



EARLY CAREER COACHING PROGRAM

**A Faculty Development Program at
University of Utah Health**

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ABOUT THE PROGRAM

The Early Career Coaching Program provides coaching to University of Utah Health early career faculty to cultivate a successful academic career. Early career faculty often do not have explicit guidance to effectively manage the course of their career and professional development. Early career attention is often dedicated to technical skills, such as clinical care or education. Individuals often react to program needs and available opportunities, but neglect deliberate planning and execution. Departments and divisions often struggle to implement effective coaching and mentoring programs because of a lack of resources and process expertise. This program facilitates early career faculty to develop their academic career with clarity and purpose.

The Faculty Professional Coaching Program will pair a senior faculty member in a coaching capacity with an early career faculty member to complete a systematic process for professional identity development and career planning over a six-month period. This program has been structured to allow meaningful engagement between a coach and coachee with minimal additional training.

PROGRAM GOAL

The program goal is to increase participants' clarity on professional direction, satisfaction, self-efficacy, academic productivity, promotion, and sense of community within the University of Utah.

OBJECTIVES OF THE COACHING PROGRAM

Early career faculty who complete the program will:

- **Demonstrate increased self-awareness and self-efficacy in their professional trajectory**
- **Define goals supported by planning and skills development that build toward an overarching career vision**
- **Connect with mentors and colleagues to develop a professional network and sense of community**



AN INTEGRATED APPROACH

This program will apply an integrated approach to the development of early career faculty. Faculty will develop clarity in their professional identity and intent, then translate this intent into an actionable plan with goals. This process will be accomplished through personalized coaching by a senior faculty member.



PROFESSIONAL IDENTITY DEVELOPMENT

Through the course of their medical education, trainees navigate from merely “acting” the role of the physician to developing a more intimate understanding of what it means to be a physician. (Jarvis-Selinger et. al, Acad Med 2012; 87:1185-1190) Professional identity development is an evolving process asking, “Who do I intend to be?” It includes an inward appreciation of one’s values and strengths as well as the ability to understand how one is perceived. In the context of academic healthcare this includes not only knowing one’s career purpose but also recognizing how that fits into the academic role/mission, e.g. “Because I’m here in the academic setting, how do I enjoy those benefits while also being true to the purpose of the academic institution?”

Even as a faculty member, understanding one’s values, strengths, and perception by others increases one’s effectiveness. Exploring the question, “Who do I intend to be?” allows an authentic understanding of one’s career purpose. Appreciating and cultivating the academic role will enhance faculty’s personal benefit from an academic career and reaffirm the role an academic career plays within one’s career purpose.

TACTICAL CAREER PLANNING

Once career purpose is clear, a thoughtful plan can be designed. Coaches will assist faculty in identifying and making key choices (e.g. clinician, researcher, clinician investigator, educator), and assist in prioritizing activities, resource identification, navigating obstacles, and developing an action plan.

THE ROLE OF COACHING

First and foremost, the coach is a faculty member with academic experience and an interest in facilitating the growth of early career faculty. The coach will listen, provide empathy, and explore details through clarifying questions. Through a seasoned perspective, the coach will share advice, strategies, and insights in navigating early career challenges and opportunities. The coach will address wellness and strategies to respond to being overwhelmed. The coach will hold coachees accountable when necessary and challenge coachees to consider a broader (or more focused) approach as the situation requires.

Coaching

Partnering with clients in a thought-provoking and creative process that inspires them to maximize their personal and professional potential.

- International Coaching Federation definition of coaching



COACHING & MENTORSHIP

Professional coaching is a relatively new tool in academic medicine. Although it has long been utilized in business, coaching in academic medicine is gaining momentum as a powerful tool for early career faculty. Although most early career faculty have had mentors, likely few have benefited from a professional coach. Coaching and mentoring are inherently different. Mentoring is usually a long-term relationship with binary expectations and responsibilities that focuses on specific advice. Coaching is a limited engagement specifically designed to facilitate reflection on identified values and goals within the context of institutional resources relationship that aims to help coachees define goals and improve performance and career trajectory.

In addition, specifically for early career faculty, a coach can assist in expanding one's professional network, both internal and external to their department, to increase career opportunities. Coaching can help faculty develop national and perhaps international presence. Through their career, faculty need both coaching and mentorship.

While all of these activities benefit the coachee, the benefits to coaches are many, and frequently overlooked. Insights from the coachee often resonate for the coach. Coaching expands the coach's network directly and sometimes also as a result of connections made through the coachee. A successful coaching engagement is rewarding and brings a sense of satisfaction and purpose to the coach.

ADVISING VS. COACHING VS. MENTORING VS. SPONSORSHIP

Although we commonly interchange these terms, the activities can be distinguished from each other as depicted in the chart below. There is a continuum across categories and the activities can overlap, as when a mentor acts as a sponsor for their mentee. The advising relationship is often the shortest, whereas mentoring and sponsorship are typically long-term. Advising is focused on giving direction related to a specific event or need. The advisor can often provide the advice in a single session, or in a series of separate but related meetings (as with a residency advisor). The engagement is targeted and often assigned; the advisor is in control and provides advice to the learner, with input from the learner on preferences and needs.

	Advising	Coaching	Mentoring	Sponsorship
Focus	Specific Event	Task/Skill/Identity	Career development	Career development
Control	Advisor	Coachee directed	Mentor directed	Sponsor directed
Timeline	Single session or time limited	Time limited	Usually long term	One-time or long term
Strategy	Give advice	Help learner through asking clarifying questions	Give information based on own experience	Actively advocated for access to opportunities

Coaching is a coachee-directed, time-limited engagement aimed to facilitate coachees development of their professional identity and strategies to achieve their own goals. The coach uses open ended questioning to draw out coachee tasks and goals. Mentoring is usually a long-term relationship that draws upon common career or specialty paths in which the mentor is delivering wisdom and experience to the mentee, taking into account the mentee's goals and preferences. Mentors often provide advising, coaching, and sponsorship at different times during the relationship, but a coaching engagement is more focused and driven by the coachee. Sponsorship is a relationship in which the sponsor uses their influence and network to champion an individual for opportunities. Sponsorship has direct and immediate value to the recipient. It is also the highest risk activity, since the sponsor's reputation depends on the success of the individual they sponsor. While sponsorship may be short-term and related to a single opportunity, it is more often a long-term, mutually beneficial relationship.

PROCESS COACHING

This program is about coaching early career faculty and will not focus on advising, mentorship, or sponsorship. Although a coaching relationship may evolve over time into a mentoring relationship, that is beyond the scope of this program. In this context, coaching is about drawing goals and ideas from the coachee to support the alignment of career decision-making with the coachee's values and goals.

The coach and coachee will enter into an agreed upon engagement that incorporates reflection, one-on-one meetings, and worksheets. In this context, coaching is about supporting the coachee to improve this alignment through:

- Active listening/asking questions
- Clarifying professional intention
- Prioritizing perspective over giving advice
- Facilitating the development of professional goals and a plan to achieve those goals

THE ROLE OF THE COACH

One of the most important elements of a coaching relationship is that the coachee should be the director. This is not to say, however, that the coach has an unimportant role. The coach has the wisdom and expertise to facilitate the coachee's consideration of personal values, goals, and intentions. The effective coach:

- Provides a positive presence and a "can do" attitude
- Actively listens and asks questions to clarify professional intentions
- Provides useful perspective regarding navigating the early academic career.
- Facilitates the development of professional goals and a practical plan to achieve these goals
- Creates a comfortable and secure environment for self-reflection
 - Promises and maintains confidentiality
 - Limits judgment
 - Focuses on the coachee not the coach
 - Demonstrates vulnerability (e.g. coach willing to share about their life)
 - Communicates authenticity
- Explores the receptivity of the coachee to persevere along a certain path
- Respects the choices of coachees and recognizes that they are ultimately responsible for their own life and career path
- Commits to a short-term engagement (e.g. 6 months) to help launch the coachee career trajectory
- Recognizes their own limitations as a coach, both professionally and personally, and knows when to refer the coachee to appropriate alternate resources.

THE ROLE OF THE COACHEE

The coachee is pursuing coaching to clarify career purpose and plan, with the investment of a faculty coach. Above all, the coachee must be authentically engaged. The successful coachee commits to:

- Be honest, transparent, and authentic
- Demonstrate a willingness to show vulnerability
- Articulate professional goals (and recognize areas that are not of interest)
- Show initiative during coaching meetings (active role)
- Commit the time and energy to coaching activities
 - Come prepared to the meetings (with intention), having completed assignments
 - Use the time with the coach productively
- Be professionally considerate of the coach
(it is better to postpone a meeting than come ill prepared or distracted)



PROCESS AND COACHING MODULES

There are twelve modules that constitute the “curriculum” of the coaching program. It is recommended that coaching dyads complete most of the modules within the 6-month engagement. If coaching dyads stay generally within the curriculum, they are also free to address items and activities outside of the curricular modules.

The modules are sequenced in the recommended order that they should be completed, with the exception of Module 3, which should be completed at the end of the coaching engagement. Dyads have the flexibility to engage the modules in the order that they wish. **It is highly recommended that coachees do reflective work in between sessions in order to make more effective use of the coaching time.**

The following is the summary of the process of the coaching program.

COACHING SECTION

	Recommended Timing	Notes
Module 1: Ground Rules	Initial Meeting	
Module 2: Session Planning	Initial Meeting	
Module 3: Conclusion	End of Coaching Engagement	

PROFESSIONAL IDENTITY SECTION

	Recommended Timing	Notes
Module 4: Meaning	Within First Three Months	Complete 4a before first meeting
Module 5: Community	Within First Three Months	Complete 5a before first meeting
Module 6: Purpose	Within First Three Months	Complete 6a before first meeting
Module 7: Knowledge	Within First Three Months	Complete 7a before first meeting
Module 8: Culture	Within First Three Months	Complete 8a before first meeting
Module 9: Skills	Within First Three Months	Complete 9a before first meeting

CAREER PLANNING SECTION

	Recommended Timing	Notes
Module 10: Priorities	Second Three Months	
Module 11: Milestones	Second Three Months	
Module 12: Time Mgmt	Second Three Months	
Meeting with Fac Dev Office	Any Time During the Coaching	

OTHER SUPPORT PROGRAMMING

	Description
Additional Books	Solving for Why, Strengths Based Leadership
Optional Sessions	Career Management Topics, Peer Coaching
360 Degree Eval	If interested, please inquire or request

DETERMINING GROUND RULES AND COMMITMENTS

Every coaching engagement should have an initial meeting in which the coach and coachee develop and agree upon expectations and ground rules and identify the values and goals of the coachee. The coaching program establishes a relationship between a coachee and a coach that is designed to explore the innermost facets of “who we are” and “who we want to be”. This understanding is necessary for clarity in determining one’s career trajectory. This exploration is inherently vulnerable and requires that both the coach and coachee handle this exploration with care.

- **VALUES.** Values are not achievements but rather what we most want to stand for in life
 - Respect for the choices made by the coach and coachee is essential
- **GOALS.** Humans are inspired by goals. As goals can be achieved, they are motivating. Ideally, goals stem from underlying values and define skills and steps needed to make progress
 - The Faculty Coaching Program is a time-limited engagement (6 months)
 - Upon conclusion of the program, faculty will have completed coaching modules and developed a career plan
- **COMMITMENTS.** These are the agreed upon responsibilities: the act of pledging or engaging one’s self
 - Honoring the intent of commitments is important
 - Making a commitment of time and availability
 - Confidentiality of information shared by both parties is of paramount importance
 - If issues arise beyond the scope of the coach’s expertise, the coach should refer the coachee to the appropriate resources

POINTS OF MUTUAL AGREEMENT

What are the stated needs of the coachee?

What is the “gift” of the coach?

POINTS OF MUTUAL AGREEMENT (CONTINUED)

What are the key desired outcomes of the coaching engagement?

What commitments does the coach make? (incl. How does the coach like to coach?)

What commitments does the coachee make?

Other agreements:

PLANNING THE SESSIONS

At the beginning of the coaching process, the coach/coachee dyad should establish logistical expectations (meeting times, assignments, communication preferences, etc.). As an overarching goal, at the conclusion of the coaching engagement, the coach/coachee dyad should have completed all or a significant majority of the modules of the program. The dyad should:

- **Determine a timeline to accomplish all program modules**
- **Establish a meeting schedule to support the timeline**
- **Establish an agenda for each coaching session**
- **Expect the coachee to send a summary and next step after each meeting**

CHECKLIST

- When are we going to meet?
- Where will we meet?
- How will we best communicate with each other?

COACHING SESSION AGENDA

Month 1

Time / Date / Location

Notes:

Agenda:

COACHING SESSION AGENDA (CONT'D)

Month 2

Time / Date / Location

Notes:

Agenda:

Month 3

Time / Date / Location

Notes:

Agenda:

Month 4

Time / Date / Location

Notes:

Agenda:

COACHING SESSION AGENDA (CONT'D)

Month 5

Time / Date / Location

Notes:

Agenda:

Month 6

Time / Date / Location

Notes:

Agenda:

Month 7 (If Desired)

Time / Date / Location

Notes:

Agenda:

CONCLUSION AND NEXT STEPS

The final meeting is an opportunity to revisit the original goals of the coachee, review progress, celebrate successes, and determine the relationship after the end of the engagement.

Upon completion of the coaching program, the coachee should have a map of the milestones to accomplish their career goals. While the coachee's learning during the engagement is important, the most important outcome is the coachee's short- and long-term goals and plans. The coaching engagement is time-limited to 6 months. However, the coach/coachee dyad can arrange for follow-up check-ins after the formal coaching engagement is complete, based on mutual agreement (three months, six months). The dyad can also explore changing the nature of the engagement, for example from coaching to mentorship or ongoing coaching engagements, based on mutual agreement and goals.

What did the coaching dyad set out to do?

What were the key learning and outcomes of the coaching engagement?

What future engagement/contact is mutually agreed to?

SPECIAL CONSIDERATIONS IN COACHING

COACHING SOMEONE IN YOUR OWN DEPARTMENT OR PROGRAM

Confidentiality is a cornerstone of coaching. It requires special attention when the coach and coachee are in the same department, program, or other smaller organizing structure. The coach, as a senior faculty member, will have a vote in the coachee's promotion, for example, and may have input into decisions in the unit that affect the coachee. It is important to review this potential conflict of interest at the first session. In order to ensure the necessary trust required for a successful coaching engagement, ground rules for confidentiality should be discussed and established during the first session. Both coach and coachee must commit to keeping information shared as part of a coaching session completely confidential. It is worth reviewing this commitment at the beginning of each coaching session.

COACHING WOMEN AND INDIVIDUALS FROM UNDERREPRESENTED GROUPS AT UNIVERSITY OF UTAH HEALTH

"Having a seat at the table does not mean having a voice." - Brittany Karford Rogers

BARRIERS TO ADVANCEMENT

Women and individuals from underrepresented groups, including people of color, LGBTQ+ individuals, and individuals with disabilities, face barriers to advancement in academic healthcare beyond those encountered by all faculty members. Unconscious bias and discrimination have been shown to affect their assessment for appointment and promotion and may limit access to opportunities. Women are often judged on accomplishment rather than potential, so they may be overlooked for opportunities they could grow into. Their ideas, hard work, and accomplishments may not be recognized and rewarded. Repeated microaggressions may be distracting and reduce their sense of belonging. The imposter syndrome can contribute to lack of confidence and sense of belonging.

While these barriers require a system-level solution, there are actions individuals can take in the meantime, including learning to more effectively self-promote, recruiting sponsors, and actively seeking positions and opportunities. Coaches can have a large impact by encouraging women and individuals from underrepresented groups to develop and practice skills in these areas, to promote themselves, and to take some risks to facilitate career advancement. The Office for Health Equity and Inclusion (<https://uofuhealth.utah.edu/inclusion/>) is a resource in the School of Medicine that can help address these issues.

When coachees raise more serious concerns, including discrimination or harassment, they should be referred to the Office of Equal Opportunity and Affirmative Action (<https://oeo.utah.edu/>). As a reminder, faculty are defined under the Clery Act as responsible employees (mandatory reporters) and are required to report sexual misconduct to OEO (<https://sexualassault.utah.edu/reporting/mandatory-reporters/>).

WORK-LIFE BALANCE

Academic healthcare is demanding but there are also opportunities for flexibility. People can be creative and design a career to fit their own preferences for work-life balance. This balance is different for everyone and often changes over time. Life events, such as parental leave, personal illness or injury, caring for an elderly parent, or outside pursuits, can affect career opportunities or promotion. Coaches should encourage coachees to learn the rules for their division or department, since they are not uniform across the departments and schools. This will help individuals reflect on their priorities within the context of their positions.

Some prefer a clear delineation between career and other aspects of their life. Others choose to integrate their two worlds. Coaches can help coachees develop priorities and consider how they may change over time, as well as identify ways to achieve their goals while honoring those priorities. Desirable opportunities may become available at an inopportune time, such as during a parental leave. Coaches can facilitate brainstorming of creative solutions or requesting resources (i.e. a research assistant or grant writer) that can be used to negotiate an approach that allows the coachee to take the opportunity.

CAREER ADVOCACY

As outlined in brief, professional women and individuals from underrepresented groups face unique challenges as they seek advancement throughout their careers. Coaches can be particularly valuable when they are cognizant of these challenges and versed in approaches to overcome them. In particular, these coachees benefit from role models who provide motivation and vision (see it, be it) as well as networking with other successful individuals who share common characteristics. These networks establish friendships that provide support and understanding but also, importantly, provide an advocacy structure throughout the institution. Role models and advocates must be actively sought (and can be hard to find). WIHMS (Women in Health, Medicine, and Science) is one potential resource for women. Coaches should encourage each individual to find their own unique support structure as they personalize their career path and set milestones.





Professional Identity

"We are what we imagine ourselves to be"
-Kurt Vonnegut

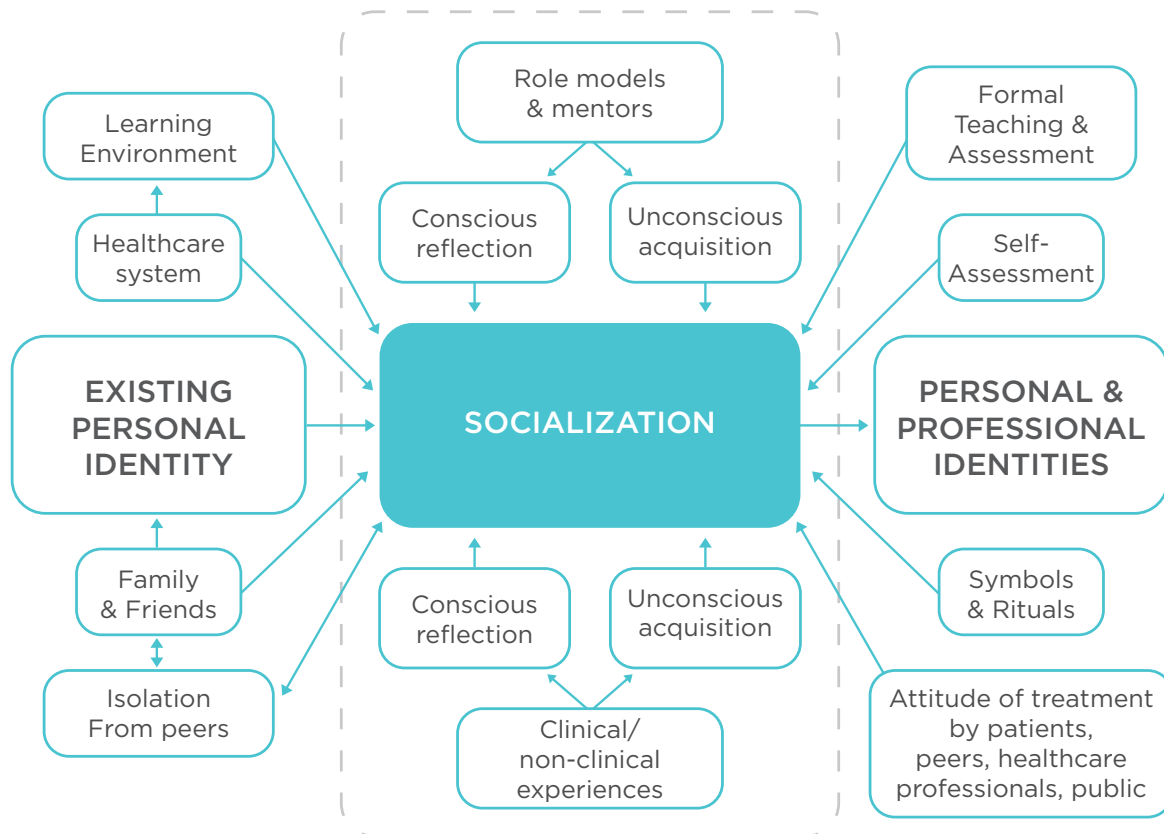
PROFESSIONAL IDENTITY

Professional identity formation includes the development of a set of internal standards, aspirations, and ongoing self-reflections that regulate a professional's work (Holden et al. Acad Med 2015; 90:761-7). Such a process will “deepen one’s commitment to the values and dispositions of the profession.” (Irby et al. Acad Med 2010; 85:220-7) Personal attributes and commitments important in the development and maintenance of physician professionalism include humility, servant leadership, self-awareness, kindness, altruism, attention to personal well-being, responsibility, concern for patient safety, lifelong learning, self-regulation, honesty, and integrity. (Chestnut. Anesthesiology 2017; 126:780-6)

“Professionalism requires character, but character alone is not enough. We need others to help and encourage us. And in turn, as physician leaders, we help shape the culture of professionalism in our practice environment. Professionalism is not something we learn once, and no physician is perfectly professional at all times, in all circumstances. Professionalism is both a commitment and a skill—a competency—that we practice over a lifetime.”

(Chestnut. Anesthesiology 2017; 126:780-6)

At first glance the concept of professional identity may seem intuitive; e.g. I aspire to become a/an _____ (insert chosen specialty) and after completing the seemingly endless marathon of training I will become a/an _____ (insert specialty including appropriate descriptors). However, the journey is a complex, dynamic process that is often ignored. Previous life experiences followed by accumulated influences impact how one’s professional identity will look. If attention is not paid to the concept of professional identity development, then the professional identity one develops will largely be based on inadvertent molding by other people and circumstances, and not formed and developed from within.



A schematic representation of the multiple factors involved in the process of socialization in medicine. The large center box surrounded by the dotted line, which includes role models and mentors and experiential learning, indicates their importance to this process. The direction of the arrows from existing person identities to personal and professional identities indicate the dynamic nature of this process.

Cruess et al. Acad Med 2015;90:718-25

SELF-AUTHORSHIP

The goal of professional identity formation is to promote 'self-authorship'. These concepts are much like two sides of the same coin. Self-authorship is about making choices based on internal values rather than from external authority or social pressure. However, the development of professional identity within medicine and healthcare inherently requires recognition of societal and professional behavioral norms.

Although there is clearly some foundation of one's professional identity at the end of training, early career faculty often receive little support for their professional identity development, along with strong external pressure to develop in a certain way. Additionally, academic healthcare is a place where there are many professional choices, and it is important to develop a strong internal sense of identity to navigate those choices (e.g. what do I want versus what does my mentor want for me?).

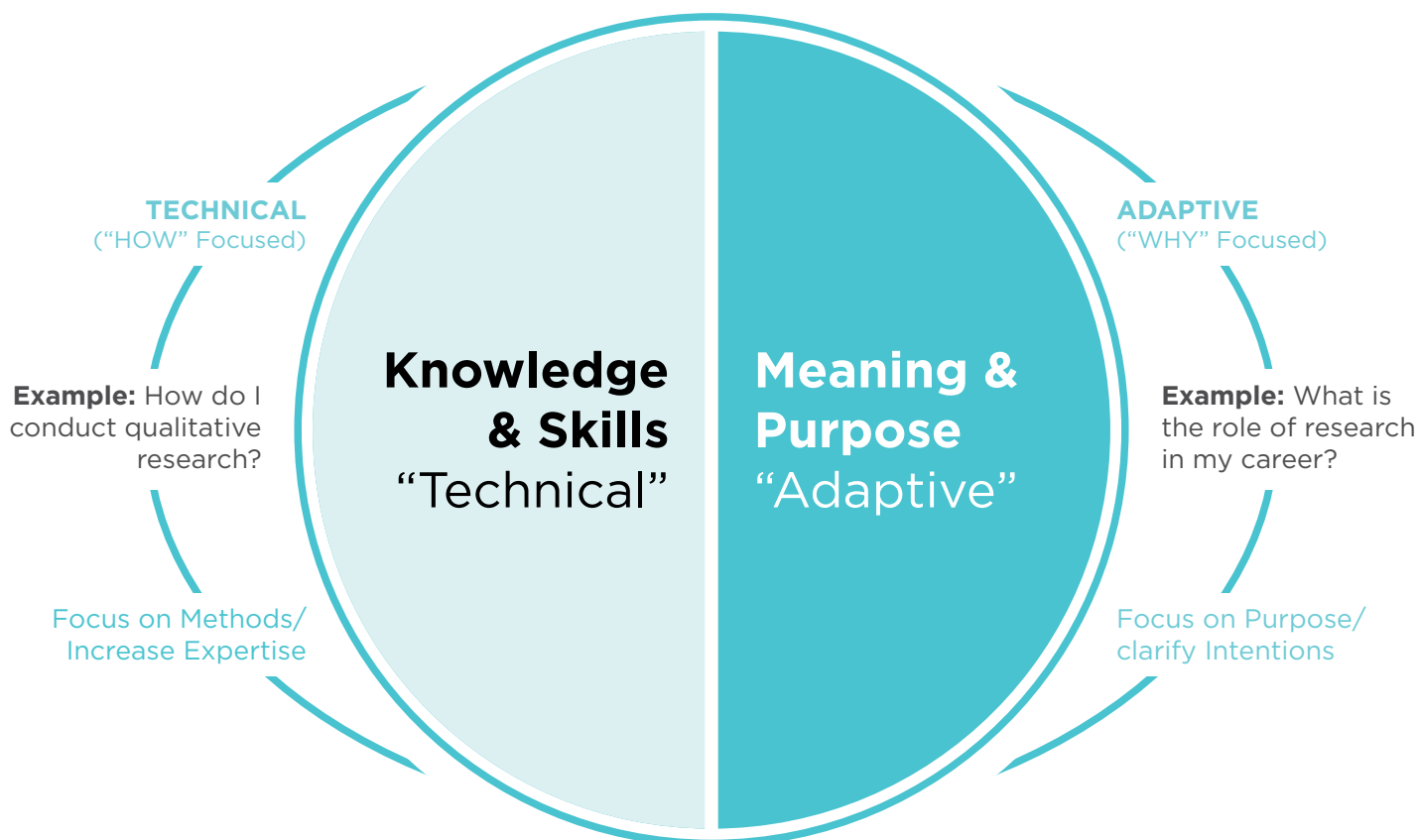
Professionals need:

- **An internal belief system that allows them to consider but not be overwhelmed by external influences**
 - **A coherent identity that builds confidence to act on wise choices**
 - **Mature relations to collaborate productively with colleagues.**
- (Magolda, Three Elements of Self-Authorship. Journal of College Student Development 49:269-284, 2008)

TWO HALVES: INTEGRATING THE TECHNICAL & ADAPTIVE

Navigating the choices in a career requires mastering two types of challenges: HOW do I do something? (technical) and WHY should I do something? (adaptive). Often in medicine and healthcare these are confused. (Heifetz 2018) Medical training is tilted towards the technical. Therefore, our tendency is to ignore the adaptive 'WHY?'. However, adaptive challenges cannot be addressed by using technical methods. Both are necessary and distinct. The coaching program will consider both sides, the technical and the adaptive.

What distinguishes the "work" of a physician from "being" a physician?



THREE DOMAINS OF SELF-AUTHORSHIP

When we choose an academic career, there are multiple trajectories to pursue, though whether we spend the majority of our time in the clinical, research, or teaching realm, the motivation and ambition that have fueled our professional successes thus far merit self-reflection. A momentary pause to consider the “why” behind what we do can ensure our future efforts align with our current goals and values, if not in our immediate reality, at least in the long-term forecast of where our efforts are taking us. It is this interface between where we are and where we want to go that inspires this self-authorship section.

Knowing where to go inherently necessitates knowing where we are. Understanding “where we are” involves recognition of the following three domains:

Extrapersonal: The personal and professional realities of your current existence.

- This includes your degree of mastery based upon the depth of your knowledge and the constraints and opportunities present in your personal and professional environment.

Intrapersonal: OUR identity; OUR belief system

- This is originally derived from childhood upbringing, before your values are influenced by your own awareness. Through maturation, your intrapersonal domain becomes distinctly yours as it develops beyond the reflection of the opinions and values of those around you.

Interpersonal: relationships with others

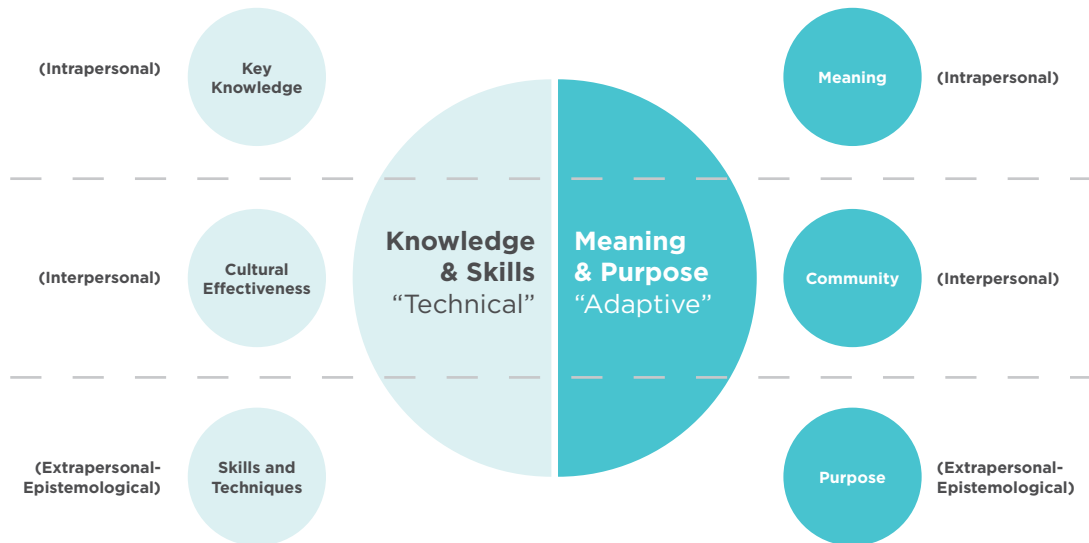
- The Self-Authored person may consider their own interest and acts in ways to support relationships with others while recognizing how these actions may or may not be fully in line with their own goals.
- To what extent do you define your identity by your relationships with others and judge yourself by the degree to which you fit in? The more self-authored person will not necessarily be persuaded by what others think of them.

Self-Authorship is the balanced integration of all three components. Such balanced integration may be a challenge within the field of medicine and healthcare where significant emphasis is placed on the extrapersonal component of medical knowledge and skill development.



THE SIX THEMES: TWO HALVES X THREE DOMAINS

If we take the technical versus adaptive halves and combine them with the three domains of intrapersonal, interpersonal, and cognitive, we have a 2x3 model with 6 themes. The goal of the program is for coaches to facilitate reflection and formation of intention around these 6 themes.



THE ADAPTIVE HALF

The components of the Adaptive Half make up one’s unique meaning and purpose in life and in the context of this discussion, “How are these fulfilled with a career in academic healthcare?” To answer this question of meaning and purpose it is helpful to explore one’s values and strengths and to reflect not only on how you see yourself but on how others see you and how you want to be seen. (Tsai. Solving for Why. 2018) Most also choose a career in academic healthcare because of the opportunity to become part of the larger community of medicine and healthcare: what will I give back? Working to define these concepts then gives way to a larger purpose. Most matriculating medical students have a general sense of what this purpose is. Revisiting this purpose upon completion of training is an important strategy for establishing self-authorship as an early career faculty member.

Modules 4a through 9a will focus on self-authorship. What are your values, goals, and purpose? What knowledge and skills are required to achieve them?



MEANING (INTAKE)

Values, Strengths, Self-Awareness

MEANING

Values: *What matters most?*

	1 Disagree	2	3	4 Neutral	5	6	7 Agree
I have a strong sense of my priorities							
I live my life in line with my priorities							

Value Notes	Related Concepts Resilience Work-life balance Professional ethics
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Strengths: *What are my strengths?*

	1 Disagree	2	3	4 Neutral	5	6	7 Agree
I know my unique talent							
I get to use my talents at work every day							

Strengths Notes	Related Concepts Job crafting Professional ident. Job satisfaction
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Self-Awareness: *How do I see myself and how do others see me?*

	1 Disagree	2	3	4 Neutral	5	6	7 Agree
I reflect often about who I am							
I often seek feedback from others about how they see me							

Self-Awareness Notes	Related Concepts Learning Self-development Professional ident.
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MEANING (DEVELOPING INTENTION)

Values, Strengths, Self-Awareness

Values: *What matters most?*

- Consider why you chose to be a healthcare professional
- Consider your highest priorities and values, personal and professional
- Consider the type of life you want to live
- Consider your personal definition of a good physician

Strengths: *What are my strengths?*

- Consider your Strengths Finder results (and other assessments)
- Consider your own observations about how you excel relative to your peers
- Consider the kinds of (professional) activities which you enjoy

Self-Awareness: *How do I see myself and how do others see me?*

- Consider how you would describe yourself and what you want to be known for
- Consider your narratives and limiting beliefs
- Consider your attitudes towards learning and growth

Meaning: *What kind of person do I intend to be?*

First complete the answers to Values, Strengths, and Self-Awareness and come back to this question. The answer is a synthesis of the Values, Strengths and Self-Awareness sections.

COMMUNITY (INTAKE)

Network, Relationships, Communication

COMMUNITY

Network: Who do I need to know?

	1 Disagree	2	3	4 Neutral	5	6	7 Agree
I have a strong and vibrant professional network							
I spent a lot of time developing my network							

Network Notes

Related Concepts

Networking
Community / Tribe
Cultivating Mentors

Relationship: How do I build trusting relationships?

	1 Disagree	2	3	4 Neutral	5	6	7 Agree
I know how to deal with challenging people							
I am very committed to helping others succeed							

Relationship Notes

Related Concepts

Collaboration
Building Trust
Cultivating Mentors

Communication: How do I communicate with influence?

	1 Disagree	2	3	4 Neutral	5	6	7 Agree
I am very honest and candid in my communications							
I am very empathetic and compassionate in my communications							

Communication Notes

Related Concepts

Written Comm.
Verbal Comm.
Giving Feedback

COMMUNITY (DEVELOPING INTENTION)

Network, Relationships, Communication

COMMUNITY

Network: *Who do I need to know?*

- Consider the scope and composition of your network you intend to build
- Consider the type of people who you will work closest with (mentors, peers, community)
- Consider people outside your field who you may be helpful to connect with

Relationship: *How do I build trusting relationships?*

- Consider how you plan to “be” with other people
- Consider how to give from your area of strengths
- Consider how to develop rapport with others (incl. patients)

Communication: *How do I communicate with influence?*

- Consider your core message
- Consider your preferred setting for communication
- Consider the channels of communication you intend to engage

Community: *How will I show up for others?*

First complete the answers to Network, Relationship, and Communication and come back to this question. The answer is a synthesis of the Network, Relationship, and Communication sections.

PURPOSE (INTAKE)

Mission, Goals, Process

PURPOSE

Mission: What am I committed to that is greater than myself?

	1 Disagree	2	3	4 Neutral	5	6	7 Agree
I have a strong sense of mission in my life							
My professional activities are well aligned with my mission							

Mission Notes	Related Concepts Professional Ident. Change Mgmt. Saying No
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Goals: How do I define success?

	1 Disagree	2	3	4 Neutral	5	6	7 Agree
I have well-defined short-term goals (< 5 years)							
I have well defined long-term goals (> 5 years)							

Goals Notes	Related Concepts Vision Change Mgmt. Professional Dev.
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Process: What is my next step?

	1 Disagree	2	3	4 Neutral	5	6	7 Agree
I have strong habits and routines to manage myself							
I know what I need to be doing now to achieve my goals							

Process Notes	Related Concepts Self-Mgmt. Prioritization Change Mgmt.
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PURPOSE (DEVELOPING INTENTION)

Mission, Goals, Process

PURPOSE

Mission: *What am I committed to that is greater than myself?*

- Consider the people that you are engaged with
- Consider the problems these people face and what issue you care deeply about
- Consider the natural ways that you solve problems / make things better

Goals: *How do I define success?*

- Consider your professional goals (long and short-term)
- Consider your personal goals (long and short-term)
- Consider the vision for the impact you wish to have

Process: *What is my next step?*

- Consider your routines and habits that you need to establish
- Consider your current short-term focus and your key actions
- Consider how you will begin to act

Purpose: *How will I contribute?*

First complete the answers to Mission, Vision, and Process and come back to this question. The answer is a synthesis of the Mission, Vision, and Process sections.

THE TECHNICAL HALF

The Technical Half of the equation is much more readily defined. While the specifics may vary by specialty the concepts are the same. “What key knowledge and skills do I need to be proficient at and how do I effectively employ them in my career?” As a clinician, much of this content is largely defined for us by our predecessors and governing boards and as such this content is heavily integrated into the training curriculum. You would not have advanced to the next level of independent practice without demonstrating proficiency. In training, development of proficiency suffices but in your career it is important to develop further mastery and define areas where you aspire to have great impact. These areas encompass not just your contributions as a clinician, but the expectation that you will contribute as an educator, investigator, and in administrative roles. Defining where you want to have impact identifies what technical learning is required for success in your career.

TECHNICAL (“HOW” Focused)

Example:
How do I conduct
qualitative research

Focus on Methods/ Increase Expertise

What expertise
will I develop?

Key
Knowledge

How do I behave
effectively?

Cultural
Effectiveness

How do I be
productive and
create impact?

Skills &
Techniques

**Knowledge
& Skills**
“Technical”

Additionally, there are “rules”, many of them unspoken, that are standards of behavior regarding how you should behave to be successful in the culture of academic healthcare. There are some general truths, but these too vary by specialty and are important to consider. In most cases, you need to abide by these rules to be effective and successful as an early career faculty member. Although some rules may merit evolution, finding success within these constraints is often necessary to attaining a senior faculty rank. At that time, you can work with institutional leaders to facilitate such evolution.






KNOWLEDGE (INTAKE)

Building Expertise

KEY KNOWLEDGE

Step 1. In Column A—Inventory and list the areas where you have current knowledge expertise. Write the areas in which you have current expertise in the appropriate categories (i.e. clinical, education, research, career & leadership, personal).

Step 2. In Column C—Inventory and list the areas where you need to develop a greater depth of knowledge in order to be effective.

	 (Column A) Areas of Strength I know a lot about...	(Column B) Areas of Focus I'd love to develop a deep expertise in...	 (Column C) Areas of Current Need I need to know more about...
Clinical			
Education			
Research			
Career & Leadership			
Personal			

Step 3. In Column B—Inventory and list the areas where you would like to have a world-class level of expert knowledge. This list should only contain a few items and should be aligned with what you are interested in and not what you think you need to have.

KNOWLEDGE (DEVELOPING INTENT)

Building Expertise

KEY KNOWLEDGE

Faculty members should be mindful of the role of expert knowledge in the academic setting and to develop an area of deep expertise. This does not necessarily mean research, although the research process may be a strong enabler of developing expertise in an area. While the faculty member will still have a range of knowledge in his or her area of practice, the faculty member should seek to develop a depth of knowledge and expertise that is “world-class” for a chosen area. That is, very few people in the world have the same depth for that given niche. From this niche, the faculty can truly be a “professor” and engage the meaningful activity of scholarship.

What will I be a world-class expert in?

- Consider your natural interests and passions, and your definition of personal excellence
- Consider drilling down to a niche with a level of depth and unique combination of disciplines

What are the key actions I need to take to deepen my expertise?

How will I commit the time and resources to invest in my development towards expertise?

CULTURE (INTAKE)

Knowing the Rules and Developing Influence

CULTURAL EFFECTIVENESS

Step 1. In Column A—Inventory and list the communities where you have credibility and belonging. Write down these communities in the appropriate categories (i.e. clinical, education, research, career & leadership, personal).

Step 2. In Column C—Inventory and list the communities where you need to develop a greater connection and influence in order to be effective.

	 (Column A) Areas of Strength My credibility is strong in these communities...	(Column B) Areas of Focus I'd like to be a leader in these communities...	 (Column C) Areas of Current Need I need to be better connected to these communities...
Clinical			
Education			
Research			
Career & Leadership			
Personal			

Step 3. In Column B—Inventory and list the communities where you would like to have a massive amount of influence and leadership. This list should only contain a few items and should be aligned with communities that you are deeply interested in.

CULTURE (DEVELOPING INTENT)

Knowing the Rules and Developing Influence

CULTURAL EFFECTIVENESS

One of the most attractive elements of being in the academics is the opportunity to engage in meaningful dialogue with members of the academic community. As faculty develop ties with various communities, they can also find opportunities for collaboration, professional advancement, and leadership. Academic communities are numerous, which provides the faculty member with choices and options about which communities to invest time into. Faculty should be strategic with building relationships and identifying communities that can be “home bases” from which to build the academic career.

In which communities will I develop massive influence?

- Consider where you will find belonging and community, personal and professional
- Consider how you will engage and contribute to these communities

Where do I feel the greatest sense of “belonging”?

How can I contribute more to the communities where I seek greater connection?

SKILLS (INTAKE)

Application for Productivity and Impact

SKILLS & TECHNIQUE

Step 1. In Column A—Inventory and list the areas where you have skills, productivity, or impact. Write these areas in the appropriate categories (i.e. clinical, education, research, career & leadership, personal).

Step 2. In Column C—Inventory and list the areas where you need to develop greater skills, productivity, and impact in order to be effective.

	 (Column A) Areas of Strength I'm most productive in these ways...	(Column B) Areas of Interest I would love to have greater impact through...	 (Column C) Areas of Current Need I'd need to become more effective at...
Clinical			
Education			
Research			
Career & Leadership			
Personal			

Step 3. In Column B—Inventory and list the areas where you would like to have the most amount of skills, productivity, and impact. This list should only contain a few items and should be aligned with outcomes that you are deeply invested in.

SKILLS (DEVELOPING INTENT)

Application for Productivity and Impact

SKILLS & TECHNIQUE

After considering expert knowledge and professional communities, the faculty member should consider how he or she will apply skills towards impact and productivity. Traditional measures of productivity exist for clinical and research volume. Think beyond that type of productivity. Instead, consider the impact that you would like to have to a given field or a given organization/group. From there, what is the meaningful measure of productivity for that impact outcome? Then from there, what are the skills you need in order to achieve that productivity and impact? This question is about how one's career is ultimately measured in terms of success and failure.

In what areas do I want to have the most success and impact?

- Consider your professional purpose
- Consider natural areas of professional effectiveness
- Consider how you will define success (at the end of your career)



What are the (social) outcomes that will be the most meaningful for me?

Where do I want to be most “productive”?



Tactical Planning

Sow a thought and you reap an action; sow an act and you reap a habit; sow a habit and you reap a character; sow a character and you reap a destiny.

-Ralph Waldo Emerson

TACTICAL CAREER PLANNING

Tactical career planning involves systemic determination and scheduling of immediate and short-term activities required to achieve the objectives of the strategic plan. If the strategic plan is for five years, tactical plans might be for a period of one to three years, or even less.

This planning should result in a list of specific actions you will take in implementing your strategy. These actions comprise what is to be done, in what order, using which tools and personnel. What to do, when to do it, and how this is to be done? One must consider how the strategic goals can be accomplished within the designated limits of available resources and organizational structure. Flexibility needs to be built into the tactical plans to allow for unexpected events. The point of the tactical plan is to reach the goals and objectives that have been developed. However, conditions and environment can change quickly. When this happens, it is time to reconsider how tactics are performing against stated goals and to change tactics if necessary.

ALIGNING ACTIONS WITH PRIORITIES

The best use of tactical planning is when it is proactive rather than reactive to circumstances or the environment. Careful research and analysis are necessary to align proposed actions with priorities. This preparation should result in a list of the specific actions you will take in implementing your strategy. These actions comprise what is to be done, in what order, using which tools and personnel.

Priorities. In order to set priorities, it is useful to evaluate the various courses of action that might be taken. At the most basic level this involves the question of what to do, when to do it, and how it is to be done. It would be a rare situation, however, when there would only be one method of what to do or how to do it. This is further complicated when more than one action is deemed equally useful for achieving the stated goals and the question of when to do each action becomes an issue. Sufficient time must be spent prioritizing and contemplating potential outcomes before making specific goals and setting actions in motion.

Goals. Once priorities are set, specific strategic goals are formulated. Both short-term and long-term goals should be set. The short-term goals should be small enough that they can feasibly be achieved within the time frame. This may require breaking down larger goals (e.g., submit a manuscript) into smaller goals (e.g., meet with statistician to complete data analysis, send draft to co-authors for comment) that advance the larger goal. The goals should be flexible so that they can be adapted. This may mean that specific planned actions are modified or dropped if they don't bring one closer to the intended goal. More will be said about this below. Caution should be exercised if one falls short of stated goals to avoid excess frustration and subsequent abandonment of this exercise. Rather, consideration of the bigger picture of this program's intention could transform such a negative experience into a success. Modification of plans and goals may be necessary, including the planned timeline, in order to establish one's career development aspirations.

Actions. The process of setting goals and priorities should lead to development of specific actions to achieve these outcomes. One must consider how the strategic action plan can be accomplished within the designated limits of resources and intra-departmental authority. Tracking and reporting results of each action results is used to measure progress and success. The point of designated actions is to reach the goals and objectives, but if the environment or institutional conditions change, the actions and tactical plans might require modification. Thus, flexibility should be built into the action plan to allow for unexpected events.



TOP 5 PRIORITIES

What is most important in the next year?

This is where alignment of short-term goals and actions become prioritized. It might prove important to mix one or two less taxing priorities in with a few more ambitious priorities to help gain confidence in the process. That said, the priorities should be realistic and aligned with achievement of long-term career development plans.

TOP PRIORITIES IN THE NEXT YEAR	TOP THINGS THAT NEEDS TO GET DONE TO FULFILL PRIORITY	MY MOST INFLUENTIAL ACTION/ROLE
Priority #1		
Priority #2		
Priority #3		
Priority #4		
Priority #5		

KEY ACTIONS AND MILESTONES

The Next 12 Months

In order to achieve your defined goals, what are the key actions and milestones that will be necessary for you in the next 12 months? In the space below, briefly indicate the key actions and milestones for each professional category (i.e. clinical, education, research, career & leadership, and other). Do this for four defined time frames in the coming 12 months.

	THE NEXT MONTH	MONTHS 2 TO 4	MONTHS 5 TO 8	MONTHS 9 TO 12
Clinical				
Education				
Research				
Career & Leadership				
Personal				

RE-BALANCING TIME

What to do more / less off

We must make time for our priorities. What are the activities that must be emphasized / prioritized? In order to achieve our goals and well-being, we cannot simply do more. What are the activities which we must reduce in order to make time for the more important activities?

Things I need to do more of...

ACTIVITY	CURRENT TIME	FUTURE TIME	ENABLING ACTIONS

Things I need to do less of...

ACTIVITY	CURRENT TIME	FUTURE TIME	ENABLING ACTIONS



As you look back at Modules 10, 11, and 12, have some ideas on how you want to remind yourself of what you wrote down. Our human brains easily forget and you do have to spend some good effort in remembering what you really want from your career. Allow for flexibility/things to change – maybe even some of your core values. But find a way to assess what choices you are making to move you through your goals. Noting the amount of energy you are inputting, what foundational place you are coming from in your pursuit (module 10), and not getting too lost in the day to day, are all essential to fulfill your goals. Here are some guiding questions to ask yourself:

- What are my thoughts while perusing this action?
- What feeling is coming from those thoughts?
- What actions are coming from those feelings?
- Do I need to try some different thoughts towards this circumstance?
- What part of my action is feeding my goal?
- What part of the unknown of where this is going is ok with me or not ok with me?
- Where is my intuition playing a role towards these actions?
- What part of uncomfortable is worth it?
- How would it serve me to look at my goal as a place to come from rather than only a destination?
- What values of who I am or who I want to be are aligned or misaligned?
- Am I upholding my boundaries around time or others, or is an overall assessment of my boundaries needed?

If you find yourself at a point where you haven't looked at your goals (specifically module 11) since you first wrote them down, or you've become lost from what you wanted; first, it's ok! This happens to the best of us and is why we are reminding yourself it's needed. Busyness can easily overtake or there is a time to 'shoot from the hip' when something new is presented to us. The wrong or right of each of these situations is up to you - but analyzing why you are changing focus or not pursuing what you want can prove helpful. Consider taking your mind through these realizations that often deter us:

Strengths overused can become a weakness.

If you only stay in a comfortable space, using what you know and what you are good at, you will not grow. Goals need growth, no matter what they are. It will be all too easy to hold yourself back from what you really want if you don't play with some of your weaknesses as well as your strengths.

Where is 'done' better than 'perfect' for this goal?

This is an important question to ask yourself when you are having feelings of overwhelm or thoughts of 'I don't have enough time'. In health sciences of course, there is a clear standard of certain content needed BUT weighing in your mind that sometimes getting it out there being just as vital. This will be something only you can answer for yourself (like module 12) so be sure to ask it!

Overwhelm is a state of mind.

It is a feeling, not a fact. It can often be easier to get into overwhelm and sit there using it as an excuse or an indulgence on why something isn't continuing how you want it to. Often harder, but more rewarding, would be to use that energy towards different thoughts that will give different feelings and actions. Example: Instead of "I have so much on my plate, there's no way I can do all of this or get to where I want to be", maybe "I have so much on my plate, how fortunate that I am being given these opportunities" could serve your actions better.

If you feel a lack of balance, know that is also a state of mind, not the amount of items you have to do.

This can be a hard pill to swallow. How you are 'balancing' your life comes from your thoughts, not necessarily purely operations. There will absolutely be a time when you need to assess your commitments and do less (module 12). Boundaries can help guide yourself to what you want more out of your time. But owning the feelings you are having are actually coming from how you are interpreting the external, could help you see the agency you have to make yourself 'balanced' how you want to be.

Lastly, if you are feeling 'stuck' and need an assessment around some specific actions, try this exercise:

STEP 1	Write down task that feels devoid of meaning or uncomfortable
STEP 2	Ask yourself "What is the purpose of me doing this?"
STEP 3	Write down your answer and draw an arrow connecting the two. If still unimportant to you ask yourself "What could this result lead to?"
STEP 4	Write answer connecting with an arrow again, over and over asking yourself the results, until something meaningful comes

UNDERSTANDING PROMOTION GUIDELINES

Sometime during the coaching engagement, the program highly recommends a meeting with Dr. Wendy Hobson-Rohrer. She will review the coachee's current professional portfolio and suggest actions on the part of the coachees to ensure that they are moving meaningfully towards professional advancement. Because each department/division may have different promotion guidelines, it is recommended that a representative also be present at the meeting. It is optional for the coach to be in attendance.

Notes from the meeting: