

Enhancing faculty engagement among physicians/academicians at the University of Saskatchewan: an urban-rural exploratory study

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Abstract

- **Objective:** To investigate why faculty members choose to participate or not participate in FD and/or CME programs organized by the College of Medicine and learn how FD and CME can make their programs relevant to the needs of faculty members.
- **Methods:** We employed a qualitative exploratory study design. Medical faculty members from both urban and rural areas were invited to participate in focus group discussions and key informant interviews. Data was analyzed independently by authors and the Canadian hub for Applied and Social Research (CHASR) to ensure trustworthiness and reliability of findings. Findings were triangulated and member checked for accuracy of interpretation.
- **Results:** A total of 34 medical faculty members participated in this study, 16 (47.0%) in 3 focus group sessions and 18 (53.0%) in key informant interviews. 50% males, 9 (27%) rural practicing, 18 (53%) family physicians, and 13 (38%) affiliated with the University for more than 20 years. 2 participants were PhD holders only. Time constraints (from multiples reasons) was the most common reason for non-participation in faculty development(FD) and continuing medical education (CME) events. Other reasons were relevance to personal development and specialty, logistical constraints, institutional and organizational concerns, disconnectedness, discrimination, racism, workplace harassment, lack of organizational support, recognition and incentives, fear and lack of internal motivation.
- **Conclusion:** Time and logistical issues are common deterrents to participation in University organized FD or CME activities. Participants expressed the need to build authentic and active communities that embrace diversity, respect, and trust as a means to enhance faculty engagement within the province.

Introduction

- Continued professional development (CPD), including faculty development (FD) and continuing medical education (CME), are planned programs commonly designed to provide education and support for physicians as clinical faculty, juggling the numerous roles expected of them in their professional work
- Low registrations to locally organized CME and FD events have been recorded year after year for physicians and clinical faculty working or affiliated with the College of Medicine, University of Saskatchewan; where over 1,700 clinical faculty are scattered across urban and rural campuses.
- The Division of CME, FD, and Distributed Medical Education (DME) wants to see more active participation in Saskatchewan-based FD, CME and CPD events by Saskatchewan physicians and clinical faculty. Thus, we designed this study to 1) explore barriers and facilitators to physicians and clinical faculty's engagement to University of Saskatchewan, College of Medicine organized FD, CME, or CPD events, and 2) learn how the College can enhance faculty engagement among clinical faculty members.

Methods

- We utilized a qualitative exploratory research design to pursue the objectives of this study
- Ethical approval was waived per Article 2.5 of the Tri-Council Policy Statement (TCPS)
- Physicians and clinical faculty were invited to participate in our focus group discussions and keynote interviews through invitation emails, website adverts and word of mouth. Recruitment was officially closed on the 31st of March 2021.
- Data analysis was carried out independently by the research assistant and the Canadian Hub for Applied and Social Research (CHASR).
- Results are currently being triangulated to ensure transparency and reliability

Results

Table 1: Descriptive characteristics of the study participants

Descriptive variable (n=34)	Frequency (%)
Methods	
Individual interviews	18 (53.0)
Focus group discussions (3 sessions each)	16 (47.0)
Frequency of attendance	
Attendees	14 (41.2)
Non-attendees	20 (58.8)
Location of Practice	
Urban	25 (73.5)
Rural	9 (26.5)
Sex	
Male	17 (50.0)
Female	17 (50.0)
Years of practice	
<5 years	4 (11.8)
6 to 10 years	5 (14.7)
11 to 19 years	6 (17.6)
≥ 20 years	19 (55.9)
Years affiliated with the U of S	
<5 years	9 (26.5)
6 to 10 years	8 (23.5)
11 to 19 years	4 (11.8)
≥ 20 years	13 (38.2)
Specialty/Division	
Family Medicine	18 (52.9)
Surgery (1ENT, 2 General surgeons, 1 ObGyn)	4 (11.8)
Pathology (1 MD, 2 PhDs)	3 (8.8)
Hematology	2 (5.8)
Anaesthesiology	2 (5.8)
ER Medicine	2 (5.8)
ICU/Critical care Medicine	2 (5.8)
Psychiatry	1 (2.9)

Results

Figure 1: Overview of barriers and facilitators to participating in FD or CME events

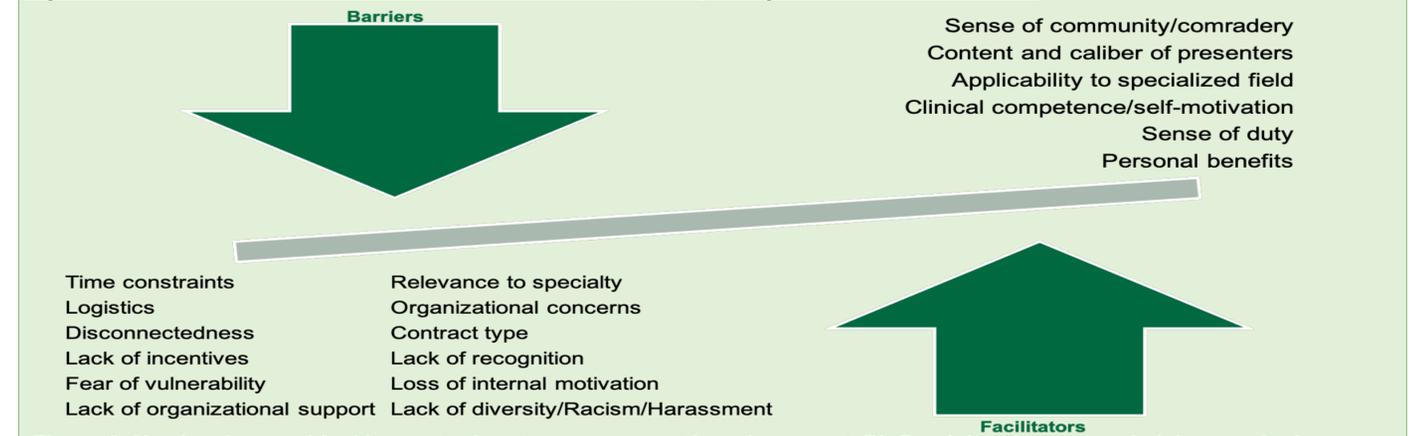
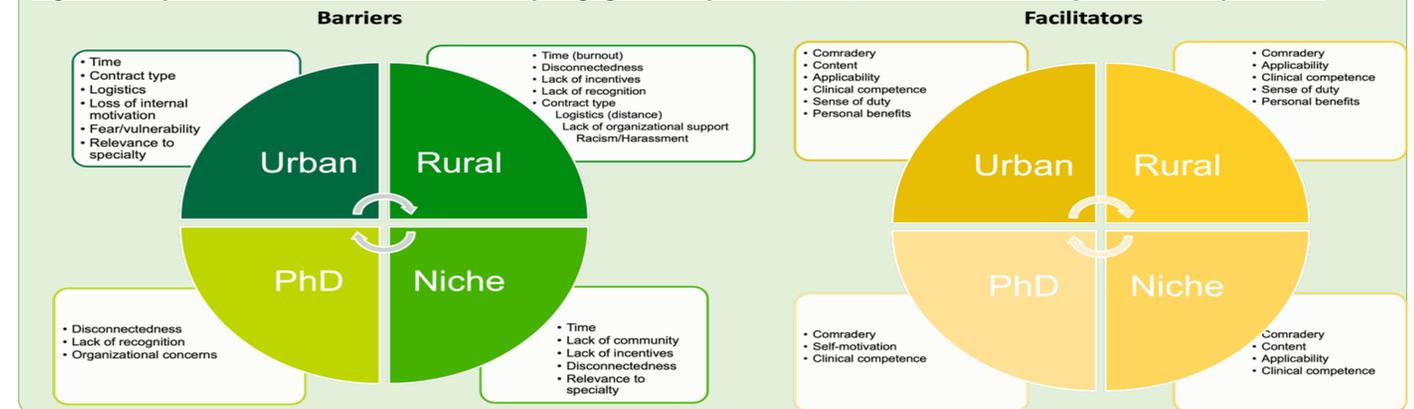


Figure 2: Key barriers and facilitators to faculty engagement by urban, rural, Ph.D. clinical faculty, and niche specialties



Discussion and Recommendations

- The willingness to participate in FD/CME we found may have been influenced by the perception of what FD or CME is about, and what it offers to support faculty members as we found a few clinical faculty members did not understand the role and purpose of FD or CME in navigating their faculty and clinical roles.
- Time constraints as with most physicians and clinical faculty remained a common barrier to participation which we found to also interplay with factors such as, contract type, commitments to clinical duties, perception of FD/CME, disconnectedness, burnout and workplace discrimination.
- Recommendations offered by physicians to enhance engagement in FD and CME events included,
- **Building a stronger community by;**
 - Involving physicians in the decision-making processes to ensure programs are designed to match professional needs.
 - Building personal and interpersonal relationships among colleagues in the College of Medicine.
 - Fostering bidirectional communication between central and rural physicians to improve opportunities to get FD and CME to rural and remote areas.
 - Promoting diversity among FD and CME programs
- **Humanizing interactions with physicians in faculty**
- **Feeding the natural desire to learn among faculty members**
- **Incentivizing participation to CPD activities**
- **Integration of programs and activities delivered to physicians**
- **Providing more supports for medical faculty to thrive in their career pursuits.**
- **Determining areas of interest among faculty**

Conclusions

- Time and logistical issues are common deterrents to participation in University organized FD or CME activities.
- Participants expressed the need to build authentic and active communities that embrace diversity, respect, and trust as a means to enhance faculty engagement within the province.

Acknowledgements

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