



Pediatric Insights

Passing Leadership Wisdom To The Next Generation

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Faculty Recruitment, Retention, and Representation in Leadership: An Evidence-Based Guide to Best Practices for Diversity, Equity, and Inclusion from the Council of Residency Directors in Emergency Medicine

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Affiliations expand

Abstract

Improving the recruitment, retention, and leadership advancement of faculty who are under-represented in medicine is a priority at many academic institutions to ensure excellence in patient care, research, and health equity. Here we provide a critical review of the literature and offer evidence-based guidelines for faculty recruitment, retention, and representation in leadership. Recommendations for recruitment include targeted recruitment to expand the candidate pool with diverse candidates, holistic review of applications, and incentivizing stakeholders for success with diversity efforts. Retention efforts should establish a culture of inclusivity, promote faculty development, and evaluate for biases in the promotion and tenure process. We believe this guide will be valuable for all leaders and faculty members seeking to advance diversity, equity, and inclusion in their institutions.

Features levels of evidence for diversity, equity and inclusion recruitment strategies



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Mol Biol Cell .2019 Oct 15;30(22):2744-2749.

Strategies to improve equity in faculty hiring

[Needhi Bhalla](#)¹

Abstract

Through targeted recruitment and interventions to support their success during training, the fraction of trainees (graduate students and postdoctoral fellows) in academic science from historically underrepresented groups has steadily increased. However, this trend has not translated to a concomitant increase in the number of faculty from these underrepresented groups. Here, I focus on proven strategies that departments and research institutions can develop to increase equity in faculty hiring and promotion to address the lack of racial and gender diversity among their faculty.

Very practical recommendations similar to the ones we emphasized

J Natl Med Assoc. 2018 Feb;110(1):58-64.

Challenges in Recruiting, Retaining and Promoting Racially and Ethnically Diverse Faculty

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Abstract

Background: Despite individual and institutional awareness of the inequity in retention, promotion and leadership of racially and ethnically underrepresented minority faculty in academic medicine, the number of such faculty remains unacceptably low. The authors explored challenges to the recruitment, retention and promotion of underrepresented faculty among a sample of leaders at academic medical centers.

Methods: Semi-structured interviews were conducted from 2011 to 2012 with 44 senior faculty leaders, predominantly members of the Group on Diversity and Inclusion (GDI) and/or the Group on Women in Medical Sciences (GWIMS), at the 24 randomly selected medical schools of the National Faculty Survey of 1995. All institutions were in the continental United States and balanced across public/private status and geographic region. Interviews were audio-taped, transcribed, and organized into content areas before conducting inductive thematic analysis. Themes expressed by multiple informants were studied for patterns of association.

Results: The climate for underrepresented minority faculty was described as neutral to positive. Three consistent themes were identified regarding the challenges to recruitment, retention and promotion of underrepresented faculty: 1) the continued lack of a critical mass of minority faculty; 2) the need for coordinated programmatic efforts and resources necessary to address retention and promotion; and 3) the need for a senior leader champion.

Conclusion: Despite a generally positive climate, the lack of a critical mass remains a barrier to recruitment of racially and ethnically underrepresented faculty in medicine. Programs and resources committed to retention and promotion of minority faculty and institutional leadership are critical to building a diverse faculty.

Keywords: Academic climate; Faculty development; Faculty retention; Underrepresented minority faculty.

Resource helpful to retention webinar

Acad Med.2017 Nov;92(11):1564-1568.

Recruiting Faculty Leaders at U.S. Medical Schools: A Process Without Improvement?

[James D Marsh¹](#), [Ronald Chod](#)

Abstract

Recruiting faculty leaders to work in colleges of medicine is a ubiquitous, time-consuming, costly activity. Little quantitative information is available about contemporary leadership recruiting processes and outcomes. In this article, the authors examine current recruiting methods and outcomes in colleges of medicine and compare academic search approaches with the approaches often employed in intellectual-capital-rich industries. In 2015, the authors surveyed chairs of internal medicine at U.S. medical schools regarding their recruiting practices and outcomes—specifically their selection methods, the duration of searches, the recruitment of women and minorities underrepresented in medicine (URM), and their satisfaction with search outcomes. The authors found that department chairs were extensively engaged in numerous searches for leaders. The recruitment process most commonly required 7 to 12 months from initiation to signed contract. Interestingly, longer searches (19+ months) were much more frequently associated with a recruitment outcome that chairs viewed as unsatisfactory or very unsatisfactory. Most leadership searches produced very few women and URM finalists. The biggest perceived hurdles to successful recruitment were the need to relocate the candidate and family and the shortage of good candidates. The process of recruiting leaders in academic medicine has changed little in more than 25 years. Process improvement is important and should entail carefully structured search processes, including both an overhaul of search committees and further emphasis on leadership development within the college of medicine. The authors propose specific steps to enhance recruitment of members of URM groups and women to leadership positions in academic medicine.

Business perspective - “Research clearly shows that patients of diverse backgrounds prefer medical centers with medical providers with diverse backgrounds.”

Department of Medicine chair survey reported 70% felt recent searches produced diverse candidates, although women and URM finalists were few. How is diversity defined by leadership?