

# A Statewide Model for Faculty Development in Family Medicine

Christian N. Ramsey, Jr, MD, and Maurice A. Hitchcock, EdD  
Waco, Texas

The number of faculty needed to teach in family practice residency programs has increased as student demand for training in the specialty has grown. Residency programs have recruited practicing family physicians or recent graduates of residency programs as physician faculty members. The multiple demands of faculty positions and difficult periods of orientation to effective faculty functioning have been significant obstacles to recruitment and retention of faculty. A statewide Family Practice Faculty Development Center has been formed and has received support from Texas medical school family practice departments and free-standing residency programs. The Faculty Development Center utilizes a multidisciplinary staff to offer a range of programs including fellowships, preceptorships, institutes, and workshops, and conducts research projects in the area of teaching family medicine in order to aid faculty in current and new residency programs in acquiring excellent teaching, research, and administrative skills.

A number of factors influence the success of family practice residency programs in meeting the goal of training family physicians. Development of an institutional commitment to the training of family physicians, maintenance of student interest in family medicine, availability of financial support for training activities, and recruitment and retention of an excellent faculty are all major issues which continue to be confronted by family practice educators in the development of the specialty.<sup>1</sup> This paper addresses the development of a statewide Faculty Development Center as a means of advancing knowledge of faculty roles in academic family medicine and for preparing individuals to function effectively as faculty members.

## Background

Since no reservoir of experienced academic family physicians has existed to meet the demand for faculty during the past ten years, most faculty members in family practice training programs entered teaching after a period of 10 to 20 years in either group or solo practice.<sup>2</sup> The transition from private practice to teaching has been analyzed by Stephens,<sup>3</sup> who identified such factors as fear of failure, fear of being exposed as an "imposter" by medical students, and doubts about competency as characteristics of physicians making such transitions. In his study of 33 family physicians entering teaching careers, such intrinsic feelings as enthusiasm, energy, optimism, and enjoying associates were all diminished during the first six months of the transition stage, dropped further in the second six months, but began to recover in the second year. Similarly, family physician faculty perceptions of their effectiveness in their new work—confidence, competence, and fulfillment—were relatively low during the first six

---

From the McLennan County Medical Education and Research Foundation, and the Family Practice Faculty Development Center of Texas, Waco, Texas. Requests for reprints should be addressed to Dr. Christian N. Ramsey, Jr, McLennan County Medical Education and Research Foundation, 1700 Providence Drive, PO Box 3276, Waco, TX 76707.

months, but began to rise during the second six months, and continued to do so in the second year. Two reactions of the new faculty seemed to underlie most of the undesirable feelings identified: (1) frustration with the administration of the medical education program, and (2) insecurity about their effectiveness as teachers and their acceptance as role models by residents and students.

Information on the preparation of family practice faculty for teaching is somewhat limited but a recent study of 240 full-time physician faculty revealed that while 11 percent had received formal educational degrees, 35 percent reported no specific preparation for the role of faculty member. Fifty-four percent had participated in various workshops and seminars as preparation for entering into family practice education.<sup>2</sup> A recent survey conducted by the Society of Teachers of Family Medicine revealed that 84 percent of the respondents indicated that their highest priority need was to increase and maintain their teaching abilities.<sup>4</sup> If one can assume that family practice faculty share in the interests of the general undergraduate medical faculty in improvement of the instructional caliber, then a formal program of faculty development activities should fill many of the needs for improving instructional skills, managerial ability, and research development and implementation.

### **The Development of Family Medicine in Texas**

Texas is the third most populous state in the nation with almost 13 million persons. The state is divided into 254 counties in which 11,448 physicians are actively practicing. Data from the Office of Medical and Health Manpower of the Texas Medical Association indicate that nearly one fourth of the physicians in active practice, or about 2,500, are family physicians, which means a ratio of one family physician to 5,200 people. In 1977, in order to increase the number of family physicians, the Texas Legislature passed a bill (H.B. 282) to fund the development of additional residency positions in family medicine in Texas.<sup>5</sup> The goal of this legislation is to provide between 300 and 400 first year residency positions in family medicine (approximately 25 percent of the annual output of the Texas medical schools) by 1984.

The Texas Academy of Family Physicians, the

Texas Medical Association, and the Association of Family Practice Program Directors in Texas have been working together to increase the state's capacity to train family physicians. These organizations are represented on the Family Practice Advisory Committee to the Coordinating Board of Texas College and University Systems under the provision of H.B. 282. The Coordinating Board is the agency which administers state funding for the development and expansion of family practice residency training programs.

As of September 1, 1979, there were 14 accredited allopathic residency programs in family medicine in Texas with 267 residents enrolled. In addition, there were two accredited osteopathic family practice residency programs. During the current year the existing programs offered 46 new training positions, mostly at the first year level. Almost all current programs are seeking additional full-time and part-time faculty to meet this expansion in programs.

In addition to the needs for faculty in the current programs, there are a number of new residency programs being developed which will require additional faculty. There are seven family practice residency programs in advanced or developmental planning stages at the present time. In addition to these seven locations, other communities are conducting preliminary investigations of the feasibility of beginning family practice residency programs.

### **A Statewide Faculty Development Center**

The recruitment and enrichment of faculty for the family practice residency program activity which is occurring in Texas has been a major challenge to the state leaders in family medicine education and clearly indicates the need for an organized effort in faculty development with two major goals:

1. increasing numbers of faculty to fill positions in existing, new, and proposed programs—the "quantitative" issues
2. improving instructional practices, research methodology, and skills in program administration in family practice faculty—those areas which deal with the "quality" of instruction

In discussions with residency program directors and department chairmen in Texas, a high degree of enthusiasm was developed for the concept of a "network" approach to faculty development such

as has been described by Geyman and Brown<sup>6</sup> in the residency program setting at the University of California at Davis. Two important aspects of the network concept were:

1. the development of a single "expert" center with sophisticated staff, research capabilities, and educational programs
2. the concept of mutual collaboration between residency programs and the statewide center in developing residency program-based faculty enrichment projects.

To meet these needs a Family Medicine Faculty Development Center was formed by the McLennan County Medical Education and Research Foundation, Baylor College of Medicine, and the School of Education at Baylor University in Waco in the summer of 1978.

The Faculty Development Center was formed as a focal point for family practice faculty enrichment activities within the state of Texas. A unique feature of the Faculty Development Center is that in addition to its cooperative sponsorship as outlined above, the center serves a consortium of training programs in family medicine in the state of Texas including residency programs at Austin, Corpus Christi, San Antonio, McAllen, Lubbock, El Paso, Amarillo, Victoria, and Memorial Hospital, Houston. In addition, the Faculty Development Center is affiliated with the Texas Academy of Family Physicians.

### **Multidisciplined Faculty and Staff**

The enrichment and training of faculty in family medicine requires drawing on knowledge from many fields including: medicine, education, psychology, business, and management. In order to utilize expertise in these different fields, the Faculty Development Center has drawn its staff from the parent institution, which operates a residency training program in family practice in Waco; the Baylor College of Medicine in Houston; and the Baylor University School of Education which operates a university-wide faculty development program at Baylor University in Waco, and has a long tradition of excellence in teacher training at both the undergraduate and graduate levels. This multidisciplinary faculty and staff allows the Faculty Development Center to offer a wide range of training in the areas of learning theory, curriculum and instruction, research, program administration,

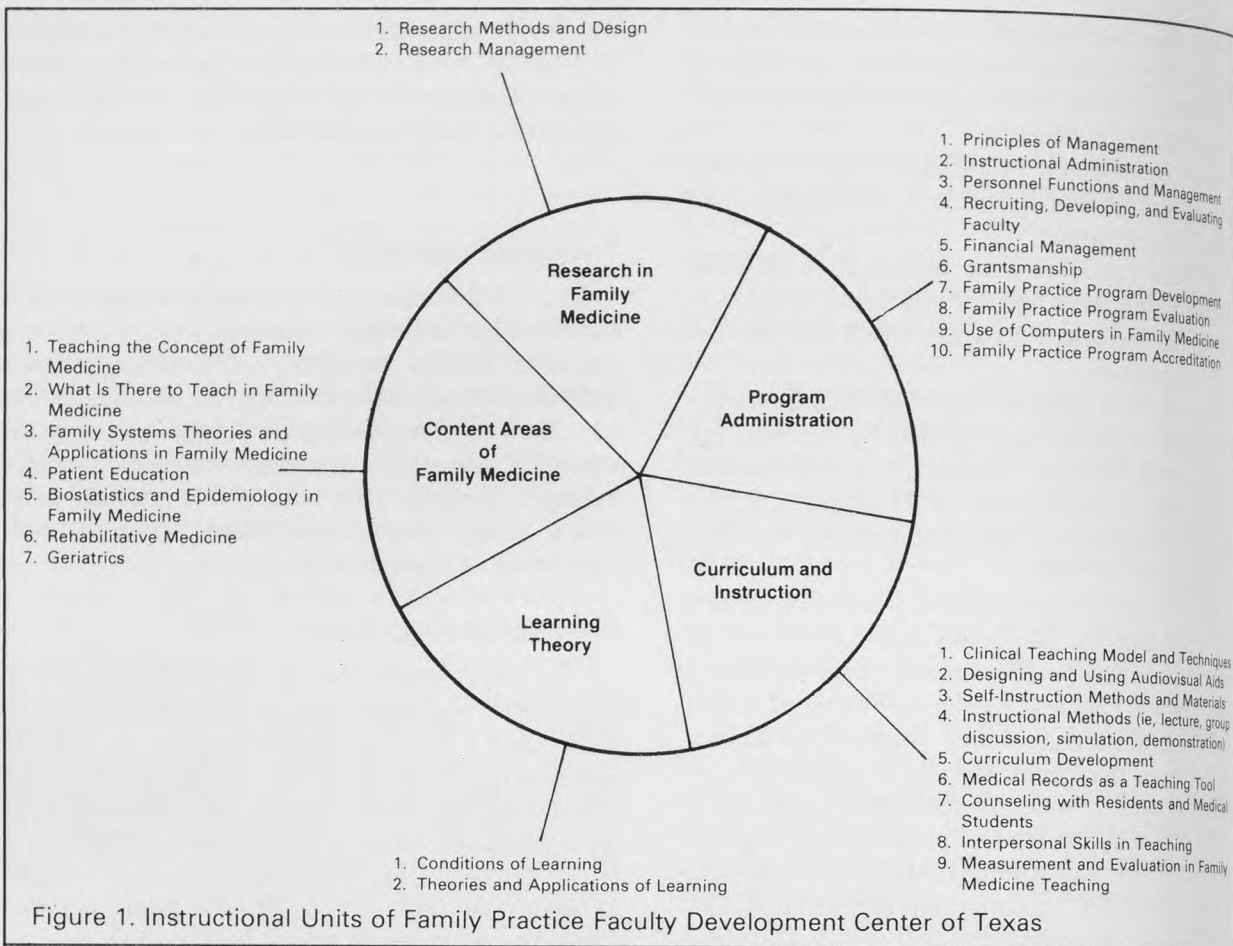
and the subject material of family medicine (Figure 1). Each of these instructional areas is given a different emphasis according to the specific intent and type of program offered by the center.

### **Training Programs**

In order to meet the diversity of training needs required by full-time, part-time, voluntary, and potential faculty members of family medicine training programs, the Faculty Development Center offers four major types of training programs including: one-year fellowships; four week preceptorships; ten-day institutes; and weekend workshops. Table 1 provides a breakdown of the characteristics of these four programs.

#### *Fellowship Programs*

The target population of the Fellowship Program is the physician who has recently or intends to become a full-time faculty member in a family practice residency program. During the one year of training, the fellow spends three months in intensive training at the Faculty Development Center in Waco. During this time instruction consists of approximately 600 hours of training in five major areas: learning theory, curriculum and instruction, research methodology, content of family medicine, and program management and administration. The intensive training is given in one-month segments which are interspersed with three-month periods with assignments to be completed at the fellow's home program or practice location. The off-site experiences include practice teaching, completion of self-instructional units, and completion of a research project under the supervision of faculty at the fellow's sponsoring program and Faculty Development Center staff. The off-site requirements of the Fellowship Program entail an additional 500 hours of practice teaching and research project design and implementation, making the total commitment to the fellowship 1,100 hours in the one-year period. Fellows are paid a stipend by the center. Three individuals completed a fellowship during the 1978-1979 academic year and displayed an improvement on evaluation conducted by the center in the cognitive performance areas of the program. Three additional fellows are enrolled in the 1979-1980 year and it is the intent of the center to expand the



fellowship program to six positions a year in the academic year 1980-1981.

**Preceptorships**

Family medicine faculty preceptorships are offered by the center to current faculty of family practice training programs who want to improve their teaching skills in a concentrated period. Each preceptorship program is four weeks in length and is run in conjunction with the three on-site training months of the fellowship program. Thus, preceptorship participants have the option of selecting one of the three types of preceptorship programs which best fits their training needs: (1) teaching skills in family medicine, (2) management skills in family medicine, or (3) research and evaluation skills in family medicine. A benefit from structuring the preceptorship program in conjunction with the fellowship on-site training months is that it allows preceptorship trainees the option of fulfilling all the requirements for the fellowship certificate by completing each of the three preceptorship programs in successive years and completing the

required research projects, instructional units, and off-site practice teaching experiences of the fellowship program. A registration fee is charged for participation in the preceptorship program and the trainees must be sponsored by their residency programs which agree to pay their salary and expenses while they are in Waco.

**Institutes**

The Family Practice Teaching Institutes are short courses of six-to-ten days duration and are designed primarily for paid or part-time paid faculty. Two types of institutes are offered—one type dealing with the improvement of teaching skills and the other type dealing with the improvement of program administrative skills. The overall educational strategy for the institutes is to provide a significant amount of subject material in a short period of time. There are laboratory exercises dealing with the development of instructional skills in the institutes devoted to this subject. Management exercises and the case study method

Table 1. Family Practice Faculty Development Center Training Programs

Type of Program	Fellowship	Preceptorship	Institute	Workshop
Frequency	Annual basis Once per year	Annual basis Once per year	Four times per year	Five times per year
Duration	12 months	4 weeks	6-10 days	2 days
Hours of Instruction	1,100	160	60	12
Location	3 months at Faculty Development Center, Waco; and 9 months at sponsoring residency program	Faculty Development Center, Waco	Waco	Various cities in Texas
Target Population				
Primary	New and potential full-time faculty	Full-time or part-time faculty	Full-time or part-time faculty	Voluntary faculty
Secondary			Voluntary faculty	Part-time or full-time faculty
Topical Focus and Instruction Units Offered	<ol style="list-style-type: none"> <li>1. Learning theory and application</li> <li>2. Curriculum and instruction</li> <li>3. Program administration</li> <li>4. Research in family medicine</li> <li>5. Content areas of family medicine</li> </ol>	<ol style="list-style-type: none"> <li>1. Teaching skills</li> <li>2. Management skills</li> <li>3. Research and evaluation skills</li> </ol>	<ol style="list-style-type: none"> <li>1. Teaching skills or</li> <li>2. Program administration</li> </ol>	<ol style="list-style-type: none"> <li>1. Clinical skills</li> </ol>
Trainee Stipend Paid	Yes	No	No	No
Registration Fee	No	Yes	Yes	Yes

are used in the institutes dealing with program management.

### Workshops

The faculty development workshops are two-day courses held on weekends. They are primarily aimed at, but not limited to, voluntary faculty. Most family practice programs rely heavily on voluntary faculty, and it is the center's intent to offer programs for teachers who might not be able to leave practice situations for extended periods of time. The workshops consist of 12 hours of intensive training in improving instructional skills with major emphasis on one-to-one clinical teaching.

### Resource Center and Consultation

A major benefit of the statewide center has been its aid as a resource center to support current and newly developing family practice training programs in Texas. Through its multidisciplinary staff the center has been able to provide consultations to programs on such critical issues as funding, grant writing, staffing, curriculum, and financial management. In the current year the center has been working closely with newly developing programs in the state to help ensure their successful evolution into stable programs. Other consultations have included training programs on topics of greatest need (ie, a grants writing workshop prior

to the family medicine training grant cycle this year). In addition to providing consultation to programs on particular problems that arise, the center is developing an educational review process for family practice programs in the state consisting of a four-step process: (1) a program of self-study based on criteria developed by the center, (2) an on-site visit by a team of consultants from the center, (3) a written report of recommendations to programs, and (4) assistance for the program's faculty and staff in implementing the recommendations.

### Research and Communications

The Faculty Development Center conducts research in the application of teacher training methodology to the development of faculty in family medicine. The support of the consortium of residency programs in the state provides significant opportunities for data gathering and analysis for testing instructional techniques developed by the center. At present the center has conducted a statewide study of faculty in family practice programs to serve as a formal needs assessment for full-time faculty development activities within the state. This study utilizes two methods of identifying training needs of faculty: (1) a questionnaire to determine the practice experience, teacher training, and teaching difficulties of faculty, and (2) a teaching encounter log which provides a way for faculty to record information regarding the clinical content, location, learning problems, teaching methods, and evaluation of each encounter a faculty member has with residents and medical students. The information from this study will be utilized to improve the center's capabilities to develop programs which will serve the training needs of faculty in Texas. Other aspects of the research program of the center include: (1) determination of the characteristics of the family practice faculty (eg, biographical, psychological, personality traits, geographical preferences), (2) determination of the learning styles most suited to training in family medicine (ie, didactic vs independent study, audiovisual vs non-audiovisual supplemented learning, combinations of learning activities), (3) refinement of methods of evaluating teaching in family practice residency programs both on a short-term and long-term basis; and (4) comparison of the effectiveness of different methods of recruiting faculty into family medicine

including the use of formal training in teaching as a part of faculty recruitment.

As a method of dissemination of the research efforts of the center and also as a way to brief faculty in the state on techniques of teaching in family medicine, the center distributes a newsletter semiannually. The content of the newsletter consists of articles regarding techniques and advances in teaching technology as they specifically relate to family medicine education. The newsletter also contains some short articles to communicate the progress and programs of the center and at least one substantive research article in the area of faculty development.

### Comment

The task of enrichment and augmentation of faculty in family medicine is a challenge which must be successfully addressed in order to solidify the growth and encourage academic excellence in this important field of medicine. Filling the faculty vacancies in existing teaching programs and staffing newly formed programs with competent faculty are critical to the continued development of residency programs which can provide an adequate number of family physicians for practice. The Family Practice Faculty Development Center of Texas is a statewide cooperative venture for providing an expert staff and a range of training opportunities to current and prospective faculty. The center's widespread support from Texas residency programs, multidisciplinary faculty and staff, multifaceted training programs, and emphasis on research in family medicine teaching should provide a viable strategy for strengthening the practice and development of family medicine.

### Acknowledgement

This project was partially supported by Grant No. 5-D15-PE56003-02, awarded by the Health Resources Administration.

### References

1. Geyman JP: Family practice in evolution. *N Engl J Med* 298:593, 1978
2. Longenecker DP, Wright JC, Gillen JC: Profile of full-time family practice educators. *J Fam Pract* 4:111, 1977
3. Stephens GG: On becoming a teacher of family medicine. *J Fam Pract* 4:325, 1977
4. Bland CJ: The STFM needs assessment survey: A summary. *Fam Med Times* 10(1):12, 1977
5. Texas State Legislature: An act to provide state funding for family practice residency programs in Texas, Texas House Bill 282. Austin, Tex, Texas Press, 1977
6. Geyman JP, Brown TC: A network model for decentralized family practice residency training. *J Fam Pract* 3:621, 1976