# Early Career Development and Graduate Medical Education Leadership Pathways

Donna Boucher, MD Sara Martin, MD Amanda S. Xi, MD Kristy L. Rialon, MD

# Introduction

Although there are established career pathways for the physician-scientist, pathways for the physician educator are less well developed.<sup>1</sup> Teaching has always been a central component of graduate medical education (GME); turning this into a career position or leadership appointment, however, is not as straightforward. As educational research and leadership become a viable track in academic medicine, guidance is necessary for trainees on how to pursue this as a career option. Programs more often focus on teaching skills, rather than innovation, leadership, or scholarship.<sup>2–4</sup> Some of the barriers to pursuing this pathway are lack of a clear route of entry, non-transparent career structure, and lack of jobs supporting this aspiration.<sup>5</sup>

Career development programs have been shown to increase the skills necessary for career success, help advance careers, build a network, reduce isolation, and identify mentors. Mentorship, in particular, is strongly associated with career satisfaction. These programs can be especially helpful to women and underrepresented racial and ethnic minority groups who are less likely to be promoted to or hold leadership positions. The second strong strong

In September 2019, the Accreditation Council for Graduate Medical Education (ACGME) Council of Review Committee Residents (CRCR) met and discussed early career development pathways for trainees interested in GME. The CRCR is composed of resident and fellow members of all ACGME Review Committees (RCs), and as such includes representatives from medical-, surgical-, and hospital-based specialties.

The CRCR used a modified appreciative inquiry<sup>10</sup> approach to explore and envision personal career goals and aspirations related to their role as a leader. They were encouraged to imagine ideal pathways and

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the subject matter to help achieve those goals. Finally, the members were challenged to determine how the ACGME can support these goals during their time on a RC and the CRCR, and create concrete pathways during their ACGME tenure to enhance their career development and leadership potential. Several CRCR members compiled the results of the larger CRCR focused topic discussion on educational leadership and identified common themes and perspectives.

# **Methods**

Thirty-two CRCR members engaged in a modified Appreciative Inquiry exercise as part of a topic-focused discussion at a biannual meeting. Appreciative Inquiry is a method previously used by this group that views a subject or issue through a strength-based approach, rather than through a problem-solving lens or taking a deficit-based approach. The approach focuses on the best of what already exists and brings participants into an imaginative space to dream about the best of what might be, determine a shared vision of what the ideal should be, and create actionable steps for what will be.

The 4 steps to the process of Appreciative Inquiry are:

- Discovery: Appreciate the best of what is and what has been
- Dream: Imagine what might be
- Design: Determine what the ideal should be
- Destiny: Create what will be

The members of the CRCR were split into small groups, and at each of the steps were asked a series of questions created by CRCR leadership and advisors (BOX). At the end of each step, the small groups reported a summary of their discussions to the larger group and captured common themes. The facilitators shared personal and professional advice at the end of each step as well. Before the fourth step, each small group came up with a list of the top 5 priorities that emerged from their discussion. This list of priorities was posted around the room and CRCR members

# **BOX Questions for Appreciative Inquiry Exercise**

## Discovery

- Where would you like to see yourself as a leader in the future?
- When you imagine yourself in your role as a leader, what do you dream about?

#### Dream

- Given what you have talked about in round one, how do you get to the place that you described?
- What is the subject matter that you want/need to learn?
  Where will you learn it?
- What kind of mentorship do you need? From whom? How does this manifest; what does it look like, feel like?

## Design

- Ideally, how could your ACGME experiences help you reach your goals?
- How can the ACGME support your greater aspirations in work with your Review Committee
- How can your time on the CRCR move you toward your goal?
- What experiences at the Annual Educational Conference would help you?
- What else might the ACGME do that would help you realize your dreams?

# Destiny

 What does the ACGME need to do to turn the ideal (top priorities) into reality?

were given 7 votes to decide the final priorities that would guide the Council's next steps. In the final round, the groups discussed how the most important concerns of the members could be addressed by the ACGME.

# **Results and Discussion**

Through the process of Appreciative Inquiry, multiple themes emerged. Regarding their future roles in leadership, residents saw themselves surrounded by people who challenge them. Mentorship of other residents and students and having some influence within the GME community were seen as rewarding. With any leadership role, participants wanted to have work-life synergy and maintain the core values of the medical profession. Most felt that the setting and the job title were not as important as a position that brought joy and gratification (ie, who you want to be is more important than what). Respect and humility were 2 key characteristics to maintain.

To get to their ideal position, residents cited advocacy and senior mentorship as 2 critical elements. They said it is important for there to be a community to walk with them through the journey.

They also said it is essential to cover imposter syndrome and self-assessment tools. Mentors should push mentees to a place of discomfort, past what their presumed limitations are, but not overwhelm them. Participants wanted to be exposed to types of leadership positions and opportunities that they might not have thought of themselves (not just those within their organization).

For the ACGME to help participants meet their goals, residents highlighted the importance of alumni networking at national meetings, particularly the Annual Educational Conference (AEC) hosted by the ACGME every spring. The AEC could also host a career development or leadership course for interested trainees and include an "Early Career Physician" panel or seminar. They said it was also important to meet other members of the RCs and have specific mentors from the Council of Review Committee Chairs (CRCC) and RCs. In addition, the opportunity to present at national meetings related to individual specialties on the work of the CRCR or the ACGME would enhance visibility of residents and the positive work of the organizations.

As a group, these goals were further refined through a voting process to the following 6 priorities:

- Create a CRCR Alumni Networking Structure and Group for continued engagement after CRCR term has ended.
- Each CRCR member should be assigned a mentor/advisor from CRCC/RC.
- CRCR members should find opportunities to present on their work at their national meeting/ specialty society.
- Create more opportunities for residents to focus on career development, action plans, and networking at the AEC.
- The ACGME could create a leadership course and offer a certificate of completion.
- Increase opportunities within the ACGME to engage physicians in the early part of their career.

# **Conclusions**

It was clear from the robust and enthusiastic group discussion that residents were looking for guidance regarding how to transition from their current committee position into a career in educational leadership. The above action items have been undertaken by the CRCR to promote early career development and GME leadership pathways. Organizations, such as the ACGME, should foster

maturation of junior members and provide avenues for continued involvement in GME.

# References

- 1. Bartle E, Thistlethwaite J. Becoming a medical educator: motivation, socialisation and navigation. *BMC Med Educ*. 2014;14:110. doi:10.1186/1472-6920-14-110.
- Chen HC, Wamsley MA, Azzam A, Julian K, Irby DM, O'Sullivan PS. The Health Professions Education Pathway: preparing students, residents, and fellows to become future educators. *Teach Learn Med*. 2017;29(2):216–227. doi:10.1080/10401334.2016. 1230500.
- 3. Collins J. Teacher or educational scholar? They aren't the same. *J Am Coll Radiol*. 2004;1(2):135–139. doi:10.1016/j.jacr.2003.11.005.
- Sachdeva AK, Cohen R, Dayton MT, Hebert JC, Jamieson C, Neumayer LA, et al. A new model for recognizing and rewarding the educational accomplishments of surgery faculty. *Acad Med*. 1999;74(12):1278–1287. doi:10.1097/00001888-199912000-00007.
- 5. University of Kentucky. UK Clinical Research Collaboration. Medically- and dentally-qualified academic staff: recommendations for training the researchers and educators of the future. http://www. ukcrc.org/wp-content/uploads/2014/03/Medically\_ and\_Dentally-qualified\_Academic\_Staff\_Report.pdf. Accessed August 31, 2020.
- Helitzer DL, Newbill SL, Cardinali G, Morahan PS, Chang S, Magrane D. Narratives of participants in national career development programs for women in academic medicine: identifying the opportunities for strategic investment. *J Womens Health (Larchmt)*. 2016;25(4):360–370. doi:10.1089/jwh.2015.5354.
- Rautvetter LC. Experiences of Women, Experiences of Men. In: Menges RJ, ed. Faculty in New Jobs: A Guide to Settling In, Becoming Established, and Building Institutional Support. San Francisco, CA: Jossey-Bass; 1999:59–87.
- 8. DeCastro R, Griffith KA, Ubel PA, Stewart A, Jagsi R. Mentoring and the career satisfaction of male and

- female academic medical faculty. *Acad Med.* 2014;89(2):301–311. doi:10.1097/ACM. 00000000000000109.
- 9. Beech BM, Calles-Escandon J, Hairston KG, Langdon SE, Latham-Sadler BA, Bell RA. Mentoring programs for underrepresented minority faculty in academic medical centers: a systematic review of the literature. *Acad Med.* 2013;88(4):541–549. doi:10.1097/ACM. 0b013e31828589e3.
- 10. Bushe G. Foundations of appreciative inquiry: history, criticism and potential. *AI Pract*. 2012;14(1):8–20.
- Daskivich TJ, Jardine DA, Tseng J, Correa R, Stagg BC, Jacob KM, et al. Promotion of wellness and mental health awareness among physicians in training: perspective of a national, multispecialty panel of residents and fellows. *J Grad Med Educ*. 2015;7(1):143–147. doi:10.4300/JGME-07-01-42.
- 12. Hipp DM, Rialon KL, Nevel K, Kothari AN, Jardine LDA. "Back to Bedside": residents' and fellows' perspectives on finding meaning in work. *J Grad Med Educ*. 2017;9(2):269–273. doi:10.4300/JGME-D-17-00136.1.



Donna Boucher, MD, is Assistant Professor, Department of Obstetrics and Gynecology, University of Central Florida, North Florida Regional Medical Center, and Member, Council of Review Committee Members (CRCR), Accreditation Council for Graduate Medical Education (ACGME); Sara Martin, MD, is Core Faculty, Ukiah Valley Family Medicine Residency, and Former Member, CRCR, ACGME; Amanda S. Xi, MD, is Critical Care Fellow, Department of Anesthesia, Critical Care, and Pain Medicine, Massachusetts General Hospital, and Member and Chair, CRCR, ACGME; and Kristy L. Rialon, MD, is Assistant Professor, Division of Pediatric Surgery, Baylor College of Medicine, Texas Children's Hospital, and Former Member and Past Chair, CRCR, ACGME.

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Corresponding author: Kristy L. Rialon, MD, Texas Children's Hospital, Department of Surgery, 12th Floor, 6701 Fannin Street, Houston, TX 77020, 832.822.3388, kristy.rialon@gmail.com