SHORT COMMUNICATION

Motivators and Incentives of Pediatric Medical Educators in an Academic Hospital Setting in the United States

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ABSTRACT

Graduate medical education (GME) has undergone a phenomenal transformation aimed at aligning medical education and the learning environment with educational outcomes and quality patient care. The Accreditation Council for Graduate Medical Education (ACGME) has challenged faculty to adapt novel teaching methodologies. However, there are limited studies about motivational factors that impact pediatric graduate medical educators. This article brings an insight to these motivators from the perspectives of teaching and clinical pediatric educators at an academic teaching hospital.

Key words: Graduate Medical Education • GME • Pediatrics • Medical Educators • Clinical Teachers • Motivators • Incentives • Hospital • Faculty
1. Background and Introduction
Graduate medical education (GME) has undergone a phenomenal transformation aimed at aligning medical education and the learning environment with educational outcomes and quality patient care. The Accreditation Council for Graduate Medical Education (ACGME) has challenged faculty to adapt novel teaching methodologies to accommodate the different learning modalities of the next generation of physicians. The ACGME Next Accreditation System (NAS), is designed to emphasize quality, educational and clinical accountability, and advance medical education (Table 1). The goal of these efforts is to improve physician educational outcomes and performance through a process of continuous evaluation of six competencies during training. However, variation among clinical teachers is one of the barriers against standardization. Like others medical educators, pediatric faculty educators are faced with demands for increased clinical productivity leaving less time to commit to professional development and scholarship. On the other hand, scholarly activities may be one of the most effective ways to learn and practice evidence based medicine (EBM). Previous studies have identified intrinsic issues such as altruism, intellectual satisfaction, personal skills and truth seeking as the main factors influencing motivation to teach medical students. However, these studies relatively had less impact, but extrinsic factors such as rewards or recognition were also motivators. The key barriers avoiding the clinicians from teaching were decreased productivity, lack of compensation, increased length of the working day, concerns about patients, ethics, and lack of confidence about their personal skill. Bartle and Thistlethwaite (2014) identified six key themes in motivation for career choice and wanting to provide better education: personal goals, expectations and the need for self-direction, the influence of role models, defining one’s identity, support networks and the need for research as a potential barrier to pursuing an educational career.

2. Methods
In 2015, we conducted semi-structured face-to-face interviews and focus groups study with 10 board certified medical educators (faculty from eight disciplines who have clinical and educational responsibilities) in pediatrics. Responses were audio recorded. Content analysis was used to establish themes, patterns and trends for motivators and incentives.

3. Results
Our findings have shown that emergent action is needed for the following themes (Table 2).

4. Conclusions and Implications for Translation
The findings from this study have a number of implications for practitioners, medical educators, medical institutions, and for patient outcomes.

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Table 1: The pediatrics milestone project a result of the next accreditation system

<table>
<thead>
<tr>
<th>ACGME competencies</th>
<th>Total number of sub-competencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient care</td>
<td>5</td>
</tr>
<tr>
<td>Medical knowledge</td>
<td>1</td>
</tr>
<tr>
<td>Systems-based practice</td>
<td>3</td>
</tr>
<tr>
<td>Practice-based learning</td>
<td>4</td>
</tr>
<tr>
<td>Professionalism</td>
<td>5</td>
</tr>
<tr>
<td>Interpersonal &amp; communication skills</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>20</td>
</tr>
</tbody>
</table>

Table 2: Emergent themes from interviews with pediatrics faculty

- Protected time for scholarly work development
- Need for resources:
  - Mentorship from senior staff
  - Support with manuscript preparation
- O Research design, methodology, statistics
- Recognition and reward
- Collaboration across disciplines
- Culture of prioritizing clinical revenue over scholarly development
- Focus of previous medical program
- Intrinsic love for teaching
- Self-motivation
Overall, pediatric faculty educators strived for increased scholarly and educational throughput, but perceive success only if appropriate support systems were in place. The following strategies were recommended to help achieve this goal:

- Required faculty development in time management/efficiency.
- Establishment of a formalized mentorship program

Although the study had limitations such as small sample size, limited range of disciplines, and involving a single institution, it is still helpful to have a view of the motivators and inceptors.

**Ethical Considerations**

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**References**