Chapter 16
Starting a Faculty Development Program

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16.1 Introduction

Faculty development programs in medical and other health professions schools, specialty societies, and colleges have grown steadily over the past 20 years (Al-Wardy 2008; McLeod and Steinert 2010). This surge in growth has been precipitated by the acknowledgement that support for faculty in their roles as teachers, educators, researchers and administrators is essential for a vibrant academic community and culture (Steinert et al. 2006).

For the purposes of this chapter, faculty development is defined as:

> The broad range of activities that institutions use to renew or assist faculty members in their multiple roles. Faculty development activities include programs to enhance teaching and education, research and scholarly activity, academic leadership and management, and faculty affairs, including faculty recruitment, advancement, retention, and vitality. The intent of these activities is to assist faculty members in their roles as teachers, educators, leaders, administrators and researchers (1st International Conference on Faculty Development in the Health Professions 2011).

Faculty development programs have also grown in complexity in response to recent trends and changes in health professions education. Some of these key trends include the professionalism of health professions education, competency-based education, technology-enhanced learning, social accountability, increasingly sophisticated and standardized selection of students and assessment processes, work-based learning, academic leadership development, interprofessional education, the use of simulation, patient safety and quality improvement, transitions curricula, and continuing

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personal and professional development for certification purposes (Association of Faculties of Medicine of Canada 2010, 2012; General Medical Council 2009; Medical Deans Australia and New Zealand 2009; Patricio and Harden 2010). These trends are also shaping the form in which faculty development is being offered.

Starting a faculty development program can be challenging for health professions educators and administrators. The purpose of this chapter is to outline an approach for starting a faculty development program—whether it is initiating a single hospital department-based program addressing a focused faculty development issue, building a program in a hospital, specialty society or college, or starting a program that is faculty-wide, national or international. Guided by change theory and other theoretical approaches and related models and guidelines that can inform faculty development, we will describe the developmental steps required (Steinert et al. 2005; Steinert and Mann 2006; Wilkerson 1984).

16.2 Initial Steps in Designing a Faculty Development Program

16.2.1 Accept the Challenge

Being asked or taking the initiative to start a faculty development program in an organization is the very first step. The leader needs to be convinced that there is a strong institutional willingness and support to engage in these activities, that there are colleagues who will work with the leader, and that the program will have some resources attached to it. When organizations don't fully understand what might be needed for a faculty development program to succeed, the proposed leader of the program needs to take the time to meet with those she/he reports to, in order to secure the necessary resources. It is very possible to start a program successfully with modest resources, combined with strong institutional willingness for its success. For example, one of the most compelling ways to begin a program is to simply gather interested faculty and staff together to talk about teaching, career development or leadership (D'Eon et al. 2000). While this isn't a common institutional practice, don't be surprised to hear participants say, 'I don't understand why we haven't done this before. When are we meeting again?'

16.2.2 Understand the Institutional and Organizational Culture

Understanding the institutional and organizational culture allows the faculty development program to be responsive to the organization's needs. This subject is crucial, since successful faculty development programs are situated contextually within organizations. See Chap. 6 for a further discussion of this topic.

Ideally, the faculty development leader is integrated into the organization's education leadership. In a small program, where the leader of faculty development may be the only faculty developer, this can take the form of representation on the faculty or society education or academic planning committee. In a larger faculty development program, this can take the form of mutual committee membership (i.e. representation of faculty developers on key curriculum committees and representation of university or society leadership on faculty development planning committees). Integrating the leaders of faculty development into the key decision-making bodies of an organization ensures alignment of the needs of the organization with program planning.

Curricular reform is an ideal time to situate or initiate a new faculty development program because there are more opportunities for new relationships, exchanges and collaborations to develop; funding for resources is also more often available (Rubeck and Witzke 1998). Health professions education is increasingly interprofessional, and this is reflected in several new faculty development programs (Brashers et al. 2012; Moaveni et al. 2008; Silver and Leslie 2009; Steinert 2005). Faculty development leaders need to address whether a program is oriented to single disciplines, interprofessional audiences or combinations of the two. Having permanent representatives from various health professions on faculty development planning committees can help faculty developers and educators anticipate and integrate new and cutting edge curricular innovations into the faculty development curricula and promote interprofessional education.

16.2.3 Develop a Change Strategy

Whether faculty developers or educational leaders are considering initiating a single faculty development program within a department or a system-wide program at a medical school, speciality society or college, it is easy to be intimidated by the challenge. Where do we start? Whom do we involve? How do we get our colleagues to be so excited about the change that they line up to help us succeed? Change strategies originating out of the leadership and change management literature can be very helpful. John Kotter (1996) describes a cogent eight-step process that can be directly applied to the context of a faculty development program. More specifically, Kotter emphasizes issues like creating a sense of urgency at a program's initiation, forming a powerful coalition of partners and collaborators, creating a vision for change that is well communicated, removing institutional obstacles, creating early wins for the program, consolidating gains and producing more change, and anchoring the change in institutional culture. Because this model can help to propel the initiation of a faculty development program, the reader is directed to Kotter and other change strategists for more information (Rogers 2003; Morrison 1998).

16.2.4 Form a Planning Committee

Gathering a group of like-minded individuals around the planning committee table is essential, whether the program is small or large. For smaller programs and initiatives, having members of the target audience and key stakeholders around the table is essential. For a larger program or centre, it is helpful to consider including representatives of the key curricular committees, leaders and change agents within the organization, as well as teachers, researchers and administrators who are opinion leaders. This committee can evolve into an ongoing management committee for the program as it develops and grows.

Faculty development programs at large medical schools might want to consider forming an additional governance committee made up of representatives of higher leadership within the organization, or if there are partner organizations involved, representatives from the various organizations. Examples of higher leadership include deans, vice-deans and associate deans, hospital chiefs (in education and faculty affairs), and department heads at medical schools. In specialty societies, they would include members of the organization's executive team, their lay advisory group, and key academic opinion leaders within the society. Medical schools and specialty societies should consider the inclusion of policy representatives from provincial or state associations to ensure alignment with human resource needs in the state or province. The purpose of a governance committee is to ensure alignment with the strategic plans of the host organization(s) and to ensure continuous infrastructure and funding support going forward.

Larger schools or programs may consider hiring an external change management consultant to assist with the planning and change process, since a consultant can be especially impartial during interviews and focus groups with stakeholders and participants, and can provide seasoned facilitation of the start-up process.

16.2.5 Conduct an Environmental Scan of Existing Programs

A literature search to find programs and education contexts similar to what we intend to build can be very helpful. Reviewing best practices in faculty development, such as systematic reviews and outcome studies, can establish which best practices should be incorporated into the program (Steinert et al. 2006). Website reviews are also helpful as many schools, specialty societies, and colleges highlight their faculty development programs online. Educators and administrators may make direct contact with other organizations to clarify details of their programs. This contact with the broader faculty development community can be a valuable part of relationship building.

16.2.6 Design and Execute a Needs Assessment

A needs assessment can establish the directions a program can take and elaborate the specific context and potential influence of the institution's stakeholders and potential participants. Case, Buhl and Lindquist (in Lindquist 1979) suggest some questions that institutions can utilize for a needs assessment:

- Will the institution's authorities champion a faculty development program?
- Who could influence the level of acceptance of the program?
- What resources related to faculty development are currently available?
- What has taken place already in faculty development in the institution? How was it received?
- Are the institution's goals and strategies known? Acted upon? Shared by all participants?
- What norms exist that might influence faculty participation?

Looking at subjective individual needs will help define the goals, identify the content and preferred learning methods, assure relevance, assess interest, and identify preferred timetables of activities. Common methods of conducting this assessment include surveys and individual interviews or focus groups with key informants, frontline teachers, researchers, administrators, students and patients (Blouin and Van Melle 2006). Objective data can be derived from student ratings of their teachers and supervisors, observing teaching in action, an accreditation report, or the faculty development literature. Needs assessment data may reveal unexpected observations that can help shape a program; for example, junior faculty will not perceive learning needs for academic development that more seasoned faculty may, and vice versa. Needs assessment data can also help translate goals into objectives for the program (Steinert et al. 2006).

16.2.7 Establish the Mission, Vision and Values of the Program

Establishing the mission, vision and values statements will bring the education community together for a common task. It is not unusual for these statements to take several months to write; it is a function of the process that advisory and organizing committees take to focus the program and establish the partnerships and culture that will characterize it. From personal experience, establishing the values statements can be the most meaningful of all the tasks undertaken by those establishing a new program in faculty development.

A **vision** statement describes what the program aspires to, what it wants to be, and its intended scope of influence:

> *Foundation for Advancement of International Medical Education and Research (FAIMER) Faculty Development Program:* To create and enhance educational resources for those

who teach physicians committed to improving and maintaining the health of the communities they serve (Foundation for Advancement of International Medical Education and Research 2012).

A **mission** statement states the purpose of the program and what it will do in the field, for example:

McGill University, Department of Family Medicine Faculty Development Office: The division of Faculty Development is committed to helping Family Medicine faculty, both in the University and in the community, improve their comfort and competence in the following areas: Teaching and learning, understanding research and stimulating interest, and research methods training (McGill University Department of Family Medicine 2011).

Harvard University, Office of Faculty Development at Boston Children's Hospital (BCH): To facilitate the career advancement and satisfaction of Harvard Medical School (HMS) faculty at Boston Children's Hospital, fostering careers of all junior faculty, and increasing leadership opportunities for women and minorities (Boston Children's Hospital 2013).

Although it is rare for faculty development programs to have a specific values statement (i.e. we could not find another example of a specific values statement online, outside of our university), writing them can set the tone for a program at its inception. Bringing together the relevant stakeholders to do this can be an invigorating and inspiring experience. A **values** statement captures the culture the organization aspires to, for example:

University of Toronto, Centre for Faculty Development at St. Michael's Hospital: As leaders who are committed to excellence and the well-being of faculty, students and their patients, we embrace the following core values (Centre for Faculty Development n.d.):

- Learner centeredness.
- Inter-professional collaboration.
- Critical inquiry and scholarship.
- Innovation and creativity.
- Accessibility.
- Social accountability.

16.2.8 Describe the Purpose, Goals and Objectives of the Program

The purpose, goals and objectives should reflect institutional, departmental and individual issues. They are often derived from the results of a needs assessment (Wilkerson 1984). Crafting these statements carefully will be time well spent because they will influence the target audiences, the choice of program, the content and the formats of the faculty development program (Steinert and Mann 2006).

16.2.9 Create a Short List of Strategic Deliverables

Using the results of the needs assessment and the deliberations of the planning committee, two to three key strategic initiatives should be identified for delivery in the

first year. More deliverables can be articulated and scheduled over a 3-year period, depending on the size of the program and available resources. When working groups are used, it is best to vet these initiatives first with the stakeholders who were previously consulted during the needs assessment. This will help ensure alignment of these initiatives with the vested interests and priorities of education leaders, curriculum committees and host institutions.

Clearly outlining each initiative's goals, objectives and implementation plan will make it clear to the institution's leaders where the faculty development program is going. In larger programs, working groups can be formed from interested stakeholders to flesh out the details of the program content, to identify how the program will be delivered and evaluated, and to determine the resources that might be needed over the 3-year period. The planning process is in itself a form of faculty development, as it helps to socialize a larger group of teachers, educators and researchers into a learning community. It also provides the leads of the working groups with leadership opportunities.

16.3 Establishing the Faculty Development Curriculum, Design and Method of Delivery

Having established the strategic needs of the organization or program, begin to develop faculty development curricula and identify how they will be designed and delivered. Nearly all programs worldwide have a strong focus on improving teaching effectiveness (Steinert 2000; Steinert and Mann 2006). A faculty development curriculum is often directed by the curriculum renewal process and by evolving trends in health professions education. Leadership and management programs are increasingly popular, especially with medical education associations, international foundations and medical schools (Gruppen et al. 2003; Lieff 2010; Swanwick and McKimm 2010). Organizational development is an equally important issue because it plays a critical part in creating an institutional culture that supports teaching excellence, education scholarship, innovation and leadership (Steinert and Mann 2006).

Changes in organizational systems are often necessary to provide these supports. For example, unless a medical school has aligned its policies on promotion to support promotion on the basis of teaching and education scholarship, faculty development programs will have difficulty recruiting participants, because the new skill sets learned by faculty members may not be rewarded. Career development, including orientation programs for junior faculty, specialized programs for mid-career and late career faculty, and programs with a special focus such as women and minority faculty, is seen as an essential component of support programs (Rust et al. 2006; Spickard et al. 2002).

Program developers need to choose the appropriate education formats to deliver faculty development curricula. Steinert (2010) has provided an excellent framework to guide the choice of these activities, ranging from formal to informal, and from individual to group. This framework includes workshops and seminars, mentoring, fellowships, longitudinal programs, online learning, peer coaching, peer and student

feedback, work-based learning and communities of practice. Each of these formats has a rich literature that supports its efficacy (Fidler et al. 2007; Gruppen et al. 2006; Hatem et al. 2009; Lieff 2009; Pattison et al. 2012; Pololi et al. 2002; Steinert and McLeod 2006; Takagishi and Dabrow 2011; Thorndyke et al. 2008). Other formats could also be considered (depending on access to resources), including the use of co-teaching, simulation, and theatre techniques (Krautscheid et al. 2008; Kumagai et al. 2007; Orlander et al. 2000).

To get started, it may be more feasible to start small with a menu of activities that includes both formal and informal activities, such as workshops, rounds, seminars, co-teaching, mentoring, using peer and student feedback, and individual and group methods of work-based learning. Later, creating online learning, simulation, fellowships, longitudinal programs, and communities of practice can be added. Kotter's (1996) suggestion, of going for 'early wins', is relevant and practical in this context. Choosing an activity or a series of activities that will please or meet an urgent faculty development need in the organization can kick-start a program and create a 'buzz' about it. This could take the form of monthly grand rounds in education, a new academic leadership program for a speciality society or a journal club on supervision for postgraduate teachers.

16.3.1 Consider Theoretical Approaches and Related Models, Principles and Guidelines That Inform Faculty Development

No single comprehensive education theory explains how faculty develop academic skills, but several theories, guidelines, models and principles can help inform the planning of a faculty development program (Steinert 2011). The following is a summary of key approaches and their implications for initiating a new program.

16.3.1.1 Andragogy

Malcolm Knowles (1984) introduced the term 'andragogy' to describe key principles on how adults learn. These learner-centered principles have strongly influenced health professions education for almost three decades and provide a solid foundation for initiating a faculty development program:

- Setting a cooperative learning climate where learners feel safe.
- Creating mechanisms for mutual planning of curricula (by teachers and students).
- Arranging for a diagnosis of learner needs and interests.
- Enabling the formulation of learning objectives based on the diagnosed needs and interests.
- Designing sequential activities for achieving objectives.
- Executing the design by selecting methods, materials and resources.
- Evaluating the quality of the learning experience by having learners critically reflect on their learning.

16.3.1.2 Self-Directed Learning

Self-directed learning is a method of organizing teaching and learning so that learners are empowered to accept personal responsibility for their learning. Learners are provided a menu of learning formats to choose from and are encouraged to be autonomous. This approach to learning helps guide faculty development program leaders to structure learning in a manner that gives much of the responsibility to faculty learners. For example, to encourage faculty to be self-directed in their learning, it is suggested that learners have opportunities to critically appraise new information, to ask questions, to identify their own learning gaps by comparing these to education best-practice benchmarks, and to critically reflect on how and what they have learned (Lunyk-Child et al. 2001; Mamary and Charles 2003; Silén and Uhlin 2008). There are elaborate collaborative faculty development programs designed with this self-directed learning in mind (Sanders et al. 1997). Please see Chap. 11 on online faculty development for more examples.

16.3.1.3 Self-Efficacy

Self-efficacy theory was articulated by Albert Bandura (1986). His work in this area focused on how an individual's self-assessment of their ability is central to how they behave. It is very specific to a domain or specific tasks. Self-efficacy is the individual's perception of their ability to execute a certain task (or tasks) that predicts the level of the goals, the effort and the persistence they will demonstrate. Essentially, perceived success can raise our self-efficacy, while failures (especially if they are early in the learning process) can lower self-efficacy. Bandura wrote that these self-judgments are based on a combination of factors (in decreasing order of influence): the person's experience with the task; observational learning; verbal persuasion; and the individuals' physiological state. Self-efficacy is not a fixed perception; it can be changed through education and learning experiences. For example, when thinking about observational learning, this theory predicts that if we set up our faculty development programs so faculty members can be observed being successful with unfamiliar tasks, other faculty are more likely to feel that they can perform the tasks well too. Giving faculty members an opportunity to practice new skills, receive feedback and achieve some success can also be a powerful way in which to build a sense of self-efficacy.

16.3.1.4 Expectancy-Value Theory

Related to self-efficacy theory is a framework called expectancy-value theory (Fishbein and Ajzen 1975). According to this theory, a learner's motivation is determined by how much they value a goal and whether they expect to succeed with a task or activity. Heckhausen (1991) defined several types of expectancies that learners can have, including the subjective probability of obtaining a particular outcome with an activity, and the subjective probability of an outcome being associated

with a specific consequence. These dynamics can often be at play in faculty development. For example, if clinical teachers anticipate that faculty development will enhance their professional development, and if they believe that these activities are relevant to them, they may be more likely to attend workshops and seminars on teaching improvement. In addition, the value they place on self-improvement and in their teaching activities may be self-motivating (Steinert 2010).

This theory has great potential to help faculty developers understand what motivates faculty to attend sessions. Educators need to understand why well-rated teachers or excellent administrators habitually attend faculty development workshops, while faculty who might really need the faculty development do not attend. Seasoned faculty developers have also observed that it is sometimes difficult for faculty to move out of the safety of their own department, unit or area of speciality to attend workshops with faculty members from different specialities or health professions. These faculty members may not place much intrinsic value on interprofessional learning, or expect that it will not go well. However, it has been observed that expectancies and values can change after a single, well-taught interdisciplinary workshop (Pandachuck et al. 2004).

16.3.1.5 Constructivist Theory

Within a constructivist framework, learning involves the active construction of learning and mental processes (Fosnot 1996). Several theories of learning are constructivist. Within a faculty development context, this theory would predict that it is important to understand faculty's preconceptions and to build knowledge based on what has been learned already. It is also important to understand that individual faculty members will have different experiences, knowledge and values, and as a result, they may construct their understanding of their teaching, research and leadership behaviors in different ways. Faculty developers need to understand the specific contexts in which faculty members teach, conduct their research, and work in their organizations in order to construct learning sessions that are optimally relevant and useful.

Teachers and administrators will also change their behavior based on the learning that occurs in their teaching and organization's environments. Teaching more effectively results from gaining practical knowledge and skills from the teaching experience itself (i.e. constructing meaning and building on prior knowledge). Reconstructing actual teaching or administrative experiences during faculty development sessions, or reviewing videotapes of previous teaching sessions, are applications of constructivist theory in practice (Skeff et al. 1986).

16.3.1.6 Social-Cultural Theories

Social learning theories focus on how learning occurs with, and from, others and from the environment. These theories generally have two perspectives: the first

deals with the learning that happens within an individual; the second focuses on the learning that happens through interactions with other individuals. Social-cultural theories belong to the second perspective.

Within the social-cultural learning framework, learning is thought of as socialization into a new knowledge community (Wilkerson and Irby 1998). In a faculty development context, knowledge is socially constructed through interaction with a peer group of faculty. Learning occurs through contact with faculty members who are role model teachers and educators, and via arranged peer-coaching learning opportunities. Learners are immersed in a community where teaching and learning is explored, beliefs are discussed, and roles are identified. This is one of the most important and effective methodologies in faculty development (Steinert et al. 2006). Two learning constructs are derived from social-cultural theory: communities of practice and situated learning (Lave and Wenger 1991).

D'Eon has described teaching as a social practice that is purposive, rational and situated within a community (D'Eon et al. 2000). Communities of practice have been defined as a 'persistent, sustained, social network of individuals who share and develop an overlapping knowledge base, set of beliefs, values, history and experiences focused on a common practice and/or mutual enterprise' (Barab et al. 2002, p. 7). Faculty developers have an important role in socializing faculty and staff into communities of practice based on their mutual interests. Moreover, these communities of practice can provide an important foundation for influencing the greater community of teachers, administrators or researchers in an organization (Vescio et al. 2008).

Situated learning is based on the notion that learning is situated in authentic contexts (Miller et al. 2010). When learning normally occurs, it is embedded within activities, context and culture. This theory highlights the fact that knowledge needs to be presented in authentic contexts—settings and situations where this knowledge would be applied. In a faculty development context, case-based learning, role-playing and the use of simulation are teaching modalities that support this theory.

16.3.1.7 Reflective Practice

Donald Schön (1987) argued that formal learning theories were not adequate to explain the everyday messy problems of practice. He labeled professionals' automatic ways of responding to clinical situations in areas of superior competence as 'zones of mastery' or 'knowing in action'. When a clinician experiences a surprise situation in their practice, they 'reflect[s]-in-action' while the patient might still be in their office. The clinician would problem solve within the situation and make the best-educated formulation of the problem and come to a decision. Schön (1987) perceived this situation as an experiment based on the clinician's best hypothesis. Later in the day, the clinician might 'reflect-on-action' about what had happened. As a result, the clinician might consult other colleagues, a text, or the Internet to further understand the 'surprising' situation. Moreover, as a result of the 'reflection-on-action,' the clinician would learn something new, and this would become a new part of their zone of mastery.

Applied to a faculty development context, this model for learning would predict that the encouragement of mindfulness toward metacognitions, connected to teaching surprises and challenges, would be a helpful way to access narratives for sharing between teachers. In a teaching context, faculty developers could reconstruct these situations with other faculty members through role-playing and by assisting faculty to move along the continuum from reflection-in-action, to experimentation, to reflection-on-action.

16.3.2 Develop an Evaluation Plan to Measure Program Impact and Outcomes

Establishing an evaluation strategy at the outset is important to build an accountability framework for the program. This will be viewed favorably by the funders of the program and will provide opportunities for education scholarship and research.

There have been a number of evaluation models used in faculty development, including simple methods such as post-activity self-report evaluations, student evaluations of teachers, retrospective pre/post assessments, perceived competence in teaching methods, and commitment to change strategies (Bandiera et al. 2005; Boerboom et al. 2009; McLeod et al. 2008; Myhre and Lockyer 2010; Pandachuck et al. 2004). Something as simple as a well-designed participant satisfaction rating scale continues to remain an important component of faculty development evaluation; if programs are well-rated, participants will tell their colleagues about it. These instruments also provide valuable feedback to program planners regarding the teaching and learning strategies and the relevance of the program (Steinert and Mann 2006).

More comprehensive and systems-based evaluation strategies have been applied to faculty development programs including an outcomes logic model, the Kirkpatrick framework, objective structured teaching evaluations (OSTEs), faculty achievement tracking tools, curriculum vitae analyses, and qualitative evaluation methods (Armstrong and Barsion 2006; Knight et al. 2007; Morzinski and Schubot 2000; Pettus et al. 2009; Wamsley et al. 2005). Evaluating the impact of faculty development is important on many levels: accountability to the funders, growing the program, and marketing the program to potential participants. Whether or not a program becomes a permanent feature at a school or institution ultimately depends on its demonstrated value and a positive answer to the question “Does it work?”

16.3.3 Establish a Program of Scholarship in Faculty Development

Even as a program is just getting established, it is prudent to be thinking of the program’s potential for scholarship and research. Starting a program is a unique opportunity to create a scholarly community in faculty development and to charge

those involved with academic goals and aspirations. Good principles to guide the process include focusing scholarship on the programs that will be delivered, engaging education researchers early in the program planning stage, and focusing scholarship in areas that are aligned with education goals and objectives of the funding organization. (See Chaps. 17 and 18 for a further discussion of this topic.)

16.3.4 Develop a Plan for Sustainability

Thinking of how to sustain a program is an important consideration at the inception of a faculty development program. One consideration is to look at advocacy for policy changes within a university or at a government level that will help sustain the program. For example, at a university, developing promotion policies that are aligned with leadership or scholarship training programs in education are important. Education scholarship including excellence in teaching will need to be included as key criteria for promotion if faculty development programs are focused on developing teachers, scholars and leaders. Developing policies that mandate faculty development for all faculty members as part of their performance review can help sustain a program. At a government level, advocating for funding for the support of academic leadership development and health professions education grants to support innovation in faculty development are important interventions.

Even at the start-up of a program, it is important to begin to consider the identification of future leaders in faculty development and how to enable their personal growth and development as the program grows. When resources are available, hiring an associate director for the program early on can quickly broaden the scope of the program and address the importance of succession planning.

16.3.5 Secure Infrastructure Funding and Staffing

Faculty development program planners need to take into consideration the budget available to produce a program of activities. At a medical school level, the school may fund these programs as part of its core budget, although this may vary considerably between schools. Starting a program may well begin with very modest financial support. Hospital or university department-specific programs and specialty societies or colleges may also allocate funds for faculty development. Many medical schools expect a faculty development office or centre to be partially self-sufficient financially. Program leaders need to assess the culture of their organization to understand the faculty's tolerance for paying for faculty development. It is not uncommon for departments or hospitals to financially sponsor faculty members who are participating in longitudinal programs such as fellowships and Teaching/Education Scholars Programs.

Education leadership programs developed by colleges or large medical associations are often financed on a cost-recovery basis. For larger programs, it is advisable to establish a formal business plan that can project the growing needs of the program forward for several years. This process can formalize the necessary accountability that organizations will expect when funding a new faculty development program.

There are few guidelines available to recommend the necessary start-up staff needed to run these programs. At one academic teaching hospital, the initial infrastructure of the office for faculty development includes one full-time equivalent (FTE) director and a 1.0 FTE administrative assistant serving approximately 900 faculty (Emans et al. 2008). A Master Teacher Program in a large medical school's department of medicine has a 0.6 FTE director and a 0.2 FTE administrative assistant serving 1,160 faculty members (D. Panisko, personal communication, August 2012). When resources are scarce, it is also possible to do faculty development on a 'shoestring' budget (Palloff and Pratt 2011). For example, students or residents who are technologically savvy may be highly motivated to assist faculty with this aspect of their professional development. Education specialists from the Education or Informatics Faculties may be very interested in collaborating with the Faculty of Health Sciences by providing single faculty development sessions at minimal cost. Encouraging experienced teachers, administrators and researchers to assist novice faculty either formally or informally can be organized with minimal administrative assistance.

16.3.6 Market the Program

Marketing and branding a faculty development program can be very useful in the start-up phase. Creating a faculty development website is an essential marketing tool. It can advertise the program calendar, highlight the staff and faculty who administer and teach the program, and provide additional education resources. Creating a unique logo for the program can be an effective community-building exercise. The use of social media—from blogs to wikis to tweets—has become a new means by which faculty development programs can communicate, collaborate and teach.

16.4 Conclusion

Starting a faculty development program can be an exciting, even exhilarating, time in a health professional's career. It's a time of relationship- and network-building, risk-taking, experimentation and creativity. Once started, there are many issues and challenges that faculty development leaders will face, including engaging staff and administrators in faculty development, addressing the fact that leading a faculty

development program often needs to be balanced with clinical work, fitting students and trainees in with the productivity demands of service, balancing formal vs. informal learning opportunities, resolving ongoing funding challenges, and of course, ensuring the sustainability of the program.

Having an organized approach based on theoretical assumptions, trends in health professions education, principles, goals and objectives, and a change and design strategy, will help overcome the many challenges that are part of the journey of getting a program off the ground. This chapter has outlined a number of layered approaches that educators, administrators and faculty developers can use to frame a plan of action. Starting a faculty development program provides a unique opportunity to influence the next generation of health professions teachers, administrators and researchers. Starting and leading a program can be one of the most gratifying academic activities in a career. We invite future faculty developers to take up the challenge today, to continue to build capacity in the field and to join our growing international community.

> Start by doing what's necessary; then do what's possible; and suddenly you are doing the impossible.
>
> —*Saint Francis of Assisi*

16.5 Key Messages

- Consider implementing a comprehensive faculty development program that will serve the multiple needs of teachers, educators, researchers and administrators.
- Theoretical approaches, and related models, principles and guidelines can inform the strategies used to plan, develop, implement and evaluate a faculty development program.
- Align the faculty development program with the strategic goals, objectives and culture of the institution that the program is serving.
- Create vision, mission and values statements for the program.
- If participating in the program creates a sense of community, enables faculty members to be promoted, is accessible and enjoyable, the program will be successful.

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