Teaching, Learning and Scholarship

Faculty Development Programming Updates for 2020-21

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Executive Summary

Overview

In July and August 2020, a faculty development needs assessment was sent by electronic survey to individuals and department administration at the School of Medicine & Health Sciences. This survey was developed after a review on the literature around medical education and health care education faculty development, incorporated feedback from previous faculty development post-activity surveys and communication, and was informed by current and anticipated future developments related to COVID-19 and the impact on teaching and thus faculty development needs.

The intended outcome of this annual survey was to guide future faculty development offerings of the Teaching, Learning, and Scholarship (TLAS) unit of Education Resources and the Office of Education & Faculty Affairs (EFA). The TLAS unit focuses on faculty development within the areas of teaching excellence and educational scholarship. The following document comprises three sections:

- 1. A summary of the key findings from the survey,
- 2. A tentative plan for 2020–2021 based on those findings,
- 3. The raw data from the needs assessment survey.

Online Teaching

Understandably, online teaching will be a core component of TLAS faculty development offerings during this next year, reflecting the needs of faculty in response to COVID-19 but also because of its value for those who teach across multiple SMHS campuses or who work with telemedicine and telehealth. Areas of interest within this topic included active learning online, effective and practical lecture techniques, asynchronous learning options, and hybrid/hyflex strategies.

Productivity

Also as expected, time efficiencies, organization, and productivity were identified as a common and urgent need during the COVID-19 pandemic response and in relation to the move many programs are making to online teaching.

Clinical Faculty Offerings and Additional Topics

A significant number of findings were discovered regarding clinical faculty. While this has always been an area TLAS intended to build out, there were a surprising number of clinical faculty who responded to this survey and several common areas of need identified. This will comprise a third major focus of TLAS faculty development this year. Clinical faculty indicated they wanted faculty development in the areas of tele-precepting, clinical precepting, and feedback/evaluation. There were several other areas of need that will inform faculty development moving forward, including diversity and inclusion, leadership/administrative interests (addressed primarily through OEFA), and specific technical or software training.

Marketing, Modality, and Access

Finally, the needs assessment uncovered several opportunities for new ways to disseminate and market faculty development offerings. In response to these data, we plan to introduce several changes in administrative and logistical functions, including marketing (SMS text subscription, Outlook Calendar Invites, Twitter), adding more just-in-time asynchronous versions of prior offerings as well as new topics, Twitter polling and Outreach (#AskTLAS; QuickTips) and traveling to other SMHS campuses (when health and safety allow).

Full Summary of Key Findings and Raw Data

Workshop and Session Offerings

Because respondents indicated that available time was scarce, we will continue to offer live faculty development events of 30-minutes to 1-hour in length. These will be led by TLAS personnel or by faculty who have identified expertise or experience in the topic area. Topics and subtopics will be covered in entirety and/or offered as a thread or application within other event topics. (For example, any event topic offered by TLAS in 2020-21 will contain applications suggestions for online teaching because this is a very timely topic.)

- During Covid-19, events will be offered remotely using Zoom (with recordings posted to Mediasite for later viewing).
- TLAS will resume offering in-person events when health and safety allow it. Respondents also appreciate a lunch or refreshments, so we plan to continue offering this for live events.
- TLAS will occasionally travel to other SMHS campuses to offer in-person training at their locations when health and safety allow it.

Online Repository and Asynchronous Resources

The needs assessment results indicated an interest in short asynchronous video sessions, especially directed toward clinical faculty and others who do not have time to attend in-person sessions or watch long recordings.

- TLAS will create and post just-in-time short sessions (5-15 minutes) to our online repository. These short "Teaching Tune-Ups" will contain main points and key takeaways for those who are unable to attend longer sessions. These may be versions of our prior offerings recreated as shorter highlight versions or new topics that do not warrant a full 30 60 minutes.
- TLAS will continue to curate materials for our online repository, both in-house and through discovery of open educational resources (OERs).
- TLAS will continue to post recordings of our live faculty development events.
- TLAS will use a Twitter account, @SMHS_TLAS, to promote events with the #smhsfacdev and #myund hashtags. With the support of a media specialist, Twitter activity (and all social media platforms) could be expanded to provide frequent faculty development tips and answers with the hashtag #AskTLAS. A sizable portion of the UND community uses Twitter to learn of upcoming events.

Teaching Academy

A teaching academy was conceptualized many years ago based on best practices in medical and health care education faculty development. In 2020, a pilot for TLAS' teaching academy program was approved. Faculty from Biomedical Sciences (1), Physical Therapy (2), Athletic Training (2), Occupational Therapy (2), Public Health (1), Physician Assistant (1), and Medical Lab Sciences (1) have been recruited for this pilot, which is set to run from September 2020 to May 2021. The teaching academy will include the following components.

- Engagement with in-house and online workshops and sessions
- Reflections, journaling
- One-on-one consultations with instructional designers
- A plan to transform one's own teaching from conceptualization to implementation
- Awarding of the Educator Scholar Level 1 Badge

Faculty Small Group Learning Experiences

Because many needs assessment responses indicated interest in smaller group experiences and/or networking with the same and other professions, TLAS will make the following efforts to increase interaction within and among program faculty at the SMHS.

- The teaching academy pilot, described above, is an intensive small group learning experience.
- TLAS will continue to offer book studies.
- TLAS will strive to encourage small group discussion and networking within the setting of online and in-person workshops such as Evidence-Based Teaching, our series of workshops historically driven by a faculty learning community (FLC).
- TLAS will increase our marketing of department- and program-level custom consultations and workshops.

Collaborative or Coordinated Workshops and Sessions

Faculty respondents identified diversity and inclusion, leadership/administrative interests, and specific technical or software training as topics of interest or need. TLAS personnel do not personally claim expertise in these areas. However, opportunities for collaboration within the SMHS, across the UND campus, and outside of UND exist.

- TLAS works closely with EFA, which offers faculty development on areas of include administrative, research, scholarship, supervision/mentoring, clinical, and/or leadership.
- TLAS will coordinate with UND's Teaching, Transformation, and Development Academy (TTaDa) to offer faculty development sessions on academic technology, diversity and inclusion, and other topics covered by TTaDa staff and faculty. In many cases, these events are already being offered and TLAS will promote them to SMHS faculty who may not be aware of them. (See communications, below.)
- The OEFA maintains several subscriptions to external leaders in medical and health care professional development (examples include the International Association of Medical Science Educators (IAMSE) and Academic Impressions). These sessions will be used to supplement or provide additional support to SMHS faculty.

Communications

Another area from our needs assessment data that will receive additional attention was awareness of our services. Many faculty reported not attending or taking advantage of past TLAS faculty development because they simply did not know about it. This was in large part due to the high number of clinical faculty respondents, many of whom are not on SMHS ListServs and/or do not have NDUS identifiers (which the ListServs rely on). The following steps will be taken to increase engagement with faculty at all SMHS campuses, with a special emphasis on clinical faculty and preceptors:

- TLAS will reach out to campus deans and Education Resources to determine the best ways of reaching clinical faculty. TLAS will then use these methods to send notice of upcoming events to them.
- TLAS will investigate text message notifications and make the determination whether this is a reasonable way to market events. Full implementation of this will only be possible with the addition of a Media Specialist position.
- TLAS will make use of the TLAS Twitter account (<u>@SMHS_TLAS</u>, as described earlier) and other social media platforms to promote events with the hashtags #smhsfacdev and #myUND, engage with other #meded and #facdev resources, and provide tips and answers with the hashtag #AskTLAS. Full implementation of this will only be possible with the addition of a Media Specialist position.
- TLAS will continue to use email ListServs, the For Your Health newsletter, the website, and the UND calendar to market upcoming events. Post-COVID-19, TLAS will resume the use of printed posters and digital signage for upcoming events.
- *TLAS Corner* will be published at least quarterly in the *For Your Health* SMHS newsletter. This series of short articles will provide research-based best practices in teaching and educational scholarship, as

- well as information on upcoming and ongoing events by TLAS and other UND and external units. (This is a relaunch of the former *ER Corner* articles.)
- Many respondents were unaware that TLAS posts recordings of previous live events. We will add reference to them in our communications and direct people to them more intentionally.

Prioritization of Faculty Development by Leaders

- TLAS will continue working with program chairs, clinical chairs, and other administrators to incite change in the valuations of professional development, education scholarship, and teaching excellence on annual evaluations and toward achievement of tenure & promotion.
- TLAS will communicate with program chairs and clinical chairs regarding needs assessment findings about time management, asking them if it is possible to explicitly create time for their faculty to prioritize faculty development.

Plans for the Next Needs Assessment

It is assumed that in spite of instructional language throughout the survey, responses to this needs assessment were influenced by the COVID-19 pandemic and related restrictions currently in place. The next needs assessment will be conducted in 2021 or after the COVID-19 pandemic response restrictions have been lifted and normal operations have resumed.

2020 TLAS Faculty Development Needs Assessment Data

What follows is a narrative summary of the results of 2020-21 needs assessment follows along with the questions and raw data obtained from respondents.

Summary of Results

Demographics

A total of 155 responses were recorded. Many unique departments were identified. Responses from clinical faculty (25%, n = 40), Internal Medicine, Family & Community Medicine, Biomedical Sciences, dominated the data. The majority of the respondents have been teaching for 10 or more years. Most seem to have low percentages of both teaching and research (10% or less each), which makes sense due to the high number of clinical faculty responding. Most responding faculty were not tenured or on the tenure track (88%, n = 136). The majority of respondents identified as assistant (47%, n = 67) or associate professors (32%, n = 47).

Biomedical Science	13
Clinical Faculty	40
Family & Community Medicine	21
Geriatrics	2
Internal Medicine	23
Medical Laboratory Science	9
Medicine	3
Occupational Therapy	9
Pathology	5
Physical Therapy	5
Physician Assistant Studies	6
Population Health	3
Sports Medicine	4
Surgery	12

Teaching Preferences and Experiences

The results indicate an 18% increase of online teaching, but the majority of respondents were not teaching online before 9-19 (78%, n = 122), and are still not teaching online (60%, n = 93). Preferred methods of teaching in person were lectures and clinical precepting, followed by discussions and active learning. The preferred method of teaching online was lecture, followed by discussions and active learning, with 22% (n = 52) answering that they do not teach online at all.

Faculty Development Experiences

The majority of faculty (82%, n = 106) stated that their faculty development needs related to teaching were met extremely well, very well, or moderately well. For faculty development needs related to scholarship, 66% (n = 68) had their needs met in these ways. On the bottom end, 9% of faculty (n = 12) felt that their teaching faculty development needs were not met well at all, compared with 15% of faculty (n = 16) who felt their scholarship faculty development needs were not met well at all.

In the year before COVID-19, 62% of respondents (n = 96) rarely or never attended in-person faculty development events offered by Education Resources / TLAS. Likewise, 65% of respondents (n = 100) rarely or never watched recordings or attended online sessions. (Examples include Educator Scholar, Evidence-Based Teaching, and book studies.)

In comparison, 39% of faculty (n = 67) stated they did not attend ANY faculty development at ANY location. Some (30%, n = 51) attended faculty development at conferences, and others (24%, n = 41) attended TTaDa or UIT events at UND. In the comments, some faculty stated they attended clinical programming such as offered by Altru, Harvard Medical School, or online.

The majority of respondents not attending our events stated their reasons as either not having time in general, or not being aware of the events. Some themes were present in the qualitative comments. They are summarized here. (See the data for the raw comments.)

- Living / working outside of Grand Forks
- Working/busy in the clinical setting
- Do not think our events are applicable to their needs or interests
- Did not hear about events or know they are taking place
- Generally do not have time to attend, or would need to know about events several months in advance.

TLAS Faculty Development Considerations

Logistics / Event Management

Respondents were asked to select their top two or three responses for the following questions. Because of this, the total responses (N) was higher than the 155 unique responses – usually between 200 and 300. The responses (n) represent portions of the total responses to these individual questions.

The majority (40%, n = 68) of respondents learned about TLAS faculty development events via email from Education Resources staff. Others (13%, n = 27) were told by a peer or colleague, and several comments stated they had not seen/heard about the sessions at all. One commenter stated he/she had heard about the events "from this survey, at this very minute!"

Mirroring this, 48% of respondents (n = 123) would like to receive notice of future events via email. Calendar events sent through outlook were requested by 21% of respondents (n = 53), and 11% (n = 28) would prefer to read about upcoming events in UND or SMHS newsletters. One commenter suggested sending text messages related to events, while another said that ideally, we could directly notify them of events that are specifically relevant to them.

The majority of respondents felt that 30 minutes (32%, n = 45) to an hour (42%, n = 58) was an acceptable amount of time, with 19% indicating that it would depend on their schedule. In a comment elsewhere on the survey, one respondent suggested offering 5-minute asynchronous modules with 1-2 takeaways for clinical faculty.

When asked about preferred methods of attendance (but EXCLUDING factors related to COVID-19), 44% of respondents (n = 61) preferred to attend in-person events, with 32% (n = 44) preferring online synchronous events. Online asynchronous events were selected as a favorite by 17% of respondents (n = 24). One commenter explained that it is easier to be interactive in a classroom when compared to a Zoom session, especially if there are a lot of participants.

Reasons Faculty Attend

Respondents mainly attend faculty development events either to improve their teaching or scholarship (32%, n = 117) or due to personal interest (29%, n = 104). Others (17%, n = 61) attend to network interprofessionally or

with colleagues. Four faculty commented that they simply are not interested, that the events are not applicable. One commenter stated that being told to do more is less helpful than being provided with support in actually doing the work.

Many respondents (46%, n = 65) did not feel that offering a lunch/refreshment would change whether or not they chose to attend. However, 37% of respondents (n = 52) stated that this was extremely important, very important, or moderately important to them.

Respondents stated they would be more likely to attend if sessions were offered more than once (17%, n = 50), if sessions were shorter (15%, n = 44), if credit were given toward annual evaluations or tenure & promotion reviews (14%, n = 42), and if different topics were covered (12%, n = 36). Four respondents commented requesting events in Fargo.

Qualitative comments revealed several themes related to likelihood of attending faculty development. They are summarized here. (See the data for the raw comments.)

- Offer online events over Zoom or asynchronously, record them to watch later.
- Time is a factor; offer them after hours and be sure to notify people several months in advance.
- Offer events in other cities
- Offer CME (2 comments)
- Some people indicated they are simply not likely to attend (for various reasons). One person indicated they were "too busy to even read this survey."

Topics of Value to Faculty

Respondents were all over the map on topics of value, but the top requests included clinical precepting/teaching (10%, n = 61), effective ways to lecture (8%, n = 51), competency-based learning (8%, n = 48), and active learning (6%, n = 38).

Qualitative responses comments revealed several themes related topics of value or requests for future events. They are summarized here. (See the data for the raw comments.)

- Hands-on learning, active learning
- Online, and specifically how to translate things normally done in person to an online environment (such as engaging lectures, hands-on learning, discussions, etc).
- Technical assistance, training, or walkthroughs of software tools
- Add/facilitate the ability to work with a small group of motivated peers
- Educational theory
- Implicit bias training and diversity

Number One Current Faculty Development Need

Respondents were asked to provide their number one faculty development need right now. Qualitative responses comments revealed several themes. They are summarized here. (See the data for the raw comments.)

- Online teaching: synchronous, asynchronous, discussions, precepting, labs, hybrid, large-format, groupwork, evaluating, engagement, use of recorded lectures, and teaching strategies to encourage student success
- Logistics and time management, efficiencies related to productivity, scheduling, and getting control of multiple schedules and commitments
- Getting involved with other faculty. More interaction with other faculty, including hearing about their experiences. One commenter states: "How can I get others more involved and reward them for their efforts?"

- Other teaching & learning area such as evaluation, active learning, assessment, course development, interprofessional education, giving feedback, helping challenged students, professionalism, lecture engagement, and universal design
- Technology training or instruction, including for hybrid and online learning, Blackboard, Leo, Yuja, Zoom, etc.
- Clinical precepting, clinical teaching, and effectiveness/student evaluation in the clinical setting
- Resources in general. Education Resources and its was mentioned, and requests to travel into the communities versus only doing online streaming
- Research resources and professional development
- Transition from peer to supervisor; how to manage this interpersonally as well as logistically.

2020 Needs Assessment Raw Data

Exported from Qualtrics

Note: For some demographic questions, write-in responses have been grouped manually. These are noted where present. Highlighting has been used to denote the most popular choices. Additional highlight colors were used to code textual responses later in the survey.

Q2 – Department

(write-in responses grouped manually)

Anesthesia	3
Biomedical Science	3
Clinical faculty	1
Critical Care	1
Education Resources	1
Education Resources, Family and Community Medicine	1
Emergency Medicine	1
Endocrinology	1
Family & Community Medicine	18
Family MedicineAltru Clinic Devils Lake	2
Geriatrics	2
GI	1
Hematology/Oncology	1
Internal Medicine	18
Internal Medicine (and Geriatrics)	1
Internal Medicine (Hospitalist)	1
Internal Medicine Residency Attending	1
Internal Medicine, Radiology	1
Internal Medicine, VA	1
Medical Laboratory Science	9
Medicine	1
neurology	3
OB/Gyn	8
Occupational Therapy	9
Oncology, Sanford	1
Ophthalmology	
Ortho	
Otolaryngology	1
Pathology	5
Pediatric sleep	1
Pediatrics	11

Pediatrics, Clinical	1
Physical Therapy	5
Physician Assistant Studies	6
Population Health	3
Psychiatry	2
Rheumatology	1
School of Medicine	1
Sports Medicine	4
Surgery	9
Surgery, ENT	1
Surgery, Orthopedic	2

Q5 - Years of Teaching:

#	Answer	%	Count
1	Less than 1 year	5.16%	8
2	1 - 5 years	29.68%	46
3	5 - 10 years	20.65%	32
4	Greater than 10 years	44.52%	69
	Total	100%	155

Q6 - Percent effort of teaching: Summary:

10% or less	53
11%-25%	25
25%-50%	31
51%-75%	18
76%-100%	29
N/A or Other	4

Percent effort of teaching:
(write-in responses grouped manually)

(write-in responses grouped manually)		
	0	2
	1%	2
	2%	1
	4%	1
	5%	13
	10%	22
	12%	1
	15%	5
	16%	1
	20%	8
	25%	10
	30%	11
	35%	4
	38%	1
	38.45%	1
	40%	5
	42.50%	1
	45%	1
	50%	7
	52%	1
	55%	3
	60%	3
	65%	3
	70%	2
	75%	6
	80%	7
	85%	6
	90%	3
	95%	2
	7370	2

10	0% 11
5-10%	
Less than 5%	
N/A	
Part time clinical staff	

Q33 - Percent effort of research:

Summary:

10% or less	123
11%-25%	8
25%-50%	11
51%-75%	4
76%-100%	2
N/A	3

Percent effort of research:

(write-in responses grouped manually)

	0%	68
	1%	5
	2%	1
	3%	1
	5%	32
	7%	2
	10%	14
	15%	2
	20%	3
	25%	3
	30%	2
	32.50%	
		1
	33%	1
	35%	2
	37%	1
	40%	3
	50%	1
	65%	2
	70%	
		1
	75%	1
	79%	1
	90%	1
NA		3

Q7 - Tenure Track/Tenured?

#	Answer	%	Count
1	I am on the tenure track or tenured.	11.69%	18
2	I am NOT on the tenure track or tenured.	88.31%	136
	Total	100%	154

Q8 - Rank:

#	Answer	%	Count
1	Instructor	9.03%	13
2	Associate Professor	32.64%	47
3	Professor	11.81%	17
4	Assistant Professor	46.53%	67
	Total	100%	144

Q9 - Track:

#	Answer	0/0	Count
1	Educator Scholar	20.13%	30
2	Clinician Scholar	13.42%	20
3	Research Faculty	1.34%	2
4	Teaching Faculty	6.71%	10
5	Clinical Faculty	51.68%	77
6	Scientist Scholar	6.71%	10
	Total	100%	149

Q10 - Are you teaching online right now?

#	Answer	%	Count
1	Yes	40.00%	62
2	No	<mark>60.00%</mark>	93
	Total	100%	155

Q11 - Were you teaching online BEFORE COVID-19?

#	Answer	%	Count
1	Yes	21.29%	33
2	No	78.71%	122
	Total	100%	155

Q13 - When thinking about teaching on campus (face-to-face), which TWO of the following are/were your PRIMARY means of teaching?

ı	1	y mg are, were jour retained means of teaching.	-0
Count	%	Answer	#
69	25.18%	Lectures	1
39	14.23%	Discussions	2
5	1.82%	Simulations in the Simulation Center	3
1	0.36%	Simulations in Class	4
0	0.00%	Simulations Online	5
0	0.00%	Games	6
23	8.39%	Laboratory Experiences	7
28	10.22%	Active Learning (e.g., small-group breakouts, Team-Based-Learning, Problem-Based-Learning, fishbowl, role-playing)	8
71	25.91%	Clinical Setting Precepting	9
24	8.76%	Tutoring/Mentoring (one-on-one or small group)	10
6	2.19%	Other	11
8	2.92%	I do not teach face-to-face.	12
274	100%	Total	

Q13 11 TEXT - Other

Other - Text

Courses taught in lab space so "lecture days" included active learning and actual hands on lab techniques.

N/A

I am off campus

noon conferences

research

OR/Clinic only

Q14 - When thinking about teaching at a distance (online/remotely), which TWO of the following are/were your PRIMARY means of teaching?

1	ı	y mg are, were jour retaining means or teaching.	-0
Count	%	Answer	#
70	29.05%	Lectures	1
31	12.86%	Discussions	2
1	0.41%	Simulations in the Simulation Center	3
1	0.41%	Simulations in Class	4
6	2.49%	Simulations Online	5
0	0.00%	Games	6
5	2.07%	Laboratory Experiences	7
30	12.45%	Active Learning (e.g., small-group breakouts, Team-Based-Learning, Problem-Based-Learning, fishbowl, role-playing)	8
21	8.71%	Clinical Setting Precepting	9
17	7.05%	Tutoring/Mentoring (one-on-one or small group)	10
7	2.90%	Other	11
52	21.58%	I do not teach online/remotely.	12
241	100%	Total	

Q14_11_TEXT - Other

Other - Text

Case Studies

N/A

noon conferences

Hard to envision

self-paced activities

I have not yet taught remotely.

OR/Clinic only

Q15 - In the year BEFORE COVID-19, how well were your needs for faculty development related to TEACHING being met?

#	Answer	0/0	Count
1	Extremely well	13.18%	17
2	Very well	41.86%	54
3	Moderately well	27.13%	35
4	Slightly well	8.53%	11
5	Not well at all	9.30%	12
	Total	100%	129

Q17 - In the year BEFORE COVID-19, how well were how well are your needs for faculty development related to EDUCATIONAL RESEARCH/SCHOLARSHIP being met?

#	Answer	%	Count
1	Extremely well	8.65%	9
2	Very well	25.00%	26
3	Moderately well	31.73%	33
4	Slightly well	19.23%	20
5	Not well at all	15.38%	16
	Total	100%	104

Q18 - In the year BEFORE COVID-19, how often did you attend EDUCATION RESOURCES faculty development events IN PERSON, locally (e.g., Evidence-Based Teaching, Educator Scholar, and similar)?

#	Answer	%	Count
1	All the time	1.29%	2
2	Often	12.90%	20
3	Sometimes	23.87%	37
4	Rarely	23.23%	36
5	Never	38.71%	60
	Total	100%	155

Q19 - In the year BEFORE COVID-19, how often did you watch recorded sessions of EDUCATION RESOURCES faculty development events ONLINE (live or later)?

#	Answer	%	Count
1	All the time	0.65%	1
2	Often	5.16%	8
3	Sometimes	29.68%	46
4	Rarely	27.10%	42
5	Never	37.42%	58
	Total	100%	155

Q20 - Please select TWO primary reasons you do NOT attend faculty development events (SMHS or others).

#	Answer	%	Count
1	I usually have class or other obligations at the same time as the events.	16.28%	21
2	I do not have time to attend in general.	27.13%	35
3	The topics aren't usually relevant to me or how I want to teach.	7.75%	10
4	The topic coverage is too basic.	1.55%	2
5	The topic coverage is too detailed or advanced.	0.00%	0
6	Faculty development/teaching improvement isn't valued in my evaluations or promotion and tenure requirements.	3.10%	4
7	I am staff or a student and thought these events were only for faculty.	0.78%	1
8	I do not know when the events are.	25.58%	33
9	Other	17.83%	23
	Total	100%	129

Q20 9 TEXT - Other

Other - Text

I'm in an active clinical setting

Do not live in Grand forks

I work in the clinical setting with students.

I am a teaching faculty member who have extensive patient care and administrative commitments which need a long lead time to reschedule.res

I am an Intensivist (clinician) at SanfordHealth-not sure if this is applicable to me.

I attended one or two but found them to not be as useful as I hoped

they are in another city

I am a clinical instructor. I share what I can about the practice of pediatrics with the few students I seen on a monthly basis. I am not sure training would help me, and it would take time out of a schedule that has too many constraints already. Thanks, JS

I live remotely from the campus

Was unaware we had events

Not applicable

I have not heard of these before or missed them in my email.

did not know about, distance and available time concerns

I do, but not locally - I attend national conferences

Part time clinical staff

Distance

I was not aware how to join

Usually they have been in Fargo, and I am in Bismarck.

100+Miles Away

I do not receive notifications about these events (Started as instructor in June of 2019)

often have clinic days

Q21 - In the 2019 calendar year BEFORE COVID-19, where else did you attend faculty development events? (Check all that apply.)

#	Answer	%	Count
1	Teaching, Transformation & Development Academy (TTaDa)	20.00%	34
2	University Information Technology (UIT)	4.12%	7
3	Faculty development or education-specific events at a conference (e.g., pre-conference workshops; teaching strategy sessions)	30.00%	51
4	Other	6.47%	11
5	I did not attend any other faculty development events.	39.41%	67
	Total	100%	170

Q21 4 TEXT - Other

Other - Text

Make It Stick book discussion group

our faculty meetings

Attended on-campus sessions, but not regularly!

Altru Health System presentations

ACGME

N/A

In clinic preceptor

I attended a course on education at Harvard Medical School.

Online through clinical instructor website access

Q22 - How did you learn about past SMHS Education Resources faculty development sessions? (Check all that apply.)

#	Answer	%	Count
1	Emails from Education Resources personnel (e.g., Adrienne Salentiny, Shae Carlson)	40.19%	86
2	Education Resources website	4.67%	10
3	Digital signage	3.74%	8
4	Printed posters at the SMHS	5.14%	11
5	Told by a peer or colleague	12.62%	27
6	Announced at a faculty meeting or in departmental communications	6.07%	13
7	Saw in For Your Health newsletter	6.54%	14
8	Saw in UND's U-Letter	4.21%	9
9	Other	10.75%	23
10	Saw on the UND or SMHS Events Calendar	6.07%	13
	Total	100%	214

Q22_9_TEXT - Other

Unaware of sessions

I have never heard of it

Have not participated

I was not aware

n/a

no Knowledge of it
did not know
No noted information
this survey
Was not aware of them.
Did not know about events

Did not know about them

Q24 - What are the THREE primary reason(s) you would be interested in attending faculty development offerings?

#	Answer	%	Count
1	Personal interest	28.73%	104
2	Improve my teaching or scholarship	32.32%	117
3	Needed for tenure or promotion	2.49%	9
4	Referred by chair, supervisor, or other leadership	3.59%	13
5	Referred by colleague	3.59%	13
6	To network with other professions/colleagues	16.85%	61
7	To support a peer/colleague who is presenting	9.39%	34
8	Other	3.04%	11
	Total	100%	362

Q24_8_TEXT - Other

No really interested. Too busy already.

If they helped - most of the time it seems to present good ideas/materials BUT it takes a lot to develop and we do not hire more faculty so we can teach better, just people who want to tell us to but cannot do any of the heavy lifting.

I am not sure I have the reason to attend

N/A

n/a

Not full-time staff

research support

Basic intellectual curiosity

${\bf Q26}$ - How important is having a lunch or refreshments provided in your decision whether or not to attend an in-person session?

#	Answer	%	Count
1	Extremely important	5.00%	7
2	Very important	12.14%	17
3	Moderately important	20.00%	28
4	Slightly important	16.43%	23
5	Not at all important	46.43%	65
	Total	100%	140

Q27 - What would make you more likely to attend faculty development events? (Select all that apply.)

	WPP-3*)		
#	Answer	%	Count
1	Offer sessions on different topics	11.92%	36
2	Offer sessions at different locations	9.60%	29
3	Offer each session more than one time	16.56%	<mark>50</mark>
4	Offer shorter sessions	14.57%	44
5	Offer longer sessions	0.66%	2
6	Offer sessions in a different format	8.61%	26
7	Provide food at the sessions	8.28%	25
8	Provide certificates or badges	6.95%	21
9	Give credit toward annual evaluations and tenure and promotion reviews	13.91%	42
10	Other	8.94%	27
	Total	100%	302

Q27_1_TEXT - Offer sessions on different topics

-			•	• •
Dagr	ta.	011100	TTHEAT	transition
1 (()	w	Subc	a visoi	uansinon

Gyn

Clinical teaching

Would love some sort of committed small group to review individual classes with among motivated peers

Q27_2_TEXT - Offer sessions at different locations

Fargo	
Essentia Health	
Fargo	
Fargo	
Fargo Company of the	

UNDSMHS

Q27_10_TEXT - Other

Other - Text

If I had more time.

online

Make it available if you cannot make it to the original presentation

asynchronous availability

Provide information that I am interested in and will help me with technology

offer sessions at a different time.

Notification several months in advance

Continuing Education credit

I prefer attending via Zoom

it always out of town and I have no capability to attend

same city i am in

tell me when the session are

ONLINE/DISTANCE FORMAT

not likely to attend

Fancy dinners at expensive local restaurants, with a brief 30 min presentation, once per quarter.

On line learning?

I am retired as off last November

Not full-time staff

Online to watch when convenient. Offer CME

i don't work for the University. Get education thru Sanford Health

virtually tune in

more information on timing of sessions

Offer at times other than during regular workday

Have a distance learning option for those if not in GF

I really like the sessions I have attended. It is often just a conflict in scheduling

Record so can be viewed at convenience

I like to attend if it fits in the schedule, but the times often are when we have class. This year will be difficult because we don't have full noon hours due to teaching schedules. I do check the archived recordings though

Q25 - Which of the following would you like to see as a focus of our faculty development offerings next year? (Select all that apply and/or write in your suggestions below.)

Effective ways to lecture 8.31% 51	#	Answer	%	Count
Pace-to-face discussions 4.23% 26				
Online discussions 6.68% 41	<u>l</u>	Effective ways to lecture	8.31%	51
4 Face-to-face simulations 1.63% 10 5 Games in learning 3.26% 20 6 Competency-based learning 7.82% 48 7 Assessment 5.05% 31 8 Active learning (e.g., small-group breakouts, Team-Based-Learning, Problem-Based-Learning, fishbowl, role-playing) 6.19% 38 9 Clinical setting precepting/teaching 9.93% 61 10 Tutoring/Mentoring (one-on-one or small group) 4.07% 25 11 Interprofessional teaching 3.75% 23 12 Professionalism 3.75% 23 13 Empathy and patient-centeredness 3.58% 22 14 Providing feedback 5.21% 32 15 Educational theory 1.95% 12 16 Education Scholarship (conducting, publishing, etc.) 4.07% 25 17 Course development 3.91% 24 18 Writing educational objectives 3.26% 20 19 Hearing from other faculty a	2	Face-to-face discussions	4.23%	26
5 Games in learning 3.26% 20 6 Competency-based learning 7.82% 48 7 Assessment 5.05% 31 8 Active learning (e.g., small-group breakouts, Team-Based-Learning, Problem-Based-Learning, fishbowl, role-playing) 6.19% 38 9 Clinical setting precepting/teaching 9.93% 61 10 Tutoring/Mentoring (one-on-one or small group) 4.07% 25 11 Interprofessional teaching 3.75% 23 12 Professionalism 3.75% 23 13 Empathy and patient-centeredness 3.58% 22 14 Providing feedback 5.21% 32 15 Educational theory 1.95% 12 16 Education Scholarship (conducting, publishing, etc.) 4.07% 25 17 Course development 3.91% 24 18 Writing educational objectives 3.26% 20 19 Hearing from other faculty about their teaching or research 5.21% 32 20	3	Online discussions	6.68%	41
6 Competency-based learning 7.82% 48 7 Assessment 5.05% 31 8 Active learning (e.g., small-group breakouts, Team-Based-Learning, Problem-Based-Learning, fishbowl, role-playing) 6.19% 38 9 Clinical setting precepting/teaching 9.93% 61 10 Tutoring/Mentoring (one-on-one or small group) 4.07% 25 11 Interprofessional teaching 3.75% 23 12 Professionalism 3.75% 23 13 Empathy and patient-centeredness 3.58% 22 14 Providing feedback 5.21% 32 15 Educational theory 1.95% 12 16 Education Scholarship (conducting, publishing, etc.) 4.07% 25 17 Course development 3.91% 24 18 Writing educational objectives 3.26% 20 19 Hearing from other faculty about their teaching or research 5.21% 32 20 Efficiencies, logistics, and time-management 3.42% 21 <	4	Face-to-face simulations	1.63%	10
Assessment 5.05% 31 Active learning (e.g., small-group breakouts, Team-Based-Learning, Problem-Based-Learning, fishbowl, role-playing) 6.19% 38 Clinical setting precepting/teaching 9.93% 61 Tutoring/Mentoring (one-on-one or small group) 4.07% 25 Interprofessional teaching 3.75% 23 Professionalism 3.75% 23 Empathy and patient-centeredness 3.58% 22 Approviding feedback 5.21% 32 Educational theory 1.95% 12 Education Scholarship (conducting, publishing, etc.) 4.07% 25 Course development 3.91% 24 Writing educational objectives 3.26% 20 Hearing from other faculty about their teaching or research 5.21% 32 Efficiencies, logistics, and time-management 3.42% 21 Technical help or "how-to" for academic technologies 3.26% 20 Other 1.47% 9	5	Games in learning	3.26%	20
Active learning (e.g., small-group breakouts, Team-Based-Learning, Problem-Based-Learning, fishbowl, role-playing) Clinical setting precepting/teaching 9.93% 61 Tutoring/Mentoring (one-on-one or small group) 4.07% 25 Interprofessional teaching 3.75% 23 Professionalism 3.75% 23 Empathy and patient-centeredness 3.58% 22 Providing feedback 5.21% 32 Educational theory 1.95% 12 Educational theory 1.95% 12 Education Scholarship (conducting, publishing, etc.) 4.07% 25 Writing educational objectives 3.26% 20 Hearing from other faculty about their teaching or research 5.21% 32 Efficiencies, logistics, and time-management 3.42% 21 Technical help or "how-to" for academic technologies 3.26% 20 Other 1.47% 9	6	Competency-based learning	7.82%	48
Section Learning, fishbowl, role-playing 6.19% 38 9 Clinical setting precepting/teaching 9.93% 61 10 Tutoring/Mentoring (one-on-one or small group) 4.07% 25 11 Interprofessional teaching 3.75% 23 12 Professionalism 3.75% 23 13 Empathy and patient-centeredness 3.58% 22 14 Providing feedback 5.21% 32 15 Educational theory 1.95% 12 16 Education Scholarship (conducting, publishing, etc.) 4.07% 25 17 Course development 3.91% 24 18 Writing educational objectives 3.26% 20 19 Hearing from other faculty about their teaching or research 5.21% 32 20 Efficiencies, logistics, and time-management 3.42% 21 21 Technical help or "how-to" for academic technologies 3.26% 20 22 Other 1.47% 9	7	Assessment	5.05%	31
10 Tutoring/Mentoring (one-on-one or small group) 4.07% 25 11 Interprofessional teaching 3.75% 23 12 Professionalism 3.75% 23 13 Empathy and patient-centeredness 3.58% 22 14 Providing feedback 5.21% 32 15 Educational theory 1.95% 12 16 Education Scholarship (conducting, publishing, etc.) 4.07% 25 17 Course development 3.91% 24 18 Writing educational objectives 3.26% 20 19 Hearing from other faculty about their teaching or research 5.21% 32 20 Efficiencies, logistics, and time-management 3.42% 21 21 Technical help or "how-to" for academic technologies 3.26% 20 22 Other 1.47% 9	8		6.19%	38
Interprofessional teaching 3.75% 23	9	Clinical setting precepting/teaching	9.93%	61
12 Professionalism 3.75% 23 13 Empathy and patient-centeredness 3.58% 22 14 Providing feedback 5.21% 32 15 Educational theory 1.95% 12 16 Education Scholarship (conducting, publishing, etc.) 4.07% 25 17 Course development 3.91% 24 18 Writing educational objectives 3.26% 20 19 Hearing from other faculty about their teaching or research 5.21% 32 20 Efficiencies, logistics, and time-management 3.42% 21 21 Technical help or "how-to" for academic technologies 3.26% 20 22 Other 1.47% 9	10	Tutoring/Mentoring (one-on-one or small group)	4.07%	25
Empathy and patient-centeredness 3.58% 22 Providing feedback 5.21% 32 Educational theory 1.95% 12 Education Scholarship (conducting, publishing, etc.) 4.07% 25 Course development 3.91% 24 Writing educational objectives 3.26% 20 Hearing from other faculty about their teaching or research 5.21% 32 Efficiencies, logistics, and time-management 3.42% 21 Technical help or "how-to" for academic technologies 3.26% 20 Other 1.47% 9	11	Interprofessional teaching	3.75%	23
Providing feedback 5.21% 32 Educational theory 1.95% 12 Education Scholarship (conducting, publishing, etc.) 4.07% 25 Course development 3.91% 24 Writing educational objectives 3.26% 20 Hearing from other faculty about their teaching or research 5.21% 32 Efficiencies, logistics, and time-management 3.42% 21 Technical help or "how-to" for academic technologies 3.26% 20 Other 1.47% 9	12	Professionalism	3.75%	23
Educational theory 1.95% 12 Education Scholarship (conducting, publishing, etc.) 4.07% 25 Course development 3.91% 24 Writing educational objectives 3.26% 20 Hearing from other faculty about their teaching or research 5.21% 32 Efficiencies, logistics, and time-management 3.42% 21 Technical help or "how-to" for academic technologies 3.26% 20 Other 1.47% 9	13	Empathy and patient-centeredness	3.58%	22
Education Scholarship (conducting, publishing, etc.) 4.07% 25 Course development 3.91% 24 Writing educational objectives 3.26% 20 Hearing from other faculty about their teaching or research 5.21% 32 Efficiencies, logistics, and time-management 3.42% 21 Technical help or "how-to" for academic technologies 3.26% 20 Other 1.47% 9	14	Providing feedback	5.21%	32
Course development 3.91% 24 Writing educational objectives 3.26% 20 Hearing from other faculty about their teaching or research 5.21% 32 Efficiencies, logistics, and time-management 3.42% 21 Technical help or "how-to" for academic technologies 3.26% 20 Other 1.47% 9	15	Educational theory	1.95%	12
Writing educational objectives 3.26% 20 Hearing from other faculty about their teaching or research 5.21% 32 Efficiencies, logistics, and time-management 3.42% 21 Technical help or "how-to" for academic technologies 3.26% 20 Other 1.47% 9	16	Education Scholarship (conducting, publishing, etc.)	4.07%	25
Hearing from other faculty about their teaching or research 5.21% 32 Efficiencies, logistics, and time-management 3.42% 21 Technical help or "how-to" for academic technologies 3.26% 20 Other 1.47% 9	17	Course development	3.91%	24
Efficiencies, logistics, and time-management 3.42% 21 Technical help or "how-to" for academic technologies 3.26% 20 Other 1.47% 9	18	Writing educational objectives	3.26%	20
Technical help or "how-to" for academic technologies 3.26% 20 Other 1.47% 9	19	Hearing from other faculty about their teaching or research	5.21%	32
22 Other 1.47% 9	20	Efficiencies, logistics, and time-management	3.42%	21
	21	Technical help or "how-to" for academic technologies	3.26%	20
Total 100% 614	22	Other	1.47%	9
		Total	100%	614

Q25 22 TEXT - Other

Other - Text

Too busy to even read this survey.

Hybrid instruction.

peer to supervisor transition
Inclusivity in teaching
More faculty so we can have the time to change and innovate the curriculum
I don't know
motivational interviewing

Effective teaching skills in zoom or virtual class

Q28 - Please elaborate on your answers or add additional topics here.

Please elaborate on your answers or add additional topics here.

I like the idea of 'how-to' for academic technologies; would be great if examples of how different instructors were using it could be included too (maybe even from the different instructors themselves)

I teach medical students and I also teach 4-5 nights a week at a marital arts school, so hands on teaching is what I do and lecture based info is not for me.

Technical assistance, for example, the use of the new software platform, such as the LEO or better use of the Zoom technology would be extremely useful to enhance my teaching and classroom organization.

How to present material and test for hands on learning through online medium

Would like a review of ProctorU from Dara Faul, Would like a review of Respondus by Kristi Swartz, Would like a review of Qualtrics by Elizabeth Becker, Would like a review of Blackboard grading by TtaDa, but it all just takes time to try and use. Also recording lectures by Yuja and printed instructions or videos. I expect to be continuing to teach hybrid or online as this year progresses. I am particularly concerned about effectively transferring face-to-face active learning strategies to an online environment. Also, I have found assessment in an online setting to be particularly challenging. In particular, maintaining the integrity of the assessment. Third, I am concerned about equitable student access to technology in an online instructional environment.

More needs to be presented on how to eliminate bias, how to be inclusive and welcoming to a diverse population.

5 minute asynchronous faculty development with 1-2 key takehome points for clinical faculty.

This is my first year, so I have not attended any of the conferences as of yet.

Rural clinical teaching position education to help away from the main college

Relatively short sessions, interactive, less slides

I retired from practice last November.

I am a new site director, and I am trying to figure out the position.

I enjoy teaching the 3rd and 4th year medical students in their rural family medicine and surgery rotations. It provides a varied experience for them. We do not do much didactic but stress the hands on exposure. It would be helpful to hear lectures from other clinical instructors of surgery that have more experience teaching.

I have recently became part of the faculty (June 2019) I did not receive communications about activities.

I am too busy.

I think that live-streamed recordings are a great option. I have not made time to take advantage of them yet.

Engagement strategies for lectures (specific examples of interspersed active learning strategies) -- particularly in an online setting (ex: synchronous lectures over zoom)

Would love some sort of committed small group to review individual classes with among motivated peers. Like a writing group, but for course design.

I would definitely like more on educational theory

What you have been offering is great!

Q29 - When attending a faculty development session, what session length best balances your needs, interest, and depth of the session?

#	Answer	%	Count
1	15 minutes	1.44%	2
2	30 minutes	32.37%	45
3	1 hour	41.73%	<mark>58</mark>
4	90 minutes	2.16%	3
5	2 hours	0.00%	0
6	Half-day	2.88%	4
7	It depends on my schedule	19.42%	27
	Total	100%	139

Q32 - When attending faculty development BEFORE (or after) COVID-19, what is your preferred method or attendance?

Q32 - When attending faculty development BEFORE (or after) COVID-19, what is your...

_			
#	Answer	%	Count
1	Live, in person in a conference room	44.20%	61
2	Online, interactive (e.g., using Zoom to stream and interact with presenters)	31.88%	44
3	Online, non-interactive (e.g., webinars; Mediasite to stream or watch recording)	17.39%	24
4	Other	6.52%	9
	Total	100%	138

Q32_4_TEXT - Other

Other - Text

I like Live, but also the online option when schedules won't accommodate the live session

Now that I am instructing remotely, I am getting used to virtual sessions. Though, my preference would be face-to-fac. The larger the Zoom meeting, the harder it is to maintain an interactive session.

Live, non-interactive

See my response, "What would make you more likely to attend faculty development events?"

Have not attended

NA

Did not attend

access later online

No attendance

Q30 - How would you prefer to receive notice of future faculty development sessions? (Select all that apply.)

#	Answer	%	Count
1	Emails from Education Resources (i.e., Adrienne Salentiny, Shae Carlson, Alissa Hancock)	47.86%	123
2	Calendar invitations sent to Outlook	20.62%	53
3	Education Resources website	2.72%	7
4	Digital signage	2.72%	7
5	Printed posters	1.56%	4
6	Communication from department head or admin	8.95%	23
7	Printed mailer or newsletter sent to department	3.50%	9
8	UND and SMHS newsletters (e.g. For Your Health, U-Letter, UND Events Calendar)	10.89%	28
9	Other	1.17%	3
	Total	100%	257

Q30_9_TEXT - Other

Other - Text

If you feel I needs something specific you will have to reach out personally.

Text Messages

Q31 - What is your NUMBER ONE need for faculty development right now?

What is your NUMBER ONE need for faculty development right now?

I'm the only involved department member. How can I get others more involved and reward them for their efforts?

educational resources

At this moment, as faculty, it seems we are in a holding pattern due to COVID. We are dealing with an incredible amount of uncertainty, so I am not interested in learning new things at this point. Thankfully, I am very comfortable with online delivery, which helps immensely during these times. When we are back to "normal", I would like to revisit these questions/topics. Thank you for everything that you do for faculty.

Student engagement in online discussion - both syncrynous and asyncrynous.

Course development

Effective use of recorded lectures.

Blackboard support

logistics and time management

Applicable skills development - particularly computer skills

More time (-:

Online teaching strategies to improve student engagement

Update in use of technology

Giving Feedback, precepting techniques with residents

education on how to approach a challenged learner and provide constructive feedback and improve learning experience for the learner

Time- we are short faculty and dedicating time to research is well behind patient care and resident education

finding a way to gain access to learners as they are spread out every where.

How to make more time in my day.

Providing feedback and assessment

Better use of technology to enhance remote communication.

not sure I have a number one need, I feel well taken care of.

Making sure our students are learning in the new hybrid system

proven clinical teaching strategies for busy clinicians

Professionalism

Clinical setting/precepting

Running an online course efficiently

Interprofessional teaching and learning

Online labs if we have to due to Covid 19

technology as mentioned above

Preparing for a stable, online, interactive, probably hybrid, large enrollment undergraduate, active-learning course for next spring. I want it to be better the second time around.

Online teaching during the social distancing

efficiencies with Zoom and engaging the learners

Active learning

Like my previous multiple responses, I am trying to fit into my role of a supervisor that I transitioned from being a trainee in the same school (UND Med School). Any faculty development activities on the "peer to supervisor transition" or "how to deal with peers following transition into supervisory role" would be greatly appreciated.

Online testing

Research topics and getting more research started

Time

time

How to truly engage the student in on-line learning - synchronously AND asynchronously (how to measure level, how to promote more - even when specific content isn't "exciting" for student)

Effective active teaching strategies

Being able spare time from a very busy critical care schedule in the current pandemic of COVID 19

I am not sure I need any

More time in my day

Become more familiar with the UND Faculty development program and the different options available in the past and at this time during COVID-19.

New developments in medicine

Interaction with faculty.

student development

Clinical teaching

Evaluation skills

RESOURCES

time

I am not sure. I have never had this "opportunity" presented, but with my limited role as a clinical instructor, I am not sure this is something I need.

esearch resources

Improving the presence of the University of North Dakota throughout the state of North Dakota. Literally, getting the staff out of the city and to the communities--in person.

more time

Time

Student evaluations

How we in **clinical** rural education can best help the students

.

Hearing from other faculty member about their educational experiences

More effective preceptorship in Bismarck

be informed when there is a session

I just started as the Vice Chair-West for the UND Dept. of Ob/Gyn. My greatest challenge is mastering the schedule, coordinating it with my practice schedule and learning the academic and non-clinical portion of the Ob/Gyn education requirements.

Education theory

Integrating technology into clinical assessment and treatment planning

none

clinical research development

I don't know.

I would like to know where the Education Resources website is located.

someone to engage with at the medical school

Lecture on teaching and evaluation techniques.

Initiate lecturing in area of expertise.

No needs.

More students!

None

Understanding current students; assessment

Time

How to facilitate my faculty to engage in scholarly activity.

Effective online teaching.

How to prepare for virtual classes How to prepare safe environment in in-person classes

Online teaching student-engagement strategies

Universal design in online classes

online teaching strategies how to teach psycho-motor skills online

Educational theory

Teaching online

Adapting to online

Technology assistance

Discussions on online teaching: approaches, pros and cons, strategies used by others, student engagement and active learning.

Course development with transition to Masters level.

While I always need faculty development and can improve teaching, it is honestly support technically to use best-practice methods using technology. It can be frustrating to both operate all the technology and facilitate the learning which we are expected to do. However, team teaching does ease up on that because we can take different roles. I am most concerned about technology and the connection of two classrooms (since students are split) and connecting students off campus. Having students share and be able to hear across all three venues is most on my mind given active learning pedagogies rely on this.