OHIO STATE UNIVERSITY
DEPARTMENT OF
PLASTIC SURGERY

FACULTY DEVELOPMENT
MANUAL
Introduction

This manual is designed to provide guidance to new faculty members in the Department of Plastic Surgery as they set out on their career journey. The recommendations in this document are based upon the experiences of senior surgeons in the Department. Many of these individuals were fortunate enough to work with more experienced, “veteran” faculty colleagues who took a personal interest in the development of junior faculty members. Other, not as fortunate individuals, had to figure out many of these principles on their own, sometimes later in the course of their careers than optimal.

By recording these recommendations in some detail, we hope to assist all new and junior faculty members in getting to work on the achievement of their career goals at the outset of their employment. Time and financial constraints, plus the increased size of the faculty, have somewhat reduced the “hands-on” role that senior faculty members can play in junior faculty development. We hope that this manual will serve as a print surrogate for a senior adviser, to supplement the contributions made by real people.

Not all of the recommendations in this document are appropriate for every faculty member. Individuals may pick and choose from the catalogue of suggestions, reject some as inappropriate, select others as completely applicable, and modify or adapt still others to fit one’s own, unique interests and career goals. The ultimate goal is for the new faculty member to be provided with a tool-box for maximizing academic career success.

1. Take charge of your own career development

Each faculty member must ultimately take personal responsibility for his or her own career development. Many individuals, especially those who take an academic position immediately after residency, don’t really think much about their career path; they are just happy to get started in a “real job.” Many people assume that all they have to do is work hard, and the attainment of career goals will take care of itself. The reality: it won’t.

Achieving desired milestones in an academic career takes planning, not just hard work. An immediate superior (division chief or Department chair) will usually have the best interests of the individual faculty member at heart, and will help to guide new faculty members along the desired path. But no one knows the specific interests and exact goals of a faculty member better than that individual himself or herself. Therefore, personal, careful, thorough input into career development must come directly from the faculty member. Take charge!
2. Put your personal and career goals in writing.

At the start of an academic career it is worthwhile for new faculty members to write down their specific career goals. This recording should be as detailed as possible, and should include goals in all three of the academic areas—Teaching, Research/Publication, and Service—plus specific personal (including family) goals. Clinicians should also record goals for their own clinical practice. And some determination should be given to relative importance of these goals, and projected amount of effort to be expended toward reaching each of these goals.

Once goals have been recorded, it is worthwhile to revisit this document annually, assess progress towards each goal, and revise as appropriate. Over time our goals may change, personal and family relationships may be altered, and the job environment may become different. A critical reassessment in light of the previous year’s accomplishments and changes in the work environment (e.g., new Chief, new practice plan, new clinical competitors) is very beneficial. Do this every year.

Once you have written your initial goals, it would be of value to review these not only with your immediate supervisor, but also with your Department chair at the start of your career. Then your rewritten goals should be reviewed with the division chief at the time of each annual review, and with the Chair at the time of your fourth year and all subsequent mandatory reviews.

3. Take responsibility for collecting and documenting all of your career-related activities.

It is critical to have a complete record of all of your accomplishments, particularly when it comes time to meet with your supervisor or Department chair about salary and, even more important, when it is time to consider promotion and/or tenure. The only way to be sure that everything appropriate is collected and recorded is for the individual faculty member to take personal responsibility for this task. Conferences which you attend, classes you teach, lectures you give, grand rounds you conduct, students you counsel, clinics you oversee, committees you serve, papers you publish, abstracts you present, awards you receive—all of these and similar activities should be diligently recorded as they occur. No one knows everything that you are doing except you!

In addition to the obvious, it is of value to record other activities such as community service and volunteer activities. A complete record is extremely valuable.
4. Charge an individual with the maintenance of all career-related records.

Usually you will be assigned a secretary or administrative assistant who can perform the essential function of keeping the records that you collect. Sometime this will be an individual with University experience, who has performed this function for other faculty members in the past and is familiar with the requirements for record documentation. But sometimes this can be an individual who is as new to the job as the faculty member himself/herself. One individual needs to be clearly assigned to the job of record maintenance for your academic career. Sometimes it is of benefit for an individual new to this type of position to seek advice from a more senior University employee, who is experienced in this critical function. Finally, it is worth checking your records periodically to make certain that entries are up-to-date.

5. Become familiar with the Research in View system and make sure that all appropriate entries are made and kept up to date.

As part of the process of collecting your academic information, you must become familiar with Research in View (RIV), the University’s tool for recording, documenting and promoting your academic career. To promote this system, the University has an online user guide and conducts periodic seminars for faculty members wishing to become more familiar with this process.

Once your data is entered into RIV, you can use this system to generate your personal CV (Curriculum vitae). You may still wish to have your own, separate, more simplified CV. Your unofficial CV might include more personal information than the University version, and can be structured any way that you like. A good way to start this document is to look at CVs of other, more senior faculty members, and decide the format that looks best to you. There is no “right way” to do this. But remember that the CV is often the way you are seen by the “outside world,” especially if applying for another job, a grant, etc. Entries in your own unofficial CV must also be made into RIV in the same timely fashion.

Your secretary or administrative assistant should also become familiar with this tool, and should be the one who carries out the actual entry of items. When it comes time to apply for promotion, or to document your academic progress, the official tool for achieving these objectives is RIV. For example, your official dossier for appointment renewal or for promotion and tenure is generated directly from your RIV file. Therefore, a complete and up-to-date RIV file is extremely valuable.
6. Prepare an NIH Biographical Sketch

An NIH Biographical Sketch is a short summary of your professional accomplishments, expertise and contributions to medical science or clinical care in your field. This document should be updated periodically and included in your CV, particularly if you are planning to seek national funding of significance.

7. Identify a person (or persons) who can serve as your career mentor

When a new faculty member comes to work at OSU, the first career mentor for this individual is usually the division chief. Meeting regularly with your mentor to discuss progress toward career goals is very important. Initially, your mentor can help you define and refine your career goals (see section 2 above). Then, on a regular basis (perhaps every 6 months, although the University requirement is only for annual review), you should discuss progress with your mentor. Your mentor also helps to put your goals into perspective relative to University, Medical Center (or Nationwide Children’s Hospital) and Department priorities, availability of research dollars, expectations for clinical productivity, etc.

In many situations, having more than one mentor can be quite beneficial. For those individuals whose faculty position entails significant research activity, it is often of great importance to have a separate research mentor (often a PhD). This individual can help with protocol development, grant writing, publication preparation, etc., especially when the faculty member’s specific area of research interest is different from that of the division chief. Tenure-track faculty members who have a PhD in addition to a medical degree may not require this type of supervision, but those who do not have a PhD seem to be much more successful when they find a research mentor.

8. Identify an area or several areas of clinical practice which will become your principal focus.

Throughout your career you will be most recognized for activities which are unique to you. One or more clearly defined areas of clinical focus can serve to distinguish you from all other practitioners of your specialty. When it comes time for promotion (see section # 9) the Department and the University will look for evidence that you have developed an area of expertise with national recognition for promotion to Associate Professor, and a national leadership role for promotion to Professor. The University recognizes and rewards people for clinical and academic excellence, not just competence. The more unique your areas of clinical expertise are, the more likely that you will be recognized not just locally, but also regionally and nationally, and accordingly rewarded. Your area of clinical focus may evolve or even change drastically over time; you should work to keep your focus on maintaining a unique area or areas of practice.
9. Determine specific areas of research activity and block out the amount of time you wish to commit to research.

Just as you need a distinctive area of clinical activity, you also need a unique area of research activity. At the start of your career it may be difficult to find a clear research focus. This is a circumstance where your division chief and more senior colleagues can assist you in getting started in research, but ultimately your direction may become much clearer when you are able to identify a research mentor. As noted in section #7, the Department and the University will be looking for a research focus with growing regional, and then national, recognition when it comes time for promotion and tenure.

It is also important to decide early on how much of your work effort you wish to devote to research. In general, physicians in the Tenure-Track should expect to spend a significant portion of their time in basic research. NIH requirements may mandate up to 75% of time spent working on a funded grant. Tenure-Track PhDs will have a similar time commitment to laboratory research. Clinical Track faculty members will devote most of their activity to patient care, with a much smaller focus on research. However, these individuals will still need to be productive in the areas of teaching and scholarship (see Department of Plastic Surgery Pattern of Administration for workload expectations).
10. **Familiarize yourself with aspects of the OSU Promotion and Tenure process which are directly relevant to you.**

Most new faculty members have little interest in the Promotion and Tenure process at the start of their careers. Although annual reviews of performance are required for all faculty members at every level, the P & T process usually doesn’t become a reality until the mandatory fourth year review for Tenure-Track faculty members and the fourth year reappointment review for Clinical faculty. Waiting until this time to become familiar with the Department and University P & T processes can be a serious mistake: if you don’t know the standards against which you will be measured, you will not be able to guide your activities to maximize success in reappointment or promotion. You should also familiarize yourself with the various pathways available in Clinical Faculty, and make sure that the pathway that has been selected for you by the Chair is appropriate for your career interests.

At the time of hire, each faculty member should take the time to become familiar with the specific standards that the University and the Department will be using to judge academic success. The Department P & T document has explicit guidelines that are applied depending on the specific faculty track. Knowing these guidelines will not only ensure that appropriate activities are performed, but also may assist in the specific documentation of these activities in Research in View to make it clear that requirements have been met.

The University also conducts periodic seminars related to the Promotion and Tenure process, and other career development seminars. The Department expects that new faculty members will attend those portions of the University’s New Faculty Orientation that relate to Promotion/Tenure and Research. Attendance at these functions will help to eliminate frustration at the fourth year level (and beyond) when the specific standards are actually applied, and faculty members occasionally find themselves deficient in one or more areas that could easily have been addressed in prior years.

Members of the Department P & T committee and associated staff are always willing to meet with faculty members to review their promotion status and make recommendations for success. You don’t need to be an expert in the P & T process, but you should be an expert in those specific areas which apply to your track and your level of appointment.
11. Begin participation in University-related activities, such as committees, advisory bodies, task forces, etc. which are relevant to your areas of clinical and research interest.

An important aspect of your academic career is participation in service activities for your Department, your Hospital (OSU Medical Center and/or Nationwide Children’s Hospital) and for the University. The third component of academic activity is called Service, and this category will reflect your provision of clinical care of patients, your administrative activities, and your contributions to the educational enterprise involving students, residents and other professionals.

It is of value to begin serving on committees, task forces, etc. as early as possible after your appointment. Not only will these experiences enrich your academic career, but ultimately, if you wish to be promoted beyond the Associate Professor level, you will need to provide evidence not just of committee service, but also of leadership. And it is unlikely that you will be appointed to chair a committee, or run a task force, or oversee a clinical service unless you have already served as a regular member of that body for a period of time.

There are multiple opportunities for committee service throughout the Medical Center (OSU Medical Center and/or Nationwide Children’s Hospital) and the University. You should be able to identify Departmental, Hospital and University committees which are most congruent with your clinical and research interests. You may also wish to become involved in new activities which are interesting to you—for example, the College of Medicine Admissions Committee, or the Departmental Education Committee. Your mentor will be able to assist in getting you appointed to these bodies.
12. With the assistance of your mentor, set a time-table for local, regional and national organizational memberships.

Just as service to your own institution is important, so is participation in local, regional and national organizations. Some organizations are appropriate for “entry-level” faculty members; others are open only to mid-career and more senior surgeons. Your national specialty society will usually allow membership immediately after Board certification; the American College of Surgeons requires three years in practice before granting Fellowship; some of the more prestigious academic societies require years of practice and evidence of scholarly distinction. Organizations may be focused exclusively on clinical practice, or on research, or on educational expertise.

Working with your mentor, you should develop a plan for gaining membership in organizations appropriate for your clinical and research interests. You should have a time-table which targets membership in specific organizations at appropriate points in your academic career. Then, by familiarizing yourself with membership requirements, you can maximize your chances of gaining admission to these organizations.

When decisions are made regarding reappointment and promotion/tenure, demonstration of your participation in these organizations will be important; the higher the level of your promotion, the more important it will be to hold a leadership role (e.g., committee chair, elected officer) in these national societies. Once again, your mentor often will be the person who serves as your sponsor for membership, and later your advocate for leadership positions in these organizations.

13. Become familiar with institutional funding priorities and determine how your efforts can interface with these priorities.

Funding for projects (both research and clinical) in your Hospital is critically influenced by carefully determined priorities. For a number of years the OSU Medical Center has designated selected areas as Signature Programs. Although the institution is committed to trying to support all worthwhile projects, it is clearly easier to secure funding in the Signature areas. At the time of this writing, the following are the designated Signature Programs: Cancer, Critical Care, Heart, Imaging, Neurosciences and Transplant. There may be different priorities for funding at Nationwide Children’s Hospital.

As the junior faculty member begins to explore funding sources for projects, it is of great value to demonstrate ways in which the work is related, either directly or indirectly, to one or more of the Signature Programs. This tactic does not guarantee funding, but increases chance.

Similarly, on a national scale there are funding priorities. With help from your mentor, you can tailor your submissions to correlate with these funding priorities in order to maximize your likelihood of success in acquiring financial support for your projects.
14. Recognize the value of multidisciplinary efforts in the University system.

Another way to maximize the likelihood of funding for your new programs is to engage in multidisciplinary efforts. Our institution values these joint undertakings and gives preference to such activities when it comes to support and funding. And not only is this type of cooperative effort likely to assist in funding, it also enhances the quality of your work through access to new ideas and new enthusiasm from other Departments in the Medical School and from other disciplines in the University. The Ohio State University is an enormous academic entity; it is possible to find an expert in virtually anything at our institution. Working together promotes academic and financial success.

15. Recognize the requirements for Peer Review of your efforts at OSU, and ensure compliance with these requirements.

As part of the documentation of your academic efforts, the University and the Department require not only that you teach, but also that you demonstrate excellence in teaching. The Department Promotion and Tenure document specifies that each faculty member must undergo peer review of teaching on a regular basis. A number of such evaluations are required each academic year. Compliance with this requirement is necessary for renewal of appointment and for promotion. You should be undergoing such periodic reviews of your teaching as soon as you join the faculty. It is not possible to go back to previous years if you reach the time for your fourth year review and find that your personnel file does not include these evaluations. You should become proactive in asking your division chief or immediate supervisor to arrange for a colleague to evaluate you on multiple occasions during each academic year. The Department has standardized forms for reporting this activity. Your supervisor may forget to do this; you should take responsibility for this yourself.

16. Take advantage of student and resident cooperation in research and publishing efforts.

Your academic productivity can be greatly enhanced by working with students and residents to generate meaningful research and produce high-quality publications. This type of activity fulfills two of your University missions: teaching and scholarship. Students and residents are usually delighted to have their names associated with abstracts, journal articles and book chapters. They are more than willing to put in significant amounts of time to collect data, check references, etc., in return for inclusion as co-author of the final publications effort. The most important of your scientific efforts, especially in the beginning of your career, will likely be accomplished with you yourself doing most, if not all of the work. But as you gain a reputation for your efforts, students and residents may be interested in enhancing your productivity while gaining experience and recognition for themselves.
17. Keep your superiors informed of your accomplishments.

Most of the time, your immediate supervisor is aware of your major accomplishments. On an annual basis, your faculty review will include documentation of all of these activities. But sometimes you are the only one who really knows the true significance of a particular publication or award. The more unique your area of expertise is, the less likely it is that others will really know what you have accomplished. Therefore, you should make it a point to tell your Chair or immediate supervisor when such a circumstance arises. You can do this in person or by writing a note or e-mail. Do not consider this to be self-aggrandizing; how else will your chief know the real significance of your work?

Summary

In this document we have tried to provide a series of recommendations which can enhance the chances of success for new faculty members in the Department of Plastic Surgery. The journey along an academic career is usually a long one, with occasional set backs and detours. We suggest that the “tools” presented in this document can help to minimize the deviations and maximize the speed with which career goals can be accomplished.

Revised: 7/9/14
After Office Hours

THE ALPHABET OF ACADEMIC MEDICINE

Steven G. Gabbe, MD

Today, academicians in obstetrics and gynecology are required to assume leadership roles in teaching, patient care, research, and administration. The junior faculty member facing these challenges needs a guide to help him or her adjust to the culture of the academic department. These lessons can be described in an alphabet of academic medicine. (Obstet Gynecol 1996;88:479–81)

For the past 2 years, the Society of Perinatal Obstetricians has sponsored a retreat for fellows in maternal-fetal medicine. I was invited to address the fellows on the keys to a successful career in academic medicine. In considering how I might organize this discussion, I thought it would be helpful to present an alphabet of academic medicine, incorporating the important lessons I have learned along the way. Although many of the guidelines apply primarily to a career in an academic setting, others relate to the profession of medicine in general.

The Alphabet

A—Abstracts: Publish each good one. When I review someone’s curriculum vitae, I examine the number of abstracts he or she has published and compare it with the number of papers. If the abstract was good enough to present at a meeting, why hasn’t a full report on the subject been completed? Maybe the research wasn’t that important, or perhaps the author did not see the project through to completion.

B—Book chapters: Limit their number. Writing an authoritative chapter on an important subject in a widely read textbook can help advance one’s academic career. However, if a faculty member is not careful, he or she may spend too much time writing chapters or review articles and not enough time seeking new knowledge.

C—Committees: Avoid them! At the start of one’s academic career, it is best to limit the time spent serving on committees. Committees that help a junior faculty member understand how a medical school, department, or hospital is organized can be valuable. On the other hand, working on a committee to decide on the logo for a new obstetrics service might best be left to others.

Course: Chart yours. During a job interview, many of us have been asked where we want to be in the next 5 or 10 years. It is important to know where you want to go, or you may never get there. On occasion, when I have asked this question, the resident or faculty applicant will respond, “I’d like to have your job.” Such an answer clearly convinces me they have poor judgment!

D—Divisions: Avoid those with only two faculty members. For a junior faculty person to join a division with only one other member means that he or she will have little time for academic pursuits. In addition, should that senior person leave, the junior faculty member will be alone, without a colleague or collaborator.

E—Expert: Be an authority in one area. In academic medicine, it is essential to select an important area of investigation and pursue it, becoming recognized as a national and international expert on that subject.

Expectations: What are yours? What are your division director’s? What are your chairperson’s? When looking at a new position, it is essential that the junior faculty member decide what he or she would like to do and make certain those objectives are in line with the thoughts of the division director and chairperson. For example, if the junior faculty member is seeking a position that emphasizes research but the department’s leadership wants to recruit someone whose primary interests are teaching and clinical care, a mismatch will result.

F—Family and friends: They must come first. When my son, Daniel, now a college senior, was 6 years old, he wrote me a note: “Dear Dad, I love you. I hope you will be back from work soon. I wish you did not have to go to work. I love you.” I kept that note and framed it. It is the first thing I see when I come to work in the morning.

G—Good people: Bad things do happen to them, but not very often. Likewise, good things do happen to bad people, but not very often. Certainly, life is not fair; nor is it a meritocracy. But things generally work out the way they should.

H—Hallways: Don’t stand in them. Nothing good happens in a hallway. People talk too much, rumors get started, and time is wasted.

I—Inconsequential: Keep things in perspective. Many
years ago, when I was going through a difficult time, the late Val Davajan, a wonderful clinician, investigator, and teacher at Los Angeles County—Women's Hospital, took me aside and gave me these words of advice: “Know what the mosquitoes are and what the elephants are.” He explained that some problems were inconsequential and, like mosquitoes, could be easily swatted away. Others were like elephants and sat right on your shoulder, weighing you down. Even though I was carrying around an elephant, it was helpful to know he recognized my problems and wanted to help.

I—Use this letter with caution in your academic alphabet. If the junior faculty member is speaking with administrators in the department, medical school, or hospital, it is important to emphasize the “we.” How can we make things better? If you approach a hospital administrator with the statement, “I want this done because it is important to me,” you are much less likely to gain support than when you say, “How can we work together to accomplish this because it will be best for all of us?”

J—Justice: Be fair and know the facts. Before making a decision about who is right or who is wrong in a dispute, it is important to take time to find out what really happened.

K—Know your limits: Don’t be embarrassed. When you need help, seek it. Always assume there are people smarter than you. One of the great benefits of working in an academic environment is the accessibility of senior faculty and experienced clinicians. Although it may be difficult to say, “I don’t know,” it is important to do so.

L—Listen: Do this about ten times more than you talk, and really listen! What is the other person saying? How are they saying it? Is what they are telling you the real message? As academicians, we like to lecture much more than we like to listen. Thus, in a conversation, our temptation is to think about our response rather than what the other person is saying.

M—Managed care: Understand it nationally, statewide, and locally. For those of us in academic medicine, the change in health care brought about by managed care organizations demands that we understand how this system will influence support for our academic programs.

Mentor: Find a good one. Be a good one. Each of us can remember the importance of advice from a senior faculty member and how that helped us through our career. In turn, we have a responsibility to provide that counsel for medical students, house officers, fellows, and junior faculty.

N—Never: Open your mouth without knowing the politics of your department.

Never: Complain about the people or place you have just left. Too often, a junior faculty member will offer unsolicited comments about the problems or deficiencies where he or she worked. Perhaps they think this will enhance their position with their new colleagues. It doesn’t!

Q—Pretension and tenure: Understand the process. There’s no hurry if you’re good. It is essential that a new faculty member have a thorough understanding of the promotion and tenure process. Having chaired two college of medicine promotion and tenure committees, I know how different the process may be from institution to institution. What are the guidelines for awarding tenure and for being promoted? The junior faculty member should also be extremely cautious before seeking an accelerated promotion. Most committees are reluctant to grant early promotion or tenure. A negative decision will lead to disappointment and may be difficult for a young academician to accept.

R—Research: Do it easily, often, and always. The foundation of a successful academic career is continued participation in basic and/or clinical research.

S—Slides: Don’t pack them! How many times have I heard about a young faculty member who packed his or her slides in a suitcase on the way to an important presentation? When their luggage was lost... Well, you know the rest of the story.

T—Time and trust: Precious commodities. Time is our most valuable resource. Trust is the key to any successful relationship.

Teach: Remember your medical student and residency training. It is a privilege to give back.

U—Understand: Understand yourself, sometimes you are ugly. Recognize the situations in which you are likely to exercise poor judgment, and try to avoid them. If you do make a mistake, admit you were wrong.

V—Voracious: Be a voracious reader. Like research,
reading and more reading are essential parts of a successful academic career.

W—Writing: Get it in writing! Yes, trust is important. But when accepting a new position, it is best for all parties to have the important points defined in writing before that job offer is accepted.

X—Xenophobia: Avoid it. Be open-minded. Xenophobia is simply a dislike of what is foreign or different. As an academician, one must be open to new ideas.

Y—Yourself: Take care of yourself. Today, we live life in the fast lane. It is essential to take time for family, a hobby, exercise, and relaxation.

Z—Zuspan: "Thank you ever so much for sending us this patient." Fred Zuspan, who chaired the Department of Obstetrics and Gynecology at the Ohio State University College of Medicine before my appointment to that position in 1987, frequently gave me important advice. He emphasized that we must rely on the support of our colleagues in our community and throughout our region. Treating them with respect and providing feedback on patients they referred is essential.

Conclusion

Here, then, is the alphabet of academic medicine. I hope those who read it will find it helpful. Some may want to change it or add their own letters. In closing, I would add one last lesson for success, something my father told me over and over when I was growing up: "Do good and don't complain."

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