



Dr. Mara Ludwig

Project Renaissance

Strategic Planning: Academic Affairs



Academic Affairs

Thinking Dangerously 2010 Faculty Lifecycle Strategic Plan

5 key areas were identified:

- Promotion Criteria and Recognition for GFT-H Faculty
- Remuneration and Tenure For MD Faculty
- Remuneration and Tenure For PhD Faculty
- Work-Life Balance
- Mentoring



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Promotion Criteria and Recognition for GFT-H Faculty

- CAS (clinical) appointments with appropriate promotion criteria (only 2 of 3 categories of academic duty required)
- *Established new criteria: **research and other original scholarly activities, and professional activities, including professional or clinical innovation***

(Innovation that has an influence on the practice of the profession, and that is published, publicized or otherwise recognized in a way that makes possible its evaluation by external peers. For CAS (clinical/professional) this could include introduction and/or establishment of novel clinical techniques or programs)

- Annual review process with agreed upon benchmarks
- Access to employee benefits, eligibility for Principle's Prize, etc



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CAS (contract academic staff) pathway (2010)

- Clinical (physicians)
- Research
- Professional (member of professional order)
- Teaching (educational specialists - November 2017)

Distinct set of responsibilities and appropriate promotion criteria

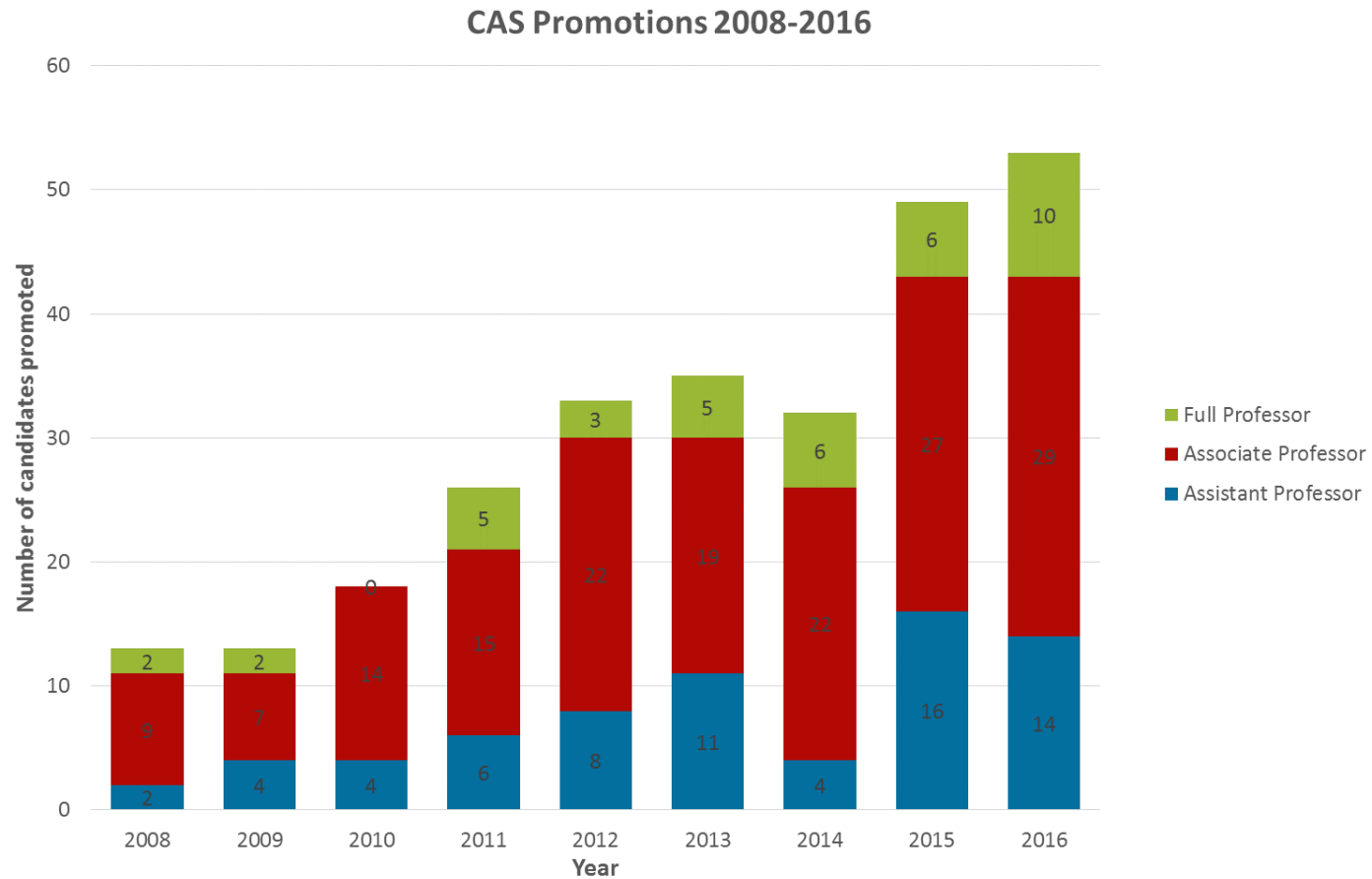


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Remuneration and Tenure for MD Faculty

“Tenure for clinicians” program introduced:

- Address inequity in tenure stream positions across clinical depts.
- Takes advantage of FRQS/FMSQ *rémunération recherche* program (2008)
- Clinician scientists recruited into CAS (clinical) positions
- Provost guarantees tenure track slots after completion of FRQS *chercheur boursier* cycle (Jr I, II and Sr)
- Hybrid funding model with more modest base salary plus renewable 5 year contract based on research productivity (accountability)
- “Early” tenure consideration
- Follows University tenure regulations



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Remuneration and Tenure for PhD Faculty

- Primarily “classic” tenure stream positions (*“if it’s not broke, don’t fix it”*)
- CAS (research) stream, supported by “soft funds” to enhance research capacity



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Mentoring

Telemachus project (led by Lesley Fellows, Assistant Dean, AA)

The Telemachus Project is an innovative mentorship program that combines elements of peer and ‘vertical’ mentoring to support and enhance faculty success within the Faculty of Medicine. The broad aim is to provide faculty members with the information, personal connections and skills they need to flourish across the full range of academic profiles and all career stages.



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Work – Life Balance

?



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Academic Affairs Strategic Planning (2017-)

- Sustainability of tenure stream professoriate and CAS (research) career pathway (Ludwig)
- CAS professors evaluation and recognition (Ludwig)
- Faculty wellness (Fellows)
- Engaging medical faculty in non-traditional environment (Fellows)



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Academic Affairs

Workgroup #1: Sustainability of tenure stream professoriate and CAS (research) career pathway

Membership:

Mara Ludwig (chair)

- Dr. Bruce Mazer, Interim Director, MUHC RI;
- Dr. Gerry Batist, Interim Director, Lady Davis Institute;
- Dr. Gustavo Turecki, Chair, Department of Psychiatry and Douglas Hospital Research Center;
- Dr. Michael Shevell, Chair, Department of Pediatrics;
- Dr. Gerry Fried, Chair, Department of Surgery;
- Dr. Jim Martin, Chair, Department of Medicine;
- Dr. Albert Berghuis, Chair, Department of Biochemistry;
- Dr. Ted Fon, Associate Chair, Department of Neurology and Neurosurgery, Associate Scientific, Director, MNI



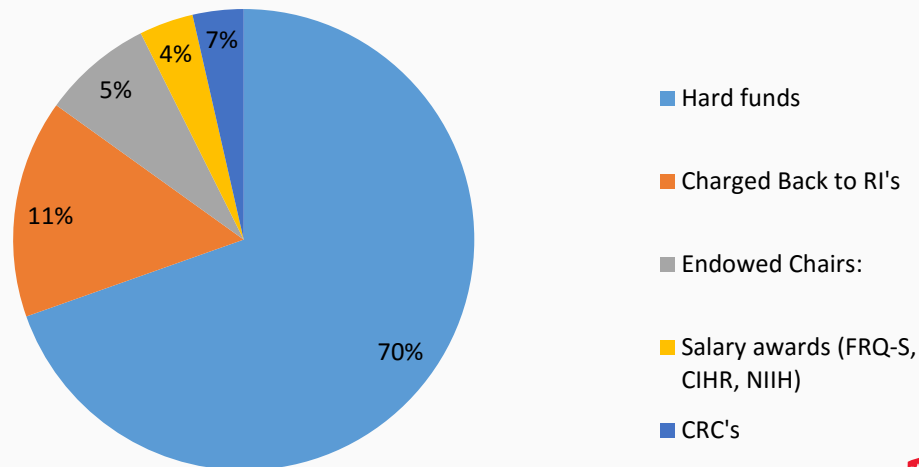
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Challenges:

- 576 positions; \$60 million from the Provost
- 70% funding model (30% - ~\$25 million) from external salary awards, endowed chairs, partnership agreements, etc)
- Challenge of partnership agreements with RI's (TTPA), hospital foundations



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Recommendations and potential solutions

- Maintain current numbers vs “twofers”
- Identify alternate sources of funding: Foundations to support people, not “bricks and mortar”; IP
- Adapt “tenure for clinicians” model for PhD scientists in clinical departments



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“Tenure for PhD scientists” in clinical departments

- Initial appointment CAS (research)
- FRQS *Chercheur boursier* (Jr I, II, Sr)
- Partial support from Provost funds
- Tenure track transfer (at what point in the cycle?)
- “Early” tenure consideration
- Hybrid funding model does not work
- Reserve a set number of slots/department
- Need to respect University policies/regulations
- MAUT input



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CAS (research) career pathway

- Currently 90 CAS (research) professors, primarily on soft funds
- Active in 2 of 3 domains of academic duties: teaching, research, service, most do all 3
- Sustainability of “soft” funding
- Ambition of tenure track status
- Tenure for PhD scientists in clinical departments – new model
- Transfer after 6 years?
- Reserve a set number of slots/department
- Open competition for slots – need for transparency
- Need to respect University policies, regulations



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Workgroup #2: CAS evaluation and recognition

Membership:

- Mara Ludwig (Chair)
- Judith Soicher (Co-Chair) CAS (professional) SPOT
- Geoffrey Noel CAS (teaching) ACB
- Koren Mann CAS (research) Oncology, LDI
- Alyson Fournier tenure stream, NNS
- Jeffrey Wiseman CAS (clinical) Medicine
- Caroline Marchionni CAS (professional) ISON
- Christine Dolden (AAO)



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- 4 categories: clinical, professional, research, teaching
- Excepting clinical, others evaluated according to tenure stream criteria – teaching, research, service, despite being expected to perform in 2/3.
- Excepting clinical, merit available
- Need to define expectations at time of recruitment (LOO)
- Need for appropriate benchmarks
- Need for appropriate evaluation forms to enable allocation of merit increases
- CAS (clinical): Need to improve/update the established process



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Workgroup #3: Faculty Wellness

Membership:

- Lesley Fellows, Chair
- Maria Di Feo (Nursing)
- Michelle Elizov (Med, FacDev)
- Steven Grover (Med)
- Namta Gupta (Fam Med, WELL office)
- Mimi Israel (Psychiatry)
- Audrey Juras (Fam Med)
- Wassim Kassouf (Surgery)
- Lenora Lalla (Fam Med, CPD)
- Nancy Mayo (SPOT, EBOH, Med)
- Laurie Plotnick (Pediatrics)



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- defining wellness in a useful way
- assessing what we know about faculty wellness locally, & wellness initiatives here and elsewhere
- identifying barriers to, and facilitators, of wellness
- recommendations for tracking and action on wellness



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Workgroup #4: Academic engagement for faculty in non-traditional environments

Membership:

- Lesley Fellows, Chair
- Michelle Elizov (FacDev, CIUSS)
- Orly Hermon (Fam Med, community clinic)
- Mylène Dandavino (Pediatrics, innovation in med. ed.)
- Ben Burko (Pediatrics, community clinic)
- Barbara Young (Int Med, Gatineau)
- Liam Durcan (Neurology, community clinic)
- Chris Zalai (Surgery, Lakeshore)
- Sunil Garg (Cardiology, Lachine)
- Shawn Cohen (Ophthalmology, community clinic)
- Robert Carlin (Fam Med, North)



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How to sustain and invigorate academic engagement of clinical faculty in the face of changing clinical care models and environments?

- Strengthening Connections
 - between faculty members and the Faculty of Medicine
 - between faculty members and their academic departments
 - between faculty members with common interests, activities, challenges (i.e. regardless of site, department, unit)
- Promoting Excellence
 - Clear expectations, timely & constructive recognition of performance
 - Ensuring conditions for success: matching resources to needs for clinical teaching
- Flexibility
 - anticipate continued rapid change in clinical teaching environments

NB Many of the issues discussed were not unique to 'non-traditional' settings, i.e. the group saw challenges working inside and outside traditional teaching hospitals that were much the same, differing mainly in degree rather than kind



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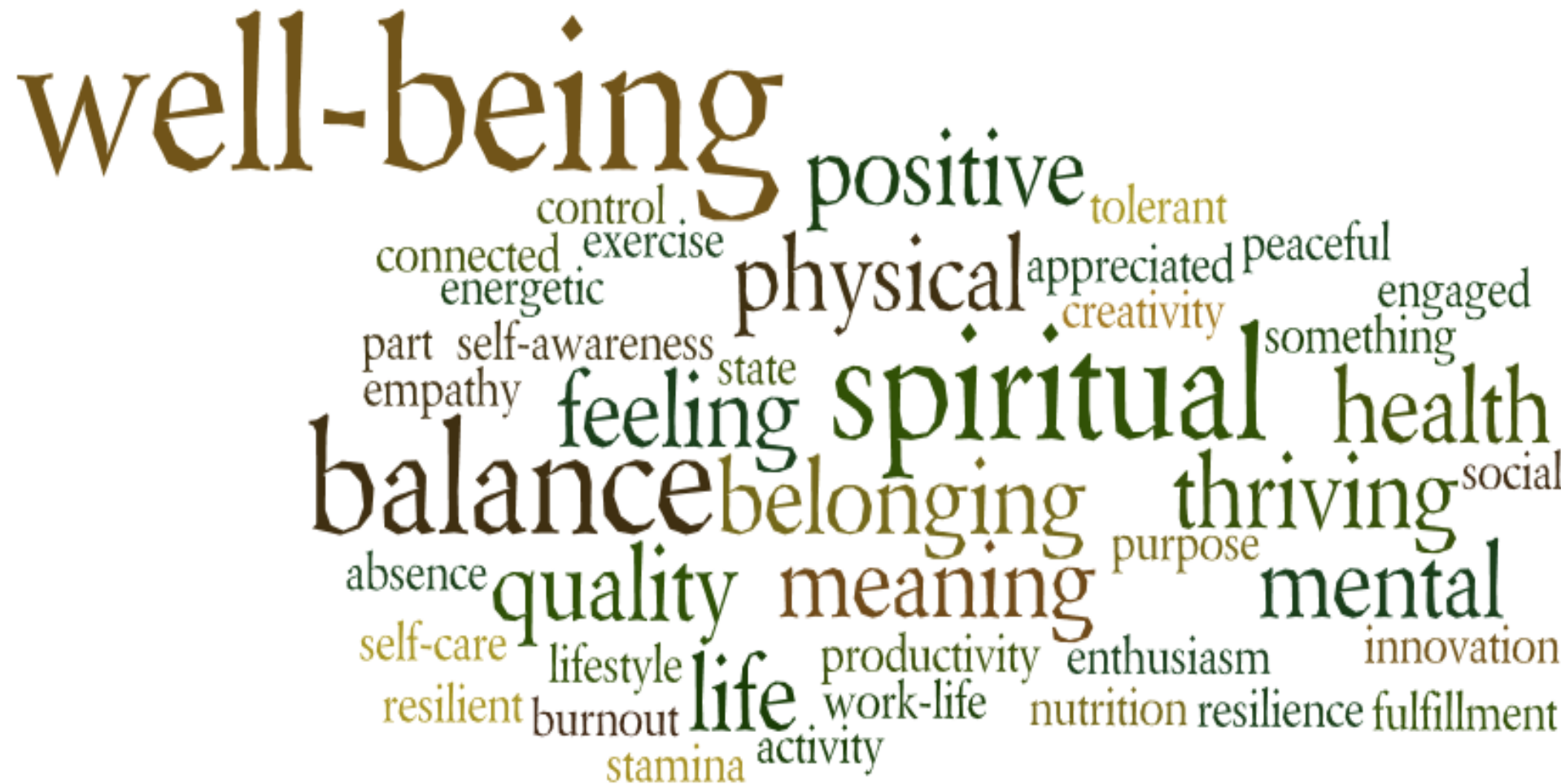
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- Strengthening Connections
 - improve internal communications
 - consult with Chairs to identify and address barriers to engagement with 'distant' faculty members
 - assess mentorship needs of faculty working in non-traditional sites and develop programs to meet those needs
- Promoting Excellence
 - Review/update LOO templates, including for part-time appointments, re: clarity of expectations
 - Improve orientation (in partnership with Faculty Development Office)
 - Continue to optimize annual evaluation framework for clinical faculty, implement a 'light' version for part-time faculty?
 - Needs assessment survey to identify resource and development needs
- Flexibility
 - anticipate continued rapid change in clinical teaching environments
 - provide a voice for this faculty constituency in on-going decision-making
 - all resources in French & English





Academic Affairs



well-being positive tolerant
control . exercise
connected energetic physical appreciated peaceful
part self-awareness state something engaged
empathy feeling spiritual health
balance belonging thriving social
absence quality meaning purpose mental
self-care lifestyle life productivity enthusiasm innovation
resilient burnout life work-life nutrition resilience fulfillment
stamina activity