high level of participant engagement, assessment aligned with objectives.

CONCLUSION

Faculty development has a two-fold purpose: 1) ensure that the process of health workforce education focuses on engagement with communities and prioritizes the needs of communities, and 2) provide faculty with content knowledge and ability to apply key processes related to social accountability, teamwork, appreciative inquiry and leadership as well as the teaching tools to deliver content effectively.

ACKNOWLEDGEMENTS

We acknowledge the members of the Health Workforce for the Public Good (HWPGP) Committee, representative of global experts, who reviewed and provided feedback and suggestions to this statement on how to improve their skills in education. Members of the HWPGP include William Burdick (United States); Natalie Gordon (Australia); Jyotsna Sriranga (India); John Jefferson Besa (Philippines); Louricha Opina-Tan (Philippines); Avinash V Prabhu (India); Jadhav Sonali Tarachand (India); Claudia Liliana Jaimés Peñuela (Colombia); Jill Konkin (Canada); Kari Norheim (United States of America); Catherine Reeves (United States of America); and AM Ciraj (Oman)

REFERENCES

Schalkwyk S, Blitz J. Curriculum renewal towards critically conscious graduates: Implications for faculty development. *Medical education*. 2024;58(3):299-307. doi:10.1111/medu.15216

Moaveni A, Nasmith L, Oandasan I. Building best practice in faculty development for interprofessional collaboration in primary care. *Journal of interprofessional care*. 2008;22(S1):80-82. doi:10.1080/13561820802028584

Baker L, Reeves S, Egan-Lee E, Leslie K, Silver I. The ties that bind: a network approach to creating a programme in faculty development. *Medical education*. 2010;44(2):132-139. doi:10.1111/j.1365-2923.2009.03549.x