

**Department of Medicine**  
**Faculty Development**  
**05-23-16**

# Faculty Development Committee

ITEMS	TIMEFRAME
Review Reformatted Faculty Development Web Page	May
New Faculty Orientation Materials & Quarterly Email	May
DOM Citizenship Metrics	May
Review of DOM Reappointment Process	June
Review/revise Annual Review form	June
Support Mechanisms for Junior Faculty QA/QI Research	June
Review Final Draft of New COM CV Format	Future
Faculty Development Retreat?	Future
Meeting with Katie Huggett of Teaching Academy	Future

# **DOM Academic Affairs Resources :**

- Review of UVMMG and UVM on-boarding process
- DOM resources, organization structure, & contacts

# On-boarding and Organizational Structure

## COLLEGE OF MEDICINE RESOURCES:

**Point of Clarification:** The UVMMG (medical group) orientation material does not apply to UVM-only faculty. Topics to consider for onboarding:

HR-related distinctions between institutions (UVMMG vs UVM-only)

	UVM Medical Group	Non-UVM Medical Group
Faculty appointment	UVM & UVMMC	UVM
Benefits eligibility	UVM & UVMMC	UVM
Payroll paperwork	UVM & UVMMC	UVM

HR-related points of contact by institution:

	UVM	UVM Medical Center
Employee Benefits	Holly Zanes holly.zanes@uvm.edu 656-3150 Jenny Russell Dept. of Medicine HR	Heather McSweeney Heather.McSweeney@uvmhealth.org 847-2825, option 5
Onboarding & Department of Medicine HR Matters	Coordinator Jennifer.Russell@uvmhealth.org 847-4271 HRS Info Line HRSInfo@uvm.edu 656-3150	Rachel Johnson Physician Onboarding Coordinator Rachel.Johnson@uvmhealth.org 847-4097
Leaves of Absence	HRS Info Line HRSInfo@uvm.edu	Karen Vincent Karen.Vincent@uvmhealth.org 847-3935

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- Faculty mentoring program and resources

# Mentoring Worksheet

## ARTICULATE GOALS

Prior to meeting with your mentor, take some time to think about and write down your [professional goals](#). You may want to articulate one-year goals and five-year goals. For example, a short-term goal might be “to give lectures in the medical school curriculum” and a long-term goal might be “to develop a teaching portfolio that will support election to the Teaching Academy and promotion to Associate Professor.” For a more detailed Goals Sheet click [here](#).

Short-term Goals (next year)	Long-term Goals (next 3-5 years)
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

## GET YOUR STORY STRAIGHT

Imagine that you just stepped onto the elevator with your dean. She turns to you and says, “tell me what you do at UVM.” What is your 2-3 line answer?

## IDENTIFY MENTORSHIP NEEDS

Identify competencies that you will need to gain expertise in. A [competency grid](#) is included on the last page to help you organize your thoughts. Put your initial thoughts down on paper and then discuss it with your mentor. Revise the grid as the mentoring relationship changes.

- |                          |                        |                             |
|--------------------------|------------------------|-----------------------------|
| • Navigating institution | • Writing manuscripts  | • Managing care             |
| • Finding resources      | • Teaching effectively | • Managing conflict         |
| • Speaking before groups | • Developing curricula | • Collaborating effectively |
| • Leading teams          | • Assessing students   | • Networking                |
| • Designing research     | • Giving feedback      | • Medical Informatics       |
| • Managing data          | • Mentoring others     | • Organizational dynamics   |
| • Writing grants         | • Cultural competence  | • Managing your career      |
| • Finding funding        | • Managing time        | • Establishing goals        |
| • Hiring personnel       | • Managing budgets     | • Knowing career paths      |
| • Evaluating literature  | • Managing staff       | • Preparing for promotion   |

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- DOM Career Development Tool-kit
  - Understanding percentages
  - Productivity metrics
  - Efficiency and effort

# Career Development Tool-Kit

## THE METRICS OF OUR LIVES

We do not make widgets – the upside of this is, well, that we don't make widgets; the downside of this is that we have a hard time quantifying just what it is we do in all its many dimensions.

**RVUs:** The 'Relative Value Unit' (RVU), or more accurately, the work RVU (wRVU) is what physicians produce instead of widgets. Although specifically developed for use by CMS (Medicare) to replace the "usual, customary and reasonable" fee structure, the RVU has become a universally applied metric of physician work. The long and sordid history of how the RVU developed is detailed [here](#) (AMA), and a good explanation of how they work can be found [here](#) (ACRO). Briefly, the RVU was developed in the early 1990's by researchers at Harvard as part of the Resource-Based Relative Value Scale (RBRVS), and is a metric used to capture the amount of resource utilization required to perform a particular medical service. This includes the "relative level of time, skill, training and intensity" to provide a given service. All billable physician services are reported as CPT ("Current Procedural Terminology") codes, e.g. 99244 "Level 4 Office Consult," and wRVUs, in theory, provide a way to translate CPT codes into an amount of 'work' performed.

In the case of Medicare's use of the RVU for payment, there are additional components that go into a final determination of resource use, including Practice Expense and Malpractice components of the total RVU. Each component of the RVU is adjusted by a geographical factor (Geographic Practice Cost Index or GPCI) corresponding to the RVU component (W, PE, or M) to take into account regional variation in costs of practice. The final, adjusted, combined RVU is then multiplied by a Conversion Factor (CF), set by CMS, which converts the RVU into an actual dollar amount for payment from Medicare.

In practice, RVUs are determined for all services provided by a physician (not just those delivered to Medicare beneficiaries) as a way to determine 'clinical productivity.' Thus, 'RVU targets' are a way to specify an expected amount of clinical work over a given period of time. Although 'quality' metrics are also being developed and implemented on both the national and local levels with the stated goal of emphasizing 'quality over quantity of care,' the primacy of the RVU has not faded.

Anyone with clinical responsibilities at UVM should be aware of not only their RVU targets for the fiscal year, but also how those RVUs are to be generated - e.g. how many patients do you need to see in a clinic to hit your target? This isn't so much to get you moving on the treadmill, but so you can understand how you can navigate your responsibilities. Providers also need to be aware of clinical activities that do not generate RVUs – generally, anything that you do not attach a billing code to. The time you spend on the phone with a patient? The hours you dedicate to arranging for DME, prescriptions, home oxygen, etc.? The meticulous note writing? Zero RVUs. Should you skip these activities? No, of course not, but it's important to understand why it often seems like you're working flat-out but running in place in the current healthcare system. The other reason to know this is to help avoid wasting your time and effort on things you *shouldn't* be doing: Those curbside consultations you do for your colleagues? You receive only the liability.



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  - Efficiency and effort
- RPT process and timelines

# TIMELINE OF REAPPOINTMENT: A FACULTY MEMBER'S PERSPECTIVE

## Fall:

- Annual Review with Division Chief



## Early January:

- Reappointment materials due to the Department of Medicine\*\*



## Mid-February:

- Faculty vote on reappointments



## Early March:

- Promotion dossier passed to College of Medicine for Review by Faculty Standards Committee



## Mid/Late June:

- Notified of reappointment decision



## Early December:

- Department of Medicine sends faculty member request to prepare Green Sheets/Promotion Dossier for Reappointment



## Early/Mid-February:

- Dossier reviewed by Department of Medicine Reappointment Committees



## Late February:

- Sign dossier containing Department of Medicine Promotions Committee Evaluation and Chair's Letter



## May:

- Dean reviews dossier and evaluations



\*\* Completed Green Sheets, CV, teaching evaluations since last reappointment.

# TIMELINE OF PROMOTION: A FACULTY MEMBER'S PERSPECTIVE

## May-June:

- Discuss promotion with Division Chief
- Consider names for letters of reference

## Late August:

- Promotion materials due to the Department of Medicine\*\*

## Early October:

- Faculty vote on promotions

## Early November:

- Promotion dossier passed to College of Medicine for Review by Faculty Standards Committee

## Late June:

- Notified of promotion decision

## Early-Mid July:

- Department of Medicine sends faculty member request to prepare Green Sheets/Promotion Dossier

## Late September/Early October:

- Dossier reviewed by Department of Medicine Promotions Committee

## Late October:

- Sign dossier containing Department of Medicine Promotions Committee Evaluation and Chair's Letter

## Late January:

- Dean's composite review available to faculty member to approve
- Promotion dossier is then passed to the University of Vermont Professional Standards Committee and then on to the Provost (February – May)

Letters of reference requested on your behalf

\*\* Completed Green Sheets, updated CV, contact information for letters of reference, teaching evaluations since last reappointment

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- Faculty mentoring program and resources
- DOM Career Development Tool-kit
  - Understanding percentages
  - Productivity metrics
  - Efficiency and effort
- RPT process and timelines
- Opportunities for Teaching, Scholarship & Service

# Opportunities for...

## OPPORTUNITIES FOR SERVICE:

### At the University Level

#### **Curricular Affairs Committee**

- 1) Description: This committee has responsibility for matters related to undergraduate and graduate educational policy and long-range academic planning.
- 2) Time requirement:
- 3) Members of the DOM who are or who have been on this committee:
- 4) Contact to express interest:

#### **Educational and Research Technologies Committee**

- 1) Description:
- 2) Time requirement:
- 3) Members of the DOM who are or who have been on this committee:
- 4) Contact to express interest:

#### **Faculty Senate**

- 1) Description: The Faculty Senate is the body at UVM that shares responsibility with the administration for effective management of academic affairs at the University (<http://www.uvm.edu/~facsen/>)
- 2) Time requirement: Monthly meetings on the second Tuesday of each month from 4-5PM at Waterman
- 3) Members of the DOM who are or who have been on Faculty Senate: Matt Poynter (2010-2013), Dan Weiss (2012-2015).
- 4) Contact to express interest: Polly Parsons (for nomination)

#### **Faculty Standards Committee**

- 1) Description:
- 2) Time requirement: 8-10 hours monthly
- 3) Members of the DOM who are or who have been on this committee:
- 4) Contact to express interest: Vicki Counos and Charlie Irvin

#### **Financial and Physical Planning Committee**

- 1) Description:
- 2) Time requirement:
- 3) Members of the DOM who are or who have been on this committee:
- 4) Contact to express interest:

#### **Institutional Animal Care and Use Committee (IACUC)**

- 1) Description:
- 2) Time requirement:
- 3) Members of the DOM who are or who have been on this committee:
- 4) Contact to express interest:

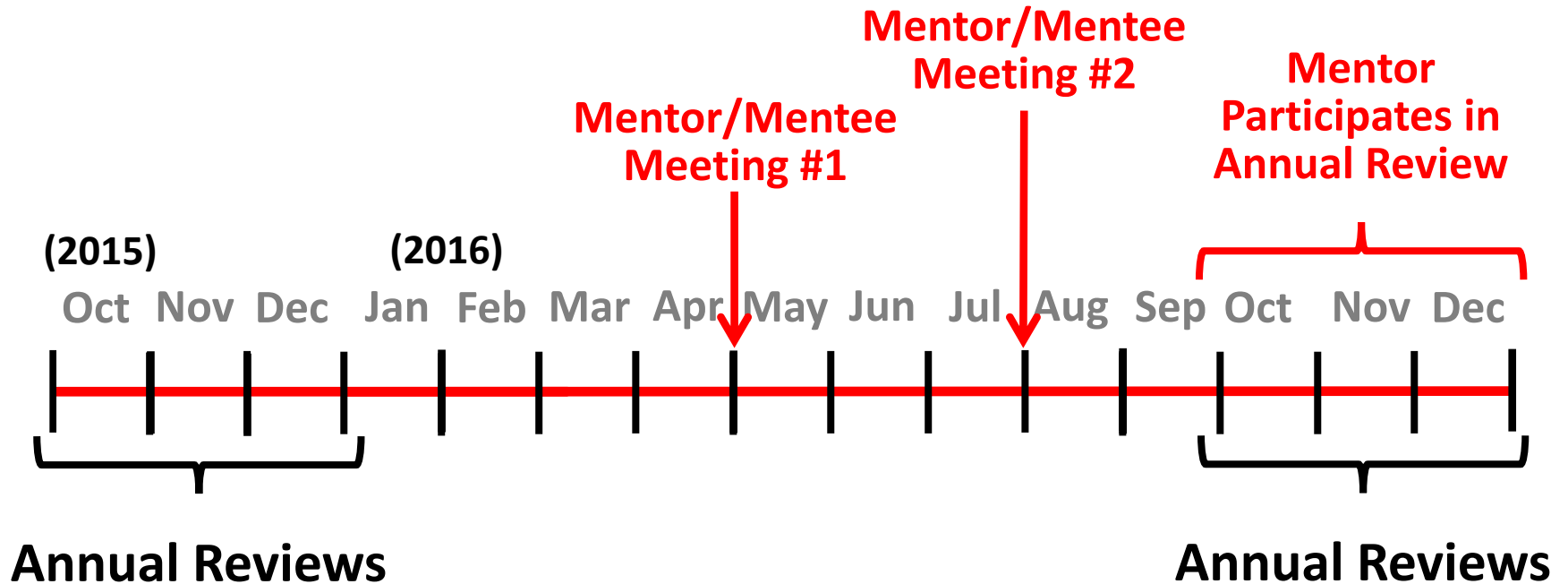
#### **Institutional Biosafety Committee (IBC)**

- 1) Description:
- 2) Time requirement:

# Faculty Development On-Boarding:

- All new hires, 6-8 weeks after start date
- Review:
  - Mentoring plan, worksheet, and resources
  - RPT process, timeline, and Green Sheet format
  - Academic metrics table
  - Education and Service opportunity list
  - Career development resources
  - New Faculty “Cheat Sheet”

# DOM Mentoring Plan: Timeline



## **Other Resources from Academic Affairs:**

- Mentoring plan development
- RPT review and advice
- CV review and assistance
- 'At risk' faculty assistance

**Questions?**