

Education and Quality Improvement Scholarship



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Background: Academic promotion criteria traditionally emphasize evidence of achievement in research (the scholarship of discovery). However, many academic obstetrician gynecologists make contributions in other domains such as the scholarships of application, integration, and/or teaching originally described by Boyer in 1990 (1). Substantial variation exists across institutions about whether to count these different forms of scholarship, and how to measure and weight non-research scholarship in promotion criteria (2).

Purpose: This white paper aims to provide perspectives that can be used in letters of recommendation for promotion to appraise the faculty member's achievements in the common forms of scholarship (education and quality improvement) generally associated with the clinician-educator or clinician-leader roles.

Principles of Scholarship

The Association of American Colleges (AAMC) convened a consensus conference in 2006 to propose documentation standards for educators and promotion committees based upon the principles of scholarship and excellence. The resulting recommendations were built on a review of over 15 years of literature on scholarship, academic promotion standards and educator portfolios, and involved 110 conference participants including medical school deans, academic promotion committee members, department chairs, faculty and AAMC leaders (3).

According to the AAMC publication, using a "scholarly approach" requires demonstrating evidence of drawing from and building on the work of others. Documenting "scholarship" requires additionally the contribution of work through public display, peer review and dissemination. Excellence in scholarship includes an evaluation of impact and can be defined in all 5 areas of educational activity: teaching, curriculum, advising and/or mentoring, education leadership and/or administration, and learner assessment.

Scholarly Approach vs Scholarship

A faculty member may demonstrate a "scholarly approach" by being an evidence-based educator, clinician, or quality improvement leader who draws from and builds on the work of others. However, the "scholarship" of application also requires a systematic evaluation of success, as well as public, peer-reviewed dissemination of findings for others to draw on and build upon. In these forms of scholarship (the scholarship of "application") the faculty member is applying existing knowledge to improve an outcome rather than discovering new knowledge to better understand a phenomenon, an important distinction for traditional promotion committees.

Highlighting Evidence of Scholarship

Evidence of scholarship is easiest to find and count in peer-reviewed publications that have been cited by others. However, few specialty journals focus on disseminating educational and quality improvement scholarship in obstetrics and gynecology. Consequently, faculty writing letters of recommendations for academic promotion of clinician-educators may need to highlight unpublished works in their letters and explain how these projects meet the definition of scholarship. Such explanations may include (a) defining the principles of scholarship referenced above, and (b) pointing out how the project drew on

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and built upon the work of others, evaluated its outcomes, and was made available for peer-review and dissemination.

Examples of non-traditional forms of peer-review and dissemination for education and quality improvement scholarship:

- Web metrics: metrics of web views, downloads, and comments regarding scholarly work posted on the websites of professional organizations, academic institutions, or health systems. [Publication in the AAMC MedEdPORTAL includes these metrics.]
- Extramural dissemination: correspondences from different institutions where the faculty member's scholarly educational or quality improvement program or tool was peer reviewed and disseminated as a result of it being published, posted or presented at a national meeting, regional meeting, or grand rounds.
- Intramural scale-up: peer-review of a scholarly educational or quality improvement program or tool followed by scale-up and implementation at a higher level within the same institution (from a single clerkship, residency program, or clinical unit to enterprise-wide implementation).

Real-world vignette: A junior faculty member spent countless hours creating a departmental blog to reference teaching modules and surgical videos, crafted a QR coding systems to give feedback to faculty after lectures, and most recently created a departmental "app" which allowed for easy reference of all the information we traditionally put in a book for new residents to learn. Her work has been incredibly important to the success of our department. Is this educational scholarship?

Analysis: To be considered scholarship some or all of these resources would need to meet 3 qualifications: (a) drawing from and building on the work of others; (b) public display and peer review; (c) dissemination. To become an example of excellence in scholarship the faculty member would also need to evaluate the impact of these resources as educational tools.

Listing these resources in a CV will not provide sufficient evidence of scholarship for promotion. Instead, the faculty member's educator's portfolio or a narrative statement in the promotion dossier would need to establish that the resources were (a) developed based upon publications about effective forms of educational technology and built on that prior work; (b) made available for colleagues at the same institution or other institutions to review; and (c) disseminated for adaptation and use by others. The evaluation of impact could include a variety of outcomes including (from higher to lower importance) an improvement in residents' care of patients, residents' skills, residents' knowledge, residents' perceived value of the resources, or web traffic to the resources.

References:

1. Boyer EL. Scholarship Reconsidered: Priorities of the Professoriate. Lawrenceville, NJ: Princeton University Press; 1990.
2. Grigsby RK, Thorndyke L. Perspective: Recognizing and rewarding clinical scholarship. Acad Med. 2011 Jan;86(1):127-31.
3. Simpson D, Fincher RM, Hafler JP, Irby DM, Richards BF, Rosenfeld GC, Viggiano TR. Advancing educators and education by defining the components and evidence associated with educational scholarship. Med Educ. 2007 Oct;41(10):1002-9. Epub 2007 Sep 5.