



Flexibility in Faculty Careers

*Collaborative Project between SOM Departments and
Senior Associate Deans*

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Faculty Career Flexibility Outline

- Goals
- A National agenda
- The case for FWA:
 - Challenges; Opportunities; Research data; Work-Life Balance
- Definitions & modes of delivery
 - Informal approaches
 - Policies at top medical schools
- Formal approaches to FWA
 - Clinical productivity models (PAMF & Stanford pediatrics)
 - Cultural - corporate models (KPMG and Deloitte study)
- Deloitte Mass Career Customization (translatable model)
- Principles for consideration in FWA design

Project Goals

Overarching Goal

Create a culture that is supportive of faculty career flexibility

Specific Goals

- Define the case for faculty career flexibility in academic medicine
- Identify and evaluate best practices in career flexibility: peer institutions; local practice models (PAMF); other industries
- Define current status of faculty career flexibility at SOM
- Improve faculty understanding of available flexibility SOM policies
- Determine faculty needs & cultural barriers to flexible careers
- Develop models & pilot within a department or discipline
- Disseminate models to all departments

**Stanford School of Medicine
Office of Diversity and Leadership**

Flexibility

**Executive Committee
October 20, 2006**

THE CHALLENGE

The World is Changing...from when we began our careers

What will happen to science and medicine when fewer graduates choose academic careers and when 5000+ faculty retire in the next 5-10 years?

What is our Responsibility as Leaders to address this challenge?

Business as usual will not work

THE CHALLENGE

“Translating Discoveries” - our institutional characteristics: Adaptability, Excellence, Flexibility, Collaboration, Creativity.

- How do we **Adapt** to the new generation?
- How do we provide **Flexibility**?
- How can we be **Creative** in approaching this Challenge?

CULTURE CHANGE

Challenge Traditional Assumptions:

1. People who work part-time are not really committed to their career:

In fact, research tells us that people who work part time are more loyal and stay in their jobs longer because they are grateful for the flexibility. (Families and Work Institute) **Retention rates improve and organizations save money. Our own faculty tell us this.**

CULTURE CHANGE

Challenge Traditional Assumptions:

2. People who work part-time are not productive:

In fact, research tells us that people who work 50% time produce 70-80% of the work (Families and Work Institute). **Our own faculty tell us this. Organizations benefit from increased productivity levels.**

CULTURE CHANGE

Challenge Traditional Assumptions:

3. People who work part-time will do so for their entire career:

In fact, people who work part-time do so for a few years either when their children are young or when they transition into retirement (Families and Work Institute) ■

Our own faculty tell us this.

CULTURE CHANGE

Challenge Traditional Assumptions:

**3. If we offer flexibility to one person,
everyone will want it:**

**In fact, in a survey of 24 medical schools
only 31% of the women indicated an
interest in part-time work** (Am Journal of Medicine, 2006).

STRUCTURE CHANGE

How can we change the Structure of Academic Medicine?

It is difficult for all of us who are products of the current structure to reinvent the organization.

ODL recommends we conduct focus groups with our trainees so they can offer suggestions for consideration. We then need to work collaboratively with the Provost.

We need to take leadership with the AAMC and our peer institutions to adapt the academic medicine structure to the realities of today. Perhaps we take the lead to sponsor a symposium to discover how academic medicine can address these challenges.

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Career Flexibility National Agenda

White House Forum Kicks Off National Conversation on Workplace Flexibility

On March 31, President Obama and First Lady Michelle Obama hosted the White House Forum on Workplace Flexibility.

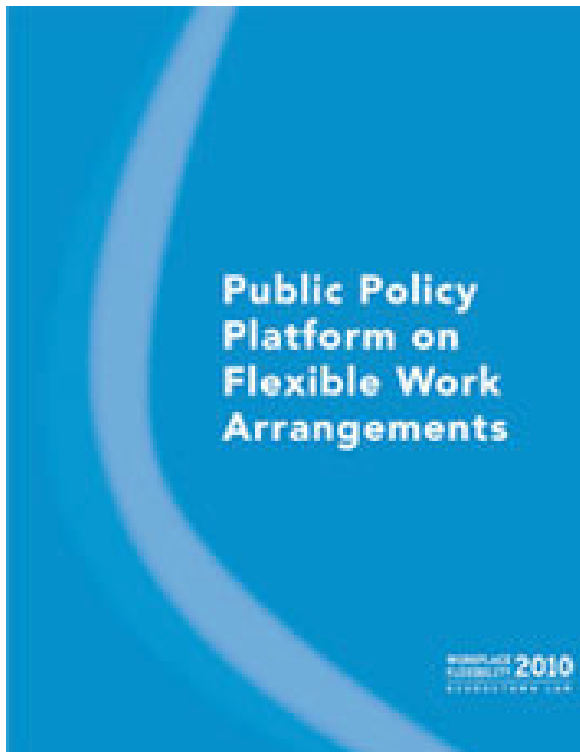
The Forum sent a clear signal that expanding access to workplace flexibility has become a national priority essential to supporting working families and strengthening our nation's economy.

The New York Times

November 9, 2008

PREOCCUPATIONS

Up the Ladder? How Dated, How Linear



A public policy initiative at Georgetown Law
Lead policy component of the Alfred P. Sloan Foundation

Co-Directors Katie Corrigan and Chai Feldblum

<http://workplaceflexibility2010.org/index>

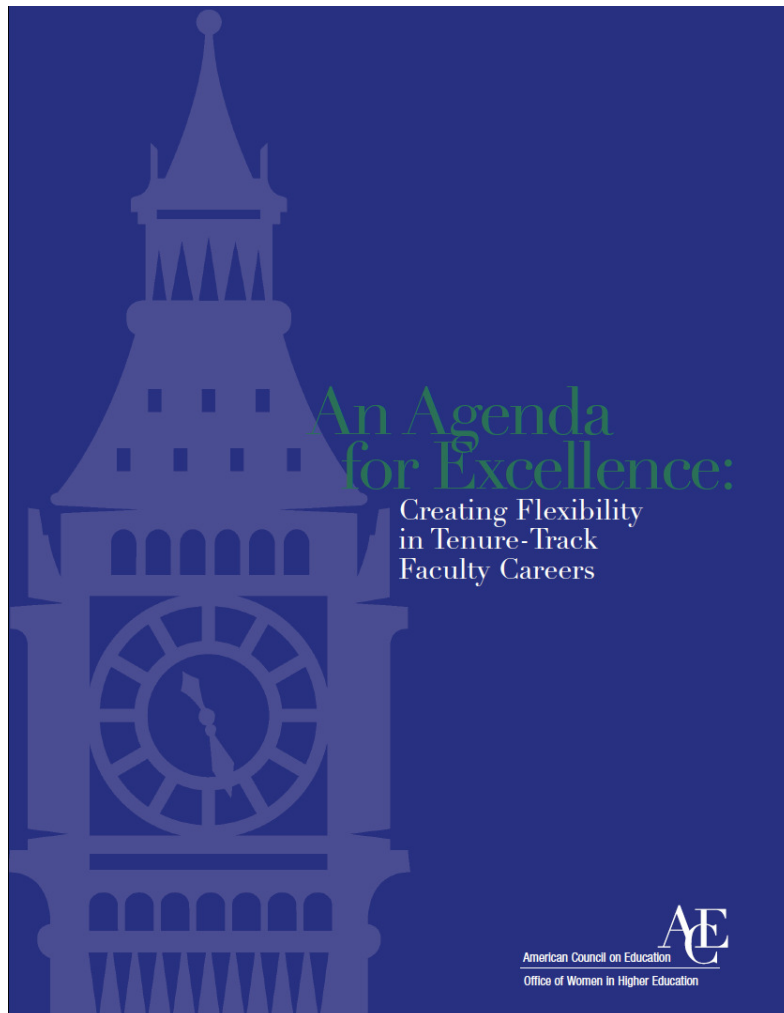
A comprehensive set of policy solutions designed to expand American access to flexible work arrangements such as flexible start and end times, predictable schedules, and compressed workweeks.

<http://workplaceflexibility2010.org/index.php>

An Agenda for Excellence:

Creating Flexibility
in Tenure-Track
Faculty Careers

- National panel of university presidents & chancellors - 10 institutions
- Data on career environment & experiences of tenured & tenure-track faculty
- Confirms the compelling need for change in the current rigid structure of traditional academic career paths



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The Case for Flexible Faculty Careers: A generational Issue - both young & senior faculty

The Challenge for Academic Medicine

- Faculty attrition (beyond a gender issue)
- Vanishing physician scientist (transition - K award to R01)
- **Cultural Work Values of Medicine***
- **Reframing “Work-life balance”Work is a part of life**
- “Career-life fit” → better concept to describe how high achieving populations (academic physicians and scientists) view career development in the context of their entire life experience (Benko and Weisberg 2007)

Cultural Work Values of Medicine

Traditional Markers of Professional Values*

- Productivity
- Indefatigability
- Selfless dedication
- Academic: dedication to work often means dedication to the 60-plus-hour workweek
- Traditional view related to “framing” of part-time work as “working less”
- Decision to Work part-time: Opportunity to reconceptualize Work**

* A Time for Change: An Exploration of Attitudes Toward Part-Time Work in Academia Among Women Internists and Their Division Chiefs
Harrison, Rebecca; Gregg, Jessica; Acad. Med. 2009; 84: 80-86

The Case for Flexible Faculty Careers:

A generational Issue - both young & senior faculty

Potential Rewards

- Recruit and retain the best faculty, thereby maintaining excellence in research, teaching & patient care
- Enhance the culture of the academy to keep pace with societal changes, particularly with respect to demographic, cultural, and ethnic shifts
- Achieve gender, racial, and ethnic equity among faculty, which is crucial given the increasingly diverse student body
- Continue to contribute to the nation's competitiveness and national security
- By spending money to establish flexible faculty career pathways, we are investing in a more diverse, more satisfied, and more productive faculty

“Can we afford not to invest in the future of our institutions by not investing in our faculty?”

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Work-Life Policies for Faculty at the Top Ten Medical Schools

- Top ten US medical schools *U.S. News and World Report*: August 2006.
- Seven work-life policies at each school:
 - Maternity leave; paternity leave, adoption leave,
 - Extension of the probationary period for family responsibilities
 - Part-time faculty appointments
 - Job sharing, and child care
- Ranking - 0-3 for degree of flexibility for each policy
- Individual scores ranged from 7 to 15 out of a possible 21 points
- Extension of the probationary period received - highest cumulative score
- Job sharing - lowest cumulative score

Top Ten Medical School Data

Part-Time Appointment

Rating 0-3

Harvard	2	Part time appointments of unspecified duration with reviews of continuing contributions every five years. No limit to the number of reappointments in any rank.
Johns Hopkins	2	Available at any rank, valid for 1 year, and should be renewed annually. Faculty members who resign from a full time position are not entitled to a part time appointment.
U Penn	0	No part time appointments- only reduction of duties, limited to 6 years.
UCSF	3	May be eligible for part time appointment. Appointments are approved based on needs, for a specific period or permanently.
Wash U-St. Louis	1	Tenure obtained only by full time appointments. Faculty can apply for part time leave of absence for child rearing and family problems.
Duke	0	Not offered at this time, but a study is underway to examine this possibility.
Stanford	3	Appointments available at any rank. Accrue time toward tenure at prorated basis.
University of Washington	2	Available based on the needs of departments, circumstances treated on case-by-case basis. The 1 st appointment of 50% or greater shall be for 3 years.
Yale	1	Only in exceptional circumstances for limited amount of time.
Baylor College of Medicine	3	Available for faculty, negotiated through department.

Top Ten Medical School Data

Job Sharing

Rating 0-3

Harvard	2	Case-by-Case basis.
Johns Hopkins	1	No formal policy.
U Penn	1	No formal policy. Has occurred in relation to reduction in duties.
UCSF	1	No formal policy
Wash U-St. Louis	1	No formal policy.
Duke	0	Not offered to faculty.
Stanford	2	Case-by-case basis.
University of Washington	1	No formal policy.
Yale	1	No formal policy.
Baylor College of Medicine	0	Not available for faculty.

Top Ten Medical School Data

Extension of Probationary Period

Rating 0-3

Harvard	2	When a faculty member takes leave or relief in connection with a birth/adoption, there is an automatic extension of contract and review period, which they may waive.
Johns Hopkins	0	No probationary period, replaced with a merit-based criterion instituted as of 2006 (<i>not available online</i>)
U Penn	1	Eligibility in accordance with FMLA and that a child is born, adopted or placed in foster care (given the child has not reached his or her 2 nd birthday) Extension is 1 year on request unless faculty request one semester instead.
UCSF	2	Eligible upon leave of absence. Maternity or prenatal leave equal to or in excess of one semester will automatically be excluded from the 8 year rule, unless otherwise requested. Any maternity or childbearing/rearing leaves taken for newborns will automatically stop tenure clock. The tenure clock may be stopped up to 1 year for each event of birth or placement (no more than 2 years). Individuals are eligible to stop the tenure clock even if no leave or modification in duties is taken.
Wash U-St. Louis	0?	Anytime that faculty spend on family/ parental leave will not count toward probationary period. If time is taken off as an approved leave, tenure clock is extended by the equal amount.
Duke	2	Automatic 1-year extension upon granting of parental leave. Extension also granted for other family/life events. No limit for number of childbirths or adoptions. If both parents are nontenured, they are both eligible for one semester(6 months) relief, or one parent can take the 1 year.
Stanford	1?	Eligible for 1 year extension upon birth or adoption; no limit if appointed after 1996.
University of Washington	1	Leave is taken for less than 6 months, then faculty member may request a 1-year extension. When medical or family leave is taken for 6 months or longer, there is an automatic 1 year extension of probationary period.
Yale	1	Child rearing or care giving leave of 6 weeks or more, may request a 2 semester/ 1 year extension. Nontenure appointment extension available for 6 months.
Baylor College of Medicine	0	Has no probationary period.

Duke University & SOM Experience

Interview with provost for faculty development & associate dean at SOM

Keys to successful implementation

- Departmental level
- Reframing the issue
 - *Generational*
 - *Retirement consideration*
- Early involvement of key groups:
 - *HR/benefits*
 - *Will need 2 benefits (cost)*
 - *Business managers (DFAs)*
 - *Effort reporting*

- Med staff approval
- Grants management
- Avoid term “part time” - FWA
- Communication plan
- Human element
 - *Full citizenship; benefits; voice*
 - *Nothing second class*
 - *Full coverage when gone*
 - *Sabbaticals*

Disappointed with usage? Evidence for cultural barriers vs infrastructure

Productivity and Definition of FTEs

Palo Alto Medical Foundation (PAMF)

- FWA long standing strategy for recruitment and retention
- Definition: 34 patient contact hours per week
 - E.g. - 4 days office hours, 1 day off
 - 0.75 - 0.80 FTE means 3 really long days or 3 ½ relaxed days
 - 0.5 FTE without a partner means 2 ½ days in the office
 - Job Sharing -- 0.5 with partner share patient panel and space
- Salary based on RVU generation

How Employers Provide FWA

Barriers and Cultural Issues--Corporate

- Study of KPMG and Deloitte - supervisor attitudes re FWA
- Evaluated formal and informal career development measures
 - Females assigned less career growth opportunities than males (full time)
 - Fulltime females had more career growth opportunities than part-time female career opportunities
 - Males with FWA received lower evaluations than females with FWA
 - Supervisors participating in FWA less likely to demonstrate above
- Conclusion—significant cultural barriers to career development exist for those employees participating in FWA

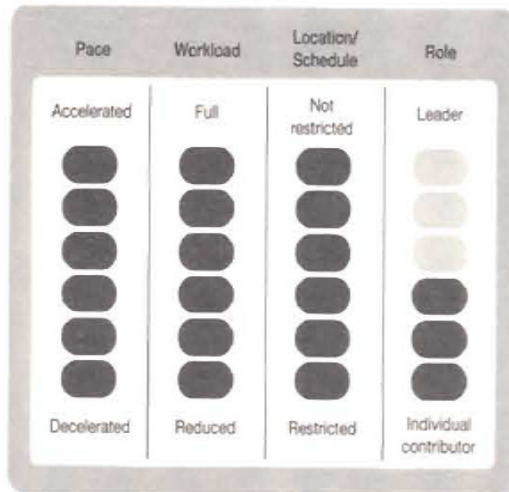
How Employers Provide FWA

Formal FWA Policies

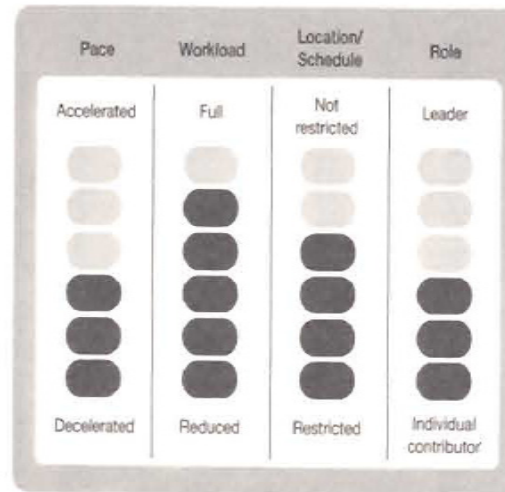
- Deloitte Mass Career Customization—applies principles of mass product customization to the workforce
 - Mass—applies to whole organization
 - Career—applies to how careers are built
 - Customization—because it allows career paths to be personalized
- Dynamic, multidimensional approach to career development, incorporating FWA as one of dimensions

Example of Mass Career Customization Profile over an individual's career in 4 Dimensions: Pace, Workload, Location/Schedule, and Role

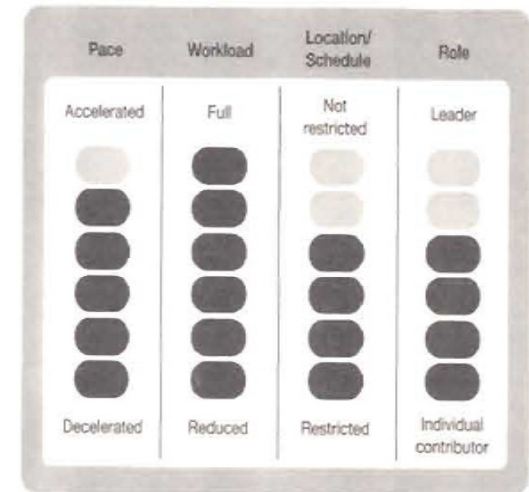
Career Years 0—3
Post-MBA/prefamily



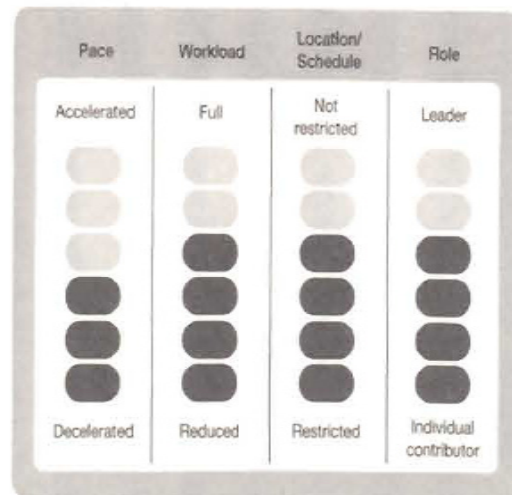
Career Years 4—11
Young children



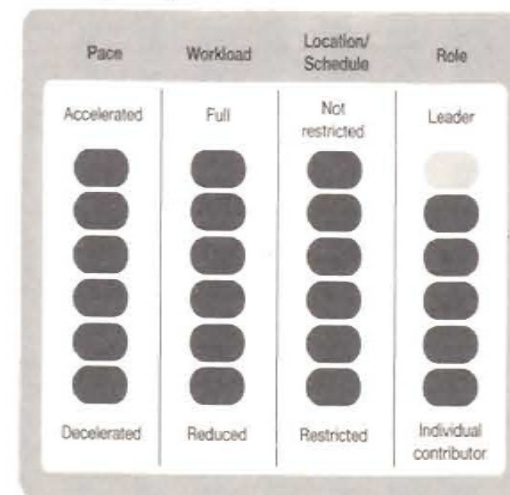
Career Years 12—20
Midcareer



Career Years 21—26
Teenage children



Career Years 27+
College-age children



**Benko and
Weisberg 2007**

Principles for Flexible Career at Stanford

Cultural shift needed to achieve goals

- Consider entire career pathway

Mass Career Customization Approach

- Institute of design at Stanford - “Design Experts” to rethink new models that leverage our faculty’s strengths and supports team approaches to meeting SOM mission
- Team approach: MCL, CE and UTL - organized to share clinical care & teaching responsibilities; facilitate clinical & translational research
- Restructuring of way we schedule clinical and research rotations to create block times for scholarly activities and personal pursuits (2-3 month blocks)
- Separate models for CE, MCL & UTL
- Taskforce/team to lead the effort - membership criteria

Task Force

Criteria for selection:

- Commitment to supporting faculty advancement
- Willingness to partner with SOM
- Leadership
- Authority to make change
- Junior faculty
- Trainees

Roles:

- Conduct interviews
- Survey development and review
- Data analysis review
- Model development
- Model implementation

Representation:

- School of Medicine leadership
- Department Leadership
- Senior & Junior faculty Clinical & Basic
- HR / benefits
- Hospital Representatives
- University Representation
- External Representatives

Approach & Project Plan

PHASE 1

- Define the case for faculty career flexibility (Completed)
 - Literature review
 - Data from American Council on Higher Education/Sloan foundation
 - Current research (Shelley Correll - Stanford Sociology)
- Identify and evaluate best practices & policies (Completed)
 - Peer institutions - publications
 - Duke - Interviews - (Nancy Allen -VP; Ann Brown - Assoc. dean)
 - Local practice models Interviews (Susan Smith - PAMF leadership)
 - Industry models - published - Deloitte
 - Human centered design (David Kelley, Stanford d.school - in progress)

Project Plan - PHASE 2

Four-pronged parallel processes

1. Define current status of career flexibility at Stanford

- Data on current usage: Total (In progress)
 - FTE listed < 1.0: 163; (14%)
 - All major departments represented
 - Mainly CE (91% of FWA; 48% of CEs)
 - Mainly Assistant Profs.
- Interviews - Chairs & senior administrators
- Improve faculty understanding of available flexibility & barriers to utilization

2. Determine faculty needs for flexible careers

(Begin July 2010)

- Interview faculty across ranks (focus on junior)
- Survey - design and administer
 - Survey questions to understand needs
 - Identify cultural factors that impede implementation (scenarios)
- American Council on Higher Education Pilot Study

3. Determine solutions for flexible careers

- translation of Results/findings

- “Think tanks” - focus on junior faculty & trainees
- From interviews and survey data
 - Develop new models
 - Pilot within selected departments
- Identify current effective models - pilot in other departments

4. Human Centered Design Approach

Human Centered Design

Kaiser Permanente's Innovation on the Front Lines

Reengineer nursing-staff shift changes

Small team within Kaiser Permanente that was born of the company's involvement with the design firm IDEO.

You can't successfully innovate in a vacuum; you need to explore the ways people live, what they think, and how they feel about things before you can understand the problem your new product or service should address

What McCarthy will do all day is watch people, take notes, snap pictures, and make sketches. (He's a fly on the wall, but a very active fly.)



Discussion

Gifford