

Establishing a Dedicated Office for Supporting Clinician-Investigators

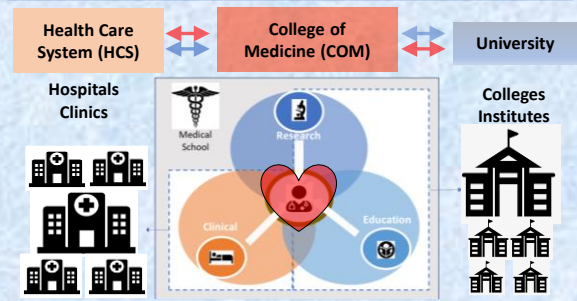
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(Mentor/Sponsor: Kevin Black, M.D., Interim Dean, College of Medicine)



Background and Preliminary Data

Clinician-Investigators (CIs): The heart of the academic health enterprise



In current HCS, CIs (a critical workforce) must fight to survive.

- There is talent and motivation among our clinician-investigators.
 - The failure to obtain funding for their innovative ideas is demoralizing.
 - The lack of a supportive community makes the journey lonely.
- Burn-out**
- EXIT**
- In 2016, we had only 25 of 909 MD-only faculty (3%) who submitted an NIH grant, the lowest in our COM since 1999!**

An institutional strategy to rescue CIs, an endangered species

Two new programs since 2018:

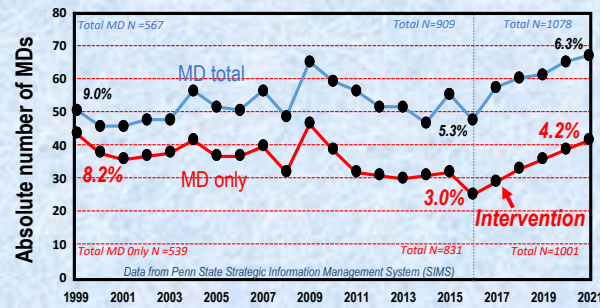
- An institutional **Mock Review (MoRe)** to improve the quality & success rate of grant applications
- A clinician **Faculty Mentoring program (FaMe)** to provide skillsets & a supportive community

- Huang X, Dovat S, Mailman R, Thiboutot D, Berini D, Parent JL. Building a system to engage and sustain research careers for physicians. *Acad Med* (2021) 96:490;
- Dovat S, Gowda C, Mailman R, Parent JL, Huang X. Clinician-scientist Faculty Mentoring Program (FAME) – a new inclusive training model at Penn State. (Under Review)

Preliminary results:

- MoRe** yielded 18 (> 41 %) externally funded grants.
- FaMe** engaged two classes with a total of 34 faculty.
- There is a positive trend of increasing numbers of CIs.

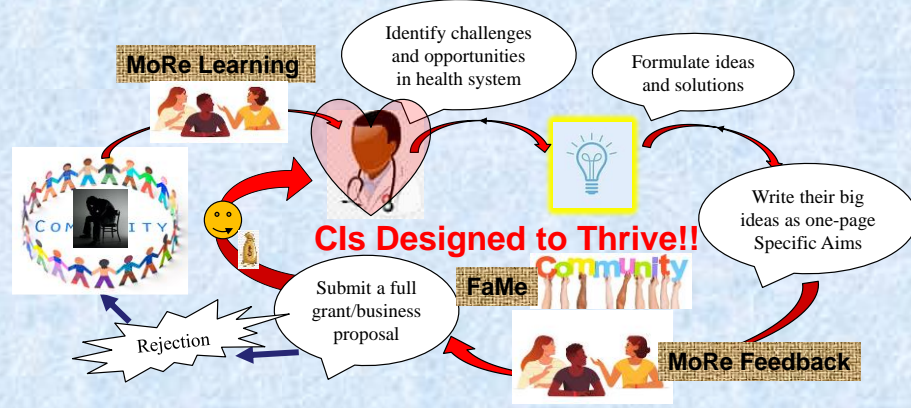
Figure: The number of MDs submitting NIH grants



The New Dedicated Office For CIs

Goals and Objectives

- Integrate new and existing programs to create synergy and efficiency
- Create a culture of coaches/mentors, open-mindedness & collaboration
- Enhance equity, trust, inclusiveness, sense of community & belonging



Approach and Status

- Engage and seek feedback from Stakeholders (Completed)
- Develop and submit a business plan (Completed)
- Identify and secure funding from COM and HCS (in progress)

Discussion and Reflection

- Success will enhance the academic footprint of the College of Medicine and the reputation of our health system in our community, region, and nation.
- Further conversations are needed for a clearer alignment of the goals between the Health Care System and the College of Medicine.



PennState
(1855-present)



PennState
College of Medicine
Milton S. Hershey Medical Center
(1967-present)



PennState Health
(2014-present)

Abstract: 2022 ELAM Institutional Action Project

Project Title: Establishing a Dedicated Office for Supporting Clinician-Investigators

Name and Institution: Xuemei Huang, MD, PhD, Penn State University College of Medicine

Collaborator/Mentor: Kevin Black, M.D., Interim Dean, College of Medicine

Topic Category: Faculty Development

Background and Significance: An actively evolving social and political landscape challenges health care systems to provide high-value care, cutting-edge diagnosis and treatment options including access to clinical trials. **Clinician-investigators** in academic medical centers are a critical workforce that can help deliver these promises, elevating the healthcare reputation and market share. Talent and motivation, however, are inadequate if clinician-investigators have difficulty in securing support for their research effort. This, coupled with a lack of a supportive community, creates loneliness and career dissatisfaction that often leads to burnout and departure.

As an inaugural Associate Dean for Physician-Scientist Development, I led efforts to establish: 1) an institutional Mock Review (MoRe) system to improve the quality and success rate of grant applications; and 2) a clinician Faculty Mentoring (FaMe) program to provide skillsets within a supportive community. Within four years, these efforts have shown promising results, but have been driven mainly by faculty-volunteers with time constraints---an unsustainable model. I propose a dedicated office to enhance the support and training of our clinician-investigators, a critical but endangered species.

Purpose and Goals:

- Integrate new and existing programs to create synergy, efficiency, & sustainability.
- Create a culture that values coaching/mentoring, open-minded discourse, & collaboration.
- Enhance the equity, trust, inclusiveness, sense of community and belonging, & purpose.

Methods/Approach:

- Engage/Seek feedback from stakeholders (*Completed*)
- Develop a business plan (*Completed*)
- Secure funding: Dean of the COM and leaders of health care system (*Work in progress*)
- First Year (after budget approval) (*Pending*)
 - Establish an administrative structure [select leadership (a director) and co-director; recruit/train key staff (manager, scientific writer, data analyst)]
 - Create operations menu: web presence, database, communications platform.
 - Engage faculty, mentors, and coaches, understand their needs via private discussion; and establish web dropbox and trusted learning community sessions.
 - Provide continuous and timely support for faculty who are preparing grant applications or have research-related questions.
 - Evaluate experiences of faculty and staff with both quantitative and qualitative data.
- Develop a timeline and milestones for office evaluation (*Pending*)

Outcome/Results: Ideas have been presented and feedback obtained from the following stakeholders: individual clinician-investigators; program directors for faculty development programs; the physician-scientist advisory committee; chairs/vice chairs of clinical departments; Vice Deans of the College of Medicine; CEO of Penn State Health, Assistant Vice Provost of Faculty Affairs/Development; CFOs of COM, Hershey Medical Center, and the University. Although the overall response is positive, the funding sources for an initial investment are unclear.

Discussion: Inclusive, timely, “faculty-centric,” and “learning-by-doing” approaches of the office will inform leadership of potential problems and opportunities to develop and retain this workforce. The success of the office may enhance the academic footprint and reputation of our health system in our community, region, and nation. Further conversations, however, are needed for a clearer alignment of the goals between the health care system and COM.