Report of the Task Force on the Recruitment and Retention of Pharmacy Practice Faculty¹

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INTRODUCTION

The Task Force on the Recruitment and Retention of Pharmacy Practice Faculty was charged by Section Chair Rosalie Sagraves to:

1. develop strategies to encourage pharmacy students to select academia as a career path, especially tenure track positions, so that we will not be faced with a shortage of pharmacy practice faculty members in the future;
2. address difficulties in recruiting qualified candidates for post-doctoral specialty residencies and fellowships which are needed to help prepare individuals as pharmacy educators;
3. explore ways that could be used to help retain qualified pharmacy practice faculty in academia; and
4. review the pharmacy literature and that from other health professions which could help the Task Force address these critical issues.

The Task Force convened at the 1994 Annual AACP Meeting and reviewed its charges. Since a review of the health professional literature was viewed as an essential step in the fulfillment of the first three charges, the last charge was essentially incorporated into the others. Each of the first three charges were delegated to pairs of committee members, who were asked to provide reports and recommendations by spring 1995. In evaluating the literature, the most recent report of the Section of Teachers of Pharmacy Practice Task Force on Faculty Resource Development and Renewal(1), and the Chair Report of the Academic Affairs Committee(2), which were published recently in the American Journal of Pharmaceutical Education, were felt to have addressed the first two charges. In these excellent reports, strategies to enhance recruitment of pharmacy students into academic careers and pharmacy graduates into advanced training programs were delineated; barriers were identified and solutions were proposed. Thus, our Task Force focused its attention on the third charge, i.e., to explore ways that could be used to help retain qualified pharmacy practice faculty in academia.

RETAINING QUALIFIED FACULTY IN ACADEMIA

Background

Retention of pharmacy practice faculty in academia is key to ensuring adequate manpower pools at colleges of pharmacy. Retention is contingent on the commitment of an individual faculty member to a career in academics and to a career in academics at a particular institution. Commitment of an individual faculty member to a career in academics may be affected by many external factors which are not under the control of colleges of pharmacy, e.g., industry salaries are generally higher than college of pharmacy salaries. However, commitment of an individual faculty member to a career in academics at a particular institution may be affected by specific policies, procedures, and activities of that college or university. With regard to the latter type of commitment, it is contingent on an individual’s job satisfaction. Two types of job satisfaction exist. Intrinsic job satisfaction is derived from the faculty member’s positive assessment of his/her opportunity to exercise judgement, make decisions, or exert authority on the job. Intrinsic job satisfaction is dependent on multiple factors:

1. institutional mission and goals match the professional role and responsibilities of an individual faculty member;
2. job functions are challenging, interesting, and pertinent to the faculty member’s expertise;
3. feedback on performance is equitable and accurate;
4. job promotion and tenure opportunities are available; and
5. the institution places a priority on supporting faculty development and growth.

Extrinsic job satisfaction is derived from a faculty member’s positive assessment of his/her salary, job title, office space, or travel time to the job location. Extrinsic job satisfaction is also dependent on multiple factors in which the faculty person views:

1. his/her position title and salary as commensurate to his/her years of faculty experience, responsibilities assumed, and quality of job performance;
2. supportive services as being adequate to meet needs for successful completion of his/her job functions; and
3. office space and equipment as adequate for successful completion of their job functions.

LITERATURE REVIEW

Regarding intrinsic job satisfaction, the literature is replete with suggestions for or methods used to enhance faculty development. An annotated bibliography follows.

Higher Education Literature


The author’s premise is that faculty are committed to their profession and discipline, but less committed to the institution. This lack of commitment to the institution may affect the quality of undergraduate education. A survey was administered to full-time tenure-track faculty at four doctoral granting institutions to ascertain the factors that contribute to commitment to the institution. The results indicated that highly committed faculty were significantly more likely to cite personal investments, support and funding, colleagues, leadership at the departmental or school level, leadership at the institutional level, shared governance, and institutional standing as sources of commitment than were less committed faculty. Sources of alienation of less committed faculty included the work itself, psychological environment, leadership at the institutional level, institutional policy, and personal treatment.

It has been suggested that organizational commitment may affect job performance, absenteeism, and turnover. It is also positively related to individual outcomes such as enhanced feelings of belonging, efficacy, and positive self-image. Organizational commitment is distinct from job satisfaction in that the focus is on the organization as a whole, rather than specifics of a particular job. A stratified random sample of 40 U.S. research university departments representing both hard, soft, pure, and applied fields, was surveyed. The results indicated that the reward-support framework played a meaningful role in determining faculty commitment to their university. However, distinct differences were found between the hard and soft sciences. Faculty commitment to the university also varied across career stages and by level of research productivity.

Medicine
A survey to evaluate job satisfaction was completed by 59 faculty of Army Family Practice Residencies. The faculty derive a greater level of job satisfaction from teaching and patient care, and a lower level of job satisfaction from research and administration. Satisfied faculty (67.8 percent of respondents) valued that they participated in the departmental decision-making process, had a clear job description, had an opportunity for promotion within the organization, and had control of their professional lives. Dissatisfied faculty (32.2 percent of respondents) were more often faculty with less than four years of practice experience. The author suggested that this dissatisfaction might be related to a feeling that the more junior faculty did not control their professional lives, that the departmental goals did not match theirs (and they were powerless to correct the problem due to their junior status), and that the organization had not demonstrated its commitment to the faculty member’s future.

Twelve medical schools with formal faculty development programs were surveyed as to the types of practices used. The most common practices included sabbatical leaves (100 percent), financial support for attending professional meetings (92 percent), periodic evaluations of teaching performance (83 percent), visiting scholarships (83 percent), awards for teaching excellence (75 percent), and dissemination of pertinent publications (75 percent). The least common practices included dedicated time for professional development (eight percent), lighter teaching loads for junior faculty (17 percent), leaves of absence for educational or developmental purposes (25 percent). Workshops for teaching effectiveness were perceived as the most useful by the coordinators of the faculty development programs.

The author examined the background and issues related to a decrease in numbers of young physicians who are seeking careers in academia. In the work environment, the author describes the typical problems of such faculty: difficulty in balancing research, teaching, and patient care; upper administration’s focus on research which skews the faculty person’s participation in teaching and patient care; unclear individualized faculty development plans provided by department chairs; lack of mentors. In addition, prior to assuming faculty positions, many physicians lack formal training in research, thereby making them unprepared to be successful researchers from the start. Based on the author’s critique of the current state of affairs in medical academia, the author urges medical schools to implement an effective mentoring system for new physician-investigators who would be positive and guiding.

The author discourages colleges from setting a two-tiered system of faculty: clinical vs research, as this may further decrease the numbers of successful academic physician-investigators.

These authors surveyed 416 part time faculty at colleges of medicine. Two hundred forty-five faculty responded. Part time female faculty worked an average of 35 hours/week, and split their time between their work and their families. Part time male faculty worked an average of 51 hours/week, and split their time between two jobs. Respondents reported some beneficial changes in the workplace to accommodate part time status of faculty: (i) establishment of a clinician-teacher track, (ii) programs that allowed part time faculty more time to meet promotion and tenure standards. Respondents reported the following disadvantages of part time status: (i) negative perception of colleagues to part time faculty with part time faculty viewed as less committed than full time faculty; (ii) lack of fringe benefits.

A survey of 127 U.S. medical schools was conducted to determine the number and types of parental leave policies. 119 schools responded. Twenty-two percent had no published guidelines for maternity leave, 34 percent had published policy for maternity leave, and 45 percent considered maternity leave as disability or sick leave. Thirty-two percent had a published parental leave policy which dealt with time off for child rearing. Only two percent of schools provided salary to faculty while on parental leave. Seventy-two percent of schools had a policy that stopped the tenure clock for unpaid leaves of at least one year in length, but not specifically for parental leaves. The authors urge that academia develop a better system to support faculty who also happen to be parents. Suggestions for improvement include flexible work hours, part time work for some parents, stopping or prolonging the tenure clock for parental leaves, and hiring part time or temporary faculty to reduce the burden on other faculty when a parental leave is taken.

Describes a statewide, multidisciplinary Faculty Development Center offering fellowships, preceptorships, institutes, workshops, and research opportunities to aid faculty in acquiring teaching, research, and administrative skills. Provides insight into the success of such an approach to strengthen the development of both current and prospective faculty.

Discusses a variety of approaches to prepare family physician faculty members to advance in academia by strengthening teaching or research skills. Training programs ranged from five weeks to two years and were tailored to meet the needs of either tenure- and nontenure-track faculty. A comparison of the outcomes of the various programs notes that of the six variables found to determine faculty scholarship, only one (time spent in research) related to training. The remaining five related to conditions in the workplace, including program affiliation and current position, influence over own activities and organization and encouragement to attend meetings.

A faculty development needs assessment was taken involving 24 generalist faculty members. The faculty members participated in an open discussion of global issues and were asked to complete a 24 item checklist that provided potential goals for
faculty development. Twenty-two of the 24 faculty completed the checklist. The development goals that were of greatest interest to the faculty included, “Teach individuals and small groups in clinic and at bedside,” “Evaluate program effectiveness both formatively and summatively,” and “Establish and maintain a network of professional colleagues in academia.”

The faculty members also identified a few challenges to the provision of faculty development efforts: lack of a rewards system and obstacles to academic success (e.g., lack of mentors, collaborators, staffing problems, minimal funding opportunities), challenges to time and career management (e.g., viewing “faculty development” activities as yet another demand upon their time), collegial isolation of generalist faculty members, a preference for diversity of activity (e.g., although need was expressed to control time more effectively, they did not want either highly focused or overly simplified agendas), and psychological resistance (e.g., faculty development implies that they are “underdeveloped,” little respect and few rewards have often been granted to hardworking faculty).


Two hundred and nine junior faculty in pulmonary medicine were sent surveys to evaluate their attitudes about their future in academia. Seventy five percent responded. Although most respondents were “happy”, they identified several factors which could negatively impact on their continuing in academia. These factors included a lack of time dedicated to research, a lack of direction from department or division chiefs regarding the promotion process and procedures, and a lack of financial security. The authors recommend that these issues be addressed to ensure the success of junior faculty in academic medicine.

Nursing


The authors describe a summer program that freed up nurse educators to work in a clinical setting 24 hours per week and to work on a research project the rest of the time. Extra staff were hired for covering usual service related activities during off time. This program was targeted at rejuvenating a clinical focus in the academic nurse-educator.


The authors describe mid-career residencies for people who are already practicing. These are usually shorter and more flexible programs than typical residencies.

Physical Therapy


The authors surveyed 110 physical therapy programs in the U.S. Only 33 (41 percent) reported that they had a formal faculty development program. The faculty development programs principally focused on research and scholarship (97 percent), teaching (93 percent), and professional activities (90 percent). In the area of research, faculty development programs provided start-up monies for research or internal grants (14 percent), offered sabbatical leaves (four percent), or facilitated expert consultation with faculty on projects (four percent). Funds were provided to faculty so that they could attend professional meetings (96 percent), subcontract consultants or other support services (62 percent), and purchase computer or biometric services (82 percent). The authors urged all institutions to have formal faculty development programs to facilitate the success of their faculty.


The author attempted to identify predictors of job turnover from data collected from two surveys, which were administered to 406 physical therapy faculty and 92 academic program directors. The average turnover rate was 10 percent within a one year period. Among the predictive factors for turnover included fewer years of employment, lower salary, and higher levels of job stress. Female faculty and younger faculty appear to be at higher risk of job turnover. Because increased job turnover rates increase administrative costs and disrupt programs, the author urges that programs be in place to reduce job turnover. Such programs include: (i) faculty development programs, which are targeted at socializing clinicians into academic teaching roles; (ii) development of a clear mission statement for the college and department; (iii) development of job descriptions, annual goals, and objectives for all faculty members; (iv) development of a fair reward structure within the organization, and an orientation program for the faculty to the reward system; (v) use of senior faculty as mentors to assist junior faculty in teaching, and to help reduce teaching work loads of junior faculty who are at highest risk of turnover; (vi) creative development of alternate job schedules that offer greater flexibility in teaching work loads that will allow for release time for scholarly pursuits.

Allied Health


The authors review the status of faculty development programming in colleges of allied health. A survey was sent to 289 institutions and there were 85 usable responses. Colleges were asked to identify the types of faculty development practices in effect at their institutions, and to rate the effectiveness of the programs. The most commonly reported faculty development practices include travel funds for attending professional conferences, periodic reviews of faculty performance, sabbatical leaves, time off for educational or development purposes, and circulation of newsletters or articles pertinent to teaching improvements. Of these, travel funds for attending professional conferences was rated as highly effective. Although student ratings of teaching performance were commonly used, the authors suggest that faculty should be able to consult or work with master teachers, who could provide formal or informal assessments of teaching performance and assist in improvement of teaching skills.

Pharmacy


A survey was conducted of all 74 U.S. schools and colleges of pharmacy. Eighty-six percent responded. Seventy-five percent had a published family leave policy. Of these, 98 percent had a published maternity leave policy, 65 percent had a caregiver leave, 50 percent had a parental leave, and 50 percent had an adoptive leave. Only 30 out of 56 tenure track schools stopped the tenure clock for family leave. Only five percent of schools had a job share option for family returning from a parental leave. The authors hope that this data will stimulate schools and colleges of pharmacy to provide more generous family leave policies to maintain the attractiveness of the field to future employees.


Assuming that institutional support of faculty development programs enhances job satisfaction and hence, retention of faculty, these authors included a listing of methods for faculty development. Methods were categorized into those that enhanced the development of research, teaching, professional and
clinical service, and other skills. These authors urged colleges and departments of pharmacy practice to place as a priority and to initiate an individualized development program commensurate to each faculty member's position, rank, and needs.


A survey was conducted of 457 AACP members to obtain information pertaining to recruitment, development, and retention at their current academic institution. Pharmacy practice faculty rated factors that would influence a decision to leave academia in decreasing order of importance: opportunities for advancement and professional growth, a balance of responsibilities, salary, and an evaluation/reward system. Of all respondents, over 50 percent indicated they would seriously consider leaving academia for a non-academic position offering strong administrative support.

**Dentistry**


The author discusses the importance of vitality among faculty. It is related to opportunity: access to promotions, challenges, and increases in influence, skill, and compensation.


The author discusses the importance of a faculty development program, which focuses on the personal and professional development of a faculty member. The author promotes the need to individualize such programs and puts the onus on the faculty person to design his/her own development program.


Part time faculty play an important role in teaching of preclinical and clinical courses. To increase their commitment to the program, there must be commitment to recognize their efforts through faculty development programs that might include:

- weekly or biweekly instructors meetings.
- involvement in the daily evaluation of student’s projects and participation in the grading of all practical examinations.
- opportunity to give lectures during the year, or presentations or demonstrations to small groups of students to clarify specific points from the lectures.

Part time faculty should be offered benefits for contributing to the teaching mission of the college or university. Examples of such benefits include:

- afternoon study club. Every other week, during the lunch break, selected speakers from the faculty and community are invited to present a one hour seminar to the part time faculty.
- regularly planned social activities.
- frequent one-on-one contact by the college or university with part time faculty members, e.g., personal phone call.
- issuance of a university faculty card, giving them privileges at the intramural athletic building, faculty rates for athletic events or other university activities.


A survey to collect information about the number of tenured faculty and turnover rates of faculty was sent to the deans of 55 dental schools in the United States. Forty (72.7 percent) schools responded. Results showed that a decrease in the total number of full time faculty at dental schools in 1988-89 when compared to 1980-81, when the survey was last conducted. Of the entire body of full time faculty, there was a greater percentage of tenured (as opposed to tenure track) faculty, and a greater percentage of non-tenure track faculty in 1988-89 when com pared to 1980-81. The author suggested that the decrease in total number of full time faculty could be due to several factors: (i) reduction in the number of dental schools over the decade; (ii) increase in number of retirements or early retirements among faculty; (iii) reduction in the recruitment of new faculty due to application of more stringent standards regarding promotion and tenure at dental schools. The faculty turnover rate was 6.6 percent per year. Although most faculty who left their dental school did so because of early retirement, a smaller number switched to private practice or to another dental school. The author urged that dental schools recognize the decrease in faculty numbers and develop programs to prepare more students for careers in academia, so that a shortfall would not occur.

**WOMEN IN PHARMACY**

As the percentage of women in the pharmacy profession has increased, a parallel increase in the number of women in departments of pharmacy practice at colleges of pharmacy can be demonstrated. Knapp has projected a continuous increase in the number of women in pharmacy for the next thirty years, a decrease in the number of full time equivalent pharmacists, and a preference for part time work schedules by women pharmacists(3). Therefore, retention of women faculty in the pharmacy practice discipline may offer a unique challenge. Many suggestions for behavioral changes in the workplace that might facilitate the success of the individual female faculty person have been suggested(4). We will address institutional or programmatic policies or issues.


Although it is commonly believed that prestige and pay scales drop in professions that are predominated by women, the author states that this is probably not true based on an analysis of labor data from 1970-1988. Rather, it appears that prestige and wages dropped before women entered a field in significant numbers. The author promotes a theory known as dual queues, in which employers hire a second choice individual if a first choice individual is not available. Traditionally, white males are considered first choice individuals for many professional positions. As the number of white males entering the pharmacy profession has declined in pharmacy, employers have had to select the “next-best” alternative, hence, more females are entering the pharmacy profession. In addition, the author feels that women have maintained lower pay scales by preferring staff positions, rather than leadership positions by women, the author states that this is probably not true based on an analysis of labor data from 1970-1988. Rather, it appears that prestige and wages dropped before women entered a field in significant numbers. The author promotes a theory known as dual queues, in which employers hire a second choice individual if a first choice individual is not available. Traditionally, white males are considered first choice individuals for many professional positions. As the number of white males entering the pharmacy profession has declined in pharmacy, employers have had to select the “next-best” alternative, hence, more females are entering the pharmacy profession. In addition, the author feels that women have maintained lower pay scales by preferring staff positions, rather than leadership positions by women. This choice may be due largely to the flexibility of hours or more regular schedule of work hours. To encourage more women to assume leadership as opposed to staff positions, the author supports the recommendations of the American Psychological Association, which include that institutions should offer half-time (and full time) internships in focused areas to women who have parenting responsibilities. Such programs would provide the knowledge and skills needed by women in staffing positions to achieve more upper management or higher administrative positions.


The authors surveyed 1000 faculty at schools of pharmacy using the Maslach Burnout Inventory. Four hundred twenty nine (42.9 percent) faculty responded. The degree of burnout was related to certain faculty characteristics: age, gender, faculty rank, tenure status, and salary level. Female faculty appear to exhibit a higher level of burnout. This may be a function of the fact that they are younger, less likely to be tenured, be of a lower rank, have a lower salary, and not be in administrative positions. The authors suggest that the administrative leaders in academia should clearly define the mission of the college, serve as role models, and provide professional support to all faculty, and particularly to young, female faculty.

The authors surveyed 558 full-time female faculty in academic medicine to ascertain the role of mentors in their success. Female faculty with mentors reported publishing more, spending more time in research, and having greater career satisfaction than female faculty without mentors. The authors conclude that senior faculty mentors have an important role in the successful growth of physician educators.

GENERAL RECOMMENDATIONS OF THE TASK FORCE

Based on an analysis of the literature by the Task Force retention of qualified faculty in academia represents a method by which to ensure adequate numbers of faculty within an institution. Retention of faculty is related to both intrinsic and extrinsic job satisfaction factors.

The literature stresses the importance of shared governance and participatory decision making in developing positive commitment to the institution. Colleges should strive to increase faculty participation in decision making through the use of committees and task forces. In addition, faculty should be provided with a means to see how their decisions and recommendations impact the large organization. Moreover, faculty committee decisions should not be disregarded by administration.

Moreover, faculty development programs represent an opportunity for colleges or universities to demonstrate their investment in human capital, thereby enhancing retention of faculty. In assessing such programs that presently exist in health professional institutions, general characteristics include the following:

1. many faculty development programs are informal(7);
2. many faculty development programs are not individualized to meet the needs of a particular faculty member(7);
3. at some colleges or universities, only some faculty members participate in a faculty development program(7);
4. although younger faculty and female faculty members appear to have the highest attrition rates in academia during the initial years after first hire, few faculty development programs are targeted at these individuals. Most sabbaticals or paid-leaves are reserved for senior or tenured faculty(5);
5. although many faculty development programs focus on enhancing research expertise, fewer faculty development programs focus on improving teaching skills or the service-related roles of faculty.

To enhance intrinsic job satisfaction, administrators at colleges and universities should ensure that faculty have:

1. a clear understanding of his/her job description, and that there is a good match between the faculty member’s goals for professional growth and their job description(5);
2. a clear understanding of the mission of the college or university, and that the faculty member’s philosophy of practice is in congruence with that mission;
3. a clear understanding of the promotion and tenure guidelines for the institution so that the faculty member recognizes an opportunity for growth;
4. assurance that the promotion and tenure process is equitable and reasonable, and that there are appropriate opportunities for advancement;
5. a reasonable and well delineated time period for formal socialization of the faculty member into his/her academic niche(5,6);
6. an opportunity to become involved in decision-making at the college or university(6);
7. a formal reward and recognition system for meritorious performance on-the-job;
8. access to a formal faculty development program, which is individualized to the needs of the faculty member.

TASK FORCE RECOMMENDATIONS FOR FACULTY DEVELOPMENT PROGRAMS

The Task Force views faculty development programs as a major method to improve retention of faculty at colleges and universities. In designing an ideal faculty development program, the Task Force suggests that every institution should develop a program that meets the professional growth needs of individual faculty members. The program should focus on all three roles of faculty in the academic setting: teaching, research, and public/clinical service. Key activities to be considered in the faculty development program include the following:

To Improve Teaching Expertise of Faculty

1. Faculty, particularly those with less teaching experience, could be formally linked with emeritus faculty or senior faculty who are viewed as effective educators or master teachers. The latter should regularly meet with the former to discuss issues related to the classroom experience, clerkship preceptorship of students, or curriculum planning issues(8). The experienced teacher could spend a short time on a weekly or biweekly basis to critically observe a colleague who is teaching, and provide feedback to the faculty member.

2. Students and other evaluations of teaching performance should be used in a formal way to improve teaching. Whitman and Schwent(9) have suggested that the evaluations be used by an educational consultant to conduct an examination of a faculty member’s teaching acumen. The evaluation should include analysis of all data, peer evaluations, student evaluations of the faculty member, etc. Upon review of all the data, the consultant should provide a diagnosis and a treatment plan to facilitate improvement in teaching by the faculty member.

3. Formal workshops should be held to provide information to faculty about newer innovative teaching methods to stimulate problem-based learning, to incorporate computer simulations in courses, or to use newer testing strategies. If resources at an individual college or university limit such programming, colleges or universities might invest in the formation of a comprehensive faculty development center in cooperation with other institutions. These centers would have the specific purpose of instituting model faculty development programming in regions of the United States(10).

4. Residencies and fellowship programs should be encouraged to establish formal, assessable teaching development programs for their trainees.

5. Institutional incentive grant programs to encourage teaching innovations may also improve teaching expertise of faculty.

6. Departments of pharmacy practice should consider offering junior faculty a progression of increasing teaching responsibilities over a multi-year period. This would allow junior faculty an opportunity to build confidence and competence in teaching over an extended period.

To Improve Research Expertise of Faculty

1. Colleges and universities should ensure that tenure track faculty have protected time to conduct research. It has been suggested that a minimum of 30-40 percent time be dedicated to this task(11). This may necessitate a reduced teaching load for newly hired faculty, hiring of part time faculty (to fulfill the teaching commitment of the college), etc. Sabbaticals, paid leaves, or paid fellowship programs should be available for faculty at all institutions. The administration should encourage and support faculty participation in such programs.

2. Institutions should encourage new research efforts by providing grant funds for meritorious faculty research projects.
3. Institutions should formally link senior faculty, who are considered successful researchers, with junior faculty, so that the latter can be oriented to the expectations of academia. These linkages would also facilitate networking and provide collaborative support.(12).

4. Institutions should provide tuition reimbursement to faculty when they register for university-level coursework which would facilitate their success in research, e.g., research methodology, specialized statistics, research ethics, etc.

To Improve Service Expertise of Faculty

1. Institutions should hold meetings or workshops at regular intervals to discuss methods for enhancing the provision of pharmaceutical care. Faculty who have established innovative practices should be invited to share their experiences with other faculty. Consideration should be given to having the meetings or workshops be multidisciplinary in nature, involving a variety of health professions.

2. Colleges and universities should encourage the demonstration of excellence in pharmacy practice, e.g., professional society fellowship designation, national recognition in their field. Once a faculty member has been so recognized, the individual should be formally rewarded by the college or university.

3. Colleges and universities should provide at least partial funding for a faculty member to attend a minimum of one professional meeting/year focused on the individual’s professional growth. The faculty member would not be required to make a presentation at the meeting in order to receive funding. Attendance at the meeting would also allow the faculty member to obtain ideas that can be used to enhance research or scholarly productivity.

4. The Association should assess the feasibility of developing a standardized policy for dealing with legitimate requests for parental leave or tenure roll back, that would not adversely affect a faculty member’s professional growth within the institution. Such a guideline, when developed, could be adapted by colleges or universities. By using a standardized policy, faculty retention at a particular institution might be enhanced.

5. The Association should assess the feasibility of developing guidelines for co-shared part-time faculty positions, including benefits and responsibilities, that could be adopted by colleges or universities. By using a standardized guideline, faculty retention at a particular institution might be enhanced.

6. Departments of pharmacy practice should carefully monitor and advise junior faculty on the amount of time to spend on committee and student advisement activities. Many faculty, particularly minority faculty role models, may be “overserviced” in their commitments to these areas.

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