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Commentary

Clinical pharmacy academic career transitions: Viewpoints from the field Part 2: Understanding and balancing the distribution of effort

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ABSTRACT

Introduction: The six authors of this commentary series, who have recently transitioned into or within an academic career, discuss challenging aspects of an academic career change. The authors represent faculty members teaching within a large, state-funded, research-intensive School of Pharmacy located within a large academic health center. The authors have various backgrounds and represent individuals making transitions at various points in their careers (from residency into academia, from a non-academic environment into academia, and from one academic environment to another).

Commentary: This is Part 2 of a three-part commentary series that focuses on understanding and balancing the distribution of effort. Parts 1 and 3 of this commentary series explore feedback, evaluation and advancement; and learning when and how to say yes, respectively. While the entire series is intended to be read in continuity, faculty, or those interested in pursuing a career in pharmacy academia, can refer to Part 2 as a reference to aid in understanding and balancing the different components and the distribution of effort associated with a position in academic pharmacy, specifically.

Implications: Schools of Pharmacy may utilize this as a tool for new faculty members during orientation in order to help ensure faculty success.

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Abbreviations: DOE, Distribution of effort

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Introduction

Academic roles are typically associated with a distribution of effort (DOE). A DOE is a calculation of the percentage of effort a faculty member is expected to devote to an academic facet. Common components include teaching, clinical practice, scholarship, and service to the school and profession of pharmacy. Professional development may also be included as a small component of the DOE. DOE management is one of the biggest challenges for pharmacists new to academia due to multiple responsibilities in all academic areas coupled with extensive independence and autonomy.¹ Translating the established DOE into hours or days per week requires thoughtful analysis. The importance of this analysis is founded in the idea that faculty will be evaluated based on output in relationship to the percentage of effort devoted to a particular facet.

Commentary

Understanding the DOE

There is no standard DOE, and an individual's DOE will vary based on factors such as institutional structure, the needs of a clinical practice site, the teaching needs of the institution, and opportunities for professional service. The component of the DOE with the highest percentage will often determine how the majority of time is spent; however, this will vary for each individual faculty member. For example, practice type may greatly affect how time is divided. One's DOE may consist of 50% ambulatory care clinical practice which translates to 2.5 days per week to the clinic site or alternating weeks at the practice site and school, for example. Alternatively, a faculty member with an inpatient clinical service DOE of 50% may give 100% effort to clinical practice for two weeks of the month or six months of the year rather than devoting 50% to clinical practice on a weekly basis.

How the components of the DOE are satisfied is also guided by the ebb and flow of the academic calendar. During the academic year when classes are in session or when faculty have students on rotation, efforts may be more heavily weighted on teaching responsibilities; during the summer many faculty devote more effort on scholarship, as one example. Each faculty member must evaluate the year and carefully consider how to balance and divide efforts based on differences in responsibilities.

The DOE is important not just for providing infrastructure in an autonomous environment. It is also commonly used as a guide for yearly evaluations, as well as career advancement and promotion in many pharmacy schools.² Different expectations exist for a faculty member with 10% effort in scholarship compared to a faculty member with 40% effort dedicated to scholarship. For example, an individual with 10% may be expected to publish two manuscripts per year, while one with 40% may be expected to submit/obtain grants and publish four manuscripts per year.

While the DOE acts as a guide, it is challenging to divide the day or week into time that mirrors the DOE percentage breakdown precisely. In order to overcome this, clinical faculty should work to develop a synergy between practice, teaching, scholarship, and service.³ The goal of this synergy is to increase efficiency and maximize output based on time spent. For example, if a faculty member is preparing a lecture requiring a significant amount of time reviewing the literature, an extension of this would be to write a systematic review article or translate this into the background section of a grant application. An example of another synergy is to formally assess an educational activity. This could mean evaluating the efficacy of an active learning exercise, publishing a description of an educational innovation, or measuring the utility of students within a clinical setting for contribution to the pharmacy education literature. An example of a synergy between practice and scholarship is to write a manuscript describing a newly established clinical service and its outcomes on patient care.

A word regarding protected time

New faculty may be provided a period of protected time with lower requirements for teaching and scholarly output during the first year of employment. This is designed to allow time for the new faculty to become established and integrated at the clinical practice site and the school. While this time is necessary, the new faculty should still strive to "live the DOE" and should be careful to avoid dedicating all efforts to clinical practice. Once the period of protected time has ended, it is nearly impossible to reset practice site expectations and cut back on time in order to balance other role responsibilities. In other words, we would advise to be physically present at the clinic site for only the time that will be allotted to clinical practice after the grace period has ended.

Clarifying the DOE

The institutional structure, balance of clinical academic responsibilities, and level of autonomy and independence is highly variable among U.S. schools of pharmacy. Similarly, variability exists in the way institutions define DOE and how closely it is followed. Some institutions may not have explicitly stated DOEs or do not strictly adhere to them. It is advised that the DOE of the position and the role of the DOE within the institution be discussed during the interview process. If, upon receiving an employment offer or a new position, the DOE or expectation of time/effort is not clearly provided, the faculty member should seek clarification regarding the expectations for annual evaluation and promotion associated with the position. Then, the faculty member can extrapolate these expectations to a DOE, which will provide the necessary guidance for success. Additional advice is to work with the

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