

A Guide to Faculty Career Conversations with Department Chairs or Division Chiefs

Stanford Medicine Office of Faculty Development and Diversity

The ultimate goals of career planning conversations between faculty and Department Chairs/Division Chiefs are:

- Use the **Self-Reflection Guide** to understand your career customization profile before beginning your conversation with your Chair/Chief.
- Discuss your own career progression, goals, and needs now and in the future, while **also recognizing the needs of the Department/Division**.
- Understand that **careers are not “one size fits all”** and your path can be individualized to meet your needs.
- Articulate **exactly how your plan might work** and discuss this with your Chair/Chief.
- Over the long-term, move work-life solutions from “special case one-off arrangements” to transparent and **systematic frameworks**.

Introduction: Envision what is possible

- While faculty and most of today’s knowledge workers are expected to manage their own careers, all benefit from appropriate career development conversations and information to do so effectively. Recognize that an individual career conversation is a significant demand on the time of your Chair/Chief. However, the potential payoff of a meaningful career conversation can benefit the entire Department/Division. **We are committed to assisting you in making this work for you and your Chair/Chief.**
- Previous implementations of career customization models have shown that **most people will not want to modify their career profiles** and trajectories – typically, only about 10-15% of people have a desire to customize their career paths – this 10% includes people who want to accelerate their careers as well as those who want to decelerate their careers.
 - Even if you do not want to change anything, discussing career goals and obtaining appropriate counseling and feedback is valuable. **Some conversations will be short, and others will be longer** – both are appropriate.
- This exercise is not about faculty getting everything they want at the expense of the needs of the Department/Division. Career planning conversations should be about **meeting the needs of both the faculty and the Department/Division over the long term**. Career building is a shared responsibility between you, as a faculty member, and the university. The conversation can create transparency regarding trade-offs and choices that can ultimately lead to better planning, better decisions, and greater satisfaction. Some arrangements are possible, and some are not, given the constraints of the Department/Division and requirements for promotion.
- During your conversation, it is important to **find the synergies and gaps between the your needs and the needs of the Department/Division**. Next, you can begin to agree

upon what is feasible to accommodate your own career customization goals within the context of the team, and where additional mechanisms for support are warranted.

Dimensions of Career Customization

Below is a list of dimensions to consider as you customize your career plan to fit your individual needs and the Department/Division's needs.

Part 1 Now Wish Now 3-5 Years Part 2 Part 3 Summary

Career Customization

What would you like your career to look like today?

Pace
Accelerated

Workload
Full

Schedule
Predictable

Role
Leader

Work-Life
Work Focus

Decelerated Reduced Unpredictable Contributor Personal

Next

Tips

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The Five Dimensions

Pace: is the rate of advancement you envision for yourself, on a continuum ranging from *decelerated* to *accelerated*. At one end of the continuum, a decelerated pace would involve using a tenure clock/promotion extension. For Tenure-Line faculty and Medical Center Line (Clinical) faculty, this includes a maximum of ten years using approved extension policies. An accelerated pace, by contrast would involve fewer years to promotion – as early as 4 years from Assistant to Associate, and as early as 5 years from Associate to Full. A “typical” pace would fall in the middle. Tenure clock stoppages, modified duties, and unpaid leaves, as well as sabbaticals and development leaves become a part of this planning process. For Clinician Educators, time to

promotion from Assistant to Associate is typically 6 years, and for Clinical Instructors, 3 years (the CE line does not have a limit of time in rank).

Examples of discussions surrounding Pace:

- A faculty member who is about to become a parent discusses using the promotion extension new parent benefit and extend time in rank.
- A faculty member wants to discuss setting career goals to get promoted to Full Professor in the fastest timeframe.
- An MCL faculty member wants to discuss going to 80% FTE and extend time to promotion accordingly.
- A Clinical Assistant Professor wants to discuss time and criteria for promotion to Associate.
- A Clinical Instructor wants to discuss what the expected time and pace for promotion to Assistant Clinical Professor should be.

Workload: is correlated with, but separate from, Pace. This dimension varies from a workload that is *reduced* to *full*. A reduced workload would involve a part-time work agreement with commensurate pay (for example 80% FTE), and can be dialed up or down at different times based on the needs of the faculty and the department.

Within workload, conversations should consider Work allocation.

- Work allocation considers the amount of work dedicated to each of the mission areas (*clinical, research, teaching*), as well as *service* and *administration*. This enables faculty to clearly state their desired work allocation at different points in time, and make appropriate tradeoffs based on desired pace, personal goals, and Department/Division needs.

Examples of discussions surrounding Workload and Work allocation:

- A UTL Assistant Professor on the tenure track wants to allocate more time to research to accelerate pace of advancement.
- An MCL Full Professor wants to discuss increasing her involvement in leadership opportunities at Stanford and on the national stage of her field.
- An Associate Clinical Professor is passionate about creating a new teaching method for residents leveraging mobile technology, and wants to discuss increasing his time on teaching.

Again, Department/Division needs are met in collaboration with each faculty member. The goal is to allocate the time of you, the faculty member, on the activities that meet your professional and personal goals and combines what you are most passionate about with Department/Division needs. Not all desired work allocations are possible.

Schedule: pertains to where and when work is performed. At one end of the continuum, a fully *predictable* schedule involves a consistent schedule and/or the ability to perform work from

various locations. At the other end, is an *unpredictable* schedule. The amount of flexibility or predictability in schedule will likely vary by clinical site and basic science site. In basic science, research work such as paper writing can oftentimes be performed offsite (except for the research tied to a physical laboratory space or patient population). In clinical settings, the nature of the patient population affects predictability – e.g., Emergency Medicine vs. Dermatology. Work allocations around research, clinical care, teaching, service, and administration also influence schedule predictability.

Examples of discussions surrounding Schedule:

- A faculty member discusses working from home one day a week to increase uninterrupted research time.
- A clinical faculty member proposes covering night shifts to obtain more daytime flexibility to meet dependent care responsibilities.
- A faculty member wants to plan a vacation in 9 months and discusses increasing load and schedule unpredictability now to enable time off later.

Role: reflects a faculty member's degree of involvement in leadership activities. At one end of the spectrum, the faculty member is an *individual contributor* (not involved in committees, searches, service, or task forces). At the other end of the spectrum, the faculty member is assuming a significant *leadership* role. Again, you and your Chair/Chief can modify the dimension commensurate to work-life and advancement needs.

Examples of discussions surrounding Role:

- A faculty member discusses being an individual contributor exclusively as he gets tenure over the next year, and discusses potential leadership opportunities 3 to 5 years out.
- A faculty member discusses her desire to lead the medical education program of the Department/Division.
- A faculty member has been assuming the leadership role of Medical Director for the past few years and wants to discuss succession planning to transition out of the role in the next 3-5 years.
- A faculty member wishes to increase her national reputation and discusses identifying maximum visibility leadership opportunities.

Work-life: incorporates decisions about work-life integration and makes the career tradeoffs involved a transparent and core part of the career planning process. Depending on current and future work-life needs, you, the faculty member, may want to put more emphasis on your “personal life,” on your work, or achieve integration somewhere in the middle. Conversations around this dimension are intended as a guide for you to achieve the work-life fit you need personally to feel fulfilled and productive, regardless of the reasons behind these needs. For example, one faculty member may want to increase focus on personal life to accommodate dependent care needs, while another may want to do so to pursue a hobby – both are valid discussion points. Similarly, one faculty member may have young children and still be in a position to completely focus on her career, while another may be single and want to focus on his personal life – again the conversation makes no judgment on the specific tradeoffs involved—the

important piece of the conversation is that individual needs are planned for, acknowledged, and a part of the career planning process. Here again, flexibility policies can be leveraged to achieve the desired work-life focus. As a general guideline, work-life focus is expected to be correlated with the dimensions of pace and workload – that is, an accelerated pace and full workload may constrain your ability to increase focus on personal life. The intention is to make these tradeoffs accepted and transparent.

Examples of discussions surrounding Work-life:

- A faculty member is expecting a child and discusses taking parental leave in the coming year.
- A faculty member has some health needs that necessitate fewer night clinics and discusses potential schedule modifications over the next year.
- A faculty member has eldercare responsibilities and discusses his needs to combine work and family responsibilities over the next few years.
- A faculty member discusses a desire to ramp up her focus on work now that her children are in school.
- A faculty member discusses his interest in traveling and service work as a way to increase his personal satisfaction and work-life fit.

Suggestions for Effective Conversations

Think about your career goals for the next year and for the next 3-5 years

- *How do you fill your career customization profile?*

Discussing Pace

Pace is a central element for discussion because it articulates your immediate and long-term career goals and aspirations in terms of advancement.

Questions to consider in discussing pace:

- What are your ultimate career goals?
- In what timeframe do you want to achieve them?
- Do you have the right skills, opportunities, and experiences to make these long-term goals a reality? What additional development would you need for this to happen?
- How can the Department/Division and institution accommodate your timeframe? What policies are available to make this a reality?

Many will be interested in **accelerating the pace** of advancement. It is important to consider the **benefits and tradeoffs** associated with dialing up one's career and accelerating the promotion timeframe.

- What skills and goals should you focus on to accelerate your path to promotion now and 3-5 years from now?
 - Specific grants to go after.
 - Increasing publication output.
 - Engaging with new high visibility research or clinical projects.
 - What goals for clinical excellence should be set to accelerate promotion?
 - What other opportunities should you pursue to accelerate pace?
- How feasible is the desired acceleration given your current performance?
 - Sustained high performance is a prerequisite to dialing up pace.
 - Expected goals to meet during performance/promotion reviews should reflect this accelerated pace.
- Are you ready for additional responsibilities/projects that would enable pace acceleration?
 - Consider your ability or desire to increase the intensity of work to accelerate productivity toward promotion. A greater level of effort will be required and you will need to ensure that you are at a point where it makes sense to do so.

You may also consider **dialing down their pace**. Again, it is important to discuss both **benefits and tradeoffs** associated with decelerating the pace to promotion.

- Discussing specific *benefits* of dialing down one's pace to promotion:
 - You may gain what you need in work-life fit and personal endeavors.
 - You may gain more time on other areas of interest, for example, enabling you to keep research output constant or decrease clinical load and pursue a work project of interest that will ultimately benefit your career.
 - Slowing down pace may provide room for more risk-taking and innovation as you consider projects that don't fit in the traditional requirements for advancement – for example, pursuing a service initiative that you are passionate about.
- Discussing specific *tradeoffs* for dialing down one's pace to promotion.
 - Potential for lower total compensation increases – pay, bonus, and annual increases – if you plan to achieve a slower pace by reducing FTE.
 - Recognize that slowing pace is accepted (within existing constraints) and temporary – you may discuss the possibility to accelerate pace again in the future.
 - Acknowledge the institutional limits of dialing down pace – there are fixed timelines for promotion depending on lines and maximum years in rank, which constrain how much pace can be reduced. Refer to policies on time in rank if needed.

Discussing Workload and Work Allocation

Workload discussions can include possible increases or decreases in overall workload.

- Consider how to adjust workload in a way that meets Department/Division needs.

- Related to desired pace, you may wish to increase or decrease your workload – with commensurate FTE adjustment.
- Workload may also be reduced by other means than FTE reduction, such as time off with pay or a leave of absence.
- Consider the benefits and tradeoffs associated with dialing up or down workload.
 - Increasing FTE will increase pay and (potentially) benefits. A reduced FTE comes with a commensurate reduction in pay and (potentially) benefits.
- Even if FTE remains unchanged, consider ways to increase or decrease workload to accommodate desired pace.
 - What new work should be added or removed to meet the desired promotion pace?

Work Allocation discussions surround the several areas in which you, as a faculty member, perform your daily work. Faculty perform work in several areas of clinical, teaching, research, administration (leadership responsibilities), and service (committee appointments, mentoring colleagues, representing Stanford on national taskforces, etc.). Work allocation across missions is related to work satisfaction.

- Consider what you are most passionate about in your work.
 - For some, this may be research, while for others it is leadership, service, teaching, or patient care.
 - Do you get to spend at least a portion of his time on what you are most passionate about?
- Many faculty members do not wish to increase or decrease workload but are interested in shifting workload across missions to accommodate their interests and career goals. For example, a faculty member who wishes to take a sabbatical is not asking for a workload reduction, but a shifting of workload across missions towards research or professional development exclusively.
 - If you want to put less time on one mission and more on another, is this in keeping with your desired pace of advancement?
 - Where should you focus your workload allocation in order to achieve the pace of career advancement you seek?
 - If there is a funding gap associated with a change in workload allocation (for example, loss of clinical revenue), how can you, your Chair/Chief, and the team ensure that the needs of the Department/Division are met over time?
- Consider how line appointment may influence workload allocations – note that there is variation across Departments/Divisions on what is considered baseline work distribution across missions.
 - MCLs: expected to spend more time on clinical work and teaching, as well as have protected scholarship time (20% at minimum). Faculty members may choose to pursue external funding for this protected time to increase it or cover the time involved. This focus on research can increase to up to 80% under circumstances of grant requirements.

- UTLs: expected to spend most of their time on research and teaching. In some cases, they may also engage in clinical work.
 - CEs: expected to spend most of their time on clinical work and teaching (80-90% clinical time typically, and 10-20% time teaching). They may also engage in scholarship, service, and administration – but this is not a requirement.
- Possible scenarios to consider that can meet individual and Department/Division needs:
- A faculty member discusses increasing his clinical or teaching load now and lightening it later. Another discusses decreasing her clinical or teaching load now and increasing it later.
 - A faculty member seeks advice on how to work on a grant proposal to secure non-clinical funding and increase research time to accelerate time to promotion.
 - A faculty member discusses increasing teaching and service load while a colleague is out on sabbatical, with the intention of decreasing teaching load later.
 - A faculty member discusses increasing administrative time to pursue a leadership project.
 - A faculty member discusses taking a sabbatical to focus exclusively on research for the next year.

Discussing Schedule

Schedule can range from predictable (or restricted) to unpredictable (or unrestricted). Your workload, career goals, and work-life needs are likely to influence your level of desired or possible schedule predictability.

- In your discussions with your Chair/Chief, consider:
- How does your Department/Division's patient population (outpatient, inpatient, fixed versus variable) influence the degree of possible predictability?
 - If you would like more schedule predictability (for example, no clinic on Fridays to enable more focused research time), how do you envision it would work for the Department/Division? How would patient care quality be maintained or improved as a result?
- Possible types of schedule modifications to envision:
- Work a very specific clinical shift to accommodate dependent care responsibilities.
 - Work 7 days on shift, 7 days off shift to get more focused time on research while meeting the clinical needs of the Department/Division.
 - Take extra shifts for the next 6 months to enable a reduced shift load later without dropping FTE status.
 - Setting days to work from home when possible to increase uninterrupted blocks of time.

Discussing Work-life

Work-life considerations enable you to think about your work-life fit needs and engage in a transparent conversation around such needs and future planning.

- Consider the following questions when discussing the work-life dimension:
 - Are there any upcoming or current life events or wishes that should be considered (e.g., new child, elder care, marriage, desire to pursue an outside interest) to increase your focus on personal life?
 - How is your desired work-life focus related to your desired pace of advancement?
 - How are the other career dimensions fitting with your desired work-life focus? Should these dimensions be adjusted?
 - What policies can be used to meet advancement goals and work-life focus?
 - What is your desired work-life focus in the future?

- Possible scenarios to consider that focus on changing work-life needs:
 - A faculty member is planning for the birth of his first child. He discusses increasing his focus on personal life in the next year to accommodate his family needs. He plans on using parental leave to enable this focus without reducing his pace or workload, and requests a schedule adjustment for the next 12 months – he and his wife have determined that he should take night clinics while she opts for daytime clinical hours to cover their childcare needs. After that year is up, he plans to re-increase his focus on work and be on an unrestricted schedule, as they will have hired a nanny.
 - A faculty member is starting to feel the effects of accumulated work stress. She decides to increase her focus on wellness in the coming year and therefore wants her work-life focus dimension to be in the middle – integrated overtime – as she anticipates that her increased focus on wellness will increase her productivity.
 - A faculty member has no desired changes for the upcoming year, but anticipates that his parents will need additional support in the next 3-5 years. He discusses the possibilities of increasing focus on personal life 3-5 years out along with planning for using specific flexibility policies to enable this shift. The ensuing discussion focuses on his anticipated promotion timeline and what goals he should focus on in the next year to enable this adjustment later on.

Other tips for having an effective conversation

- **Be open** and approach the conversation with an inquisitive mind.
- **Establish confidentiality** at the onset of the conversation.
- **Consider what is currently working well** by discussing the areas of achievement you are proud of and look forward to continuing.
- **Openly discuss challenges** by asking open-ended questions to explore issues or concerns in the career customization conversation.
- **Listen and show empathy** by giving your Chair/Chief time to speak and carefully listening without thinking about other things or what you are going to say next.

- **At the end of the meeting, recap** and review the main points of your discussion as well as the next steps you both have decided on.
- **Be honest in recognizing what will require further discussion at the team level and what will require more resources.**

Policies and resources around Stanford that can enable faculty members' career customization goals

University Administrative Policies

- Sabbatical leave [UTL, MCL, NTL]
- Period of pure research leave [UTL, MCL, NTL]
- Professional development leave [CE]
- Paid conference leave [CE]
- Time off with pay [all lines]
- Disability leave [all lines]
- Leave without pay/leave of absence [all lines]
- Consulting days [UTL, MCL, NTL]
- Promotion extension [UTL, MCL, NTL]
- New parent promotion extension [UTL, MCL, NTL]
- Part-time appointments [all lines]
- Part-time appointments for pre-retirement faculty [UTL, MCL]
- Reduction in teaching or clinical duties for new parents [UTL, MCL, NTL]
- Maternity leave [all lines]
- Leave for new fathers and registered domestic partners [all lines]
- Extended parental leave [all lines]
- Childcare/adoption support [all lines]
- Childcare subsidy program [all lines]
- Onsite childcare [all lines]
- Junior faculty child care assistance program [UTL, MCL, NTL]

- Junior faculty dependent care travel program [UTL, MCL, NTL]
- Emergency backup childcare and eldercare [all lines]
- Eldercare resources [all lines]
- Tuition grant program for dependents [all lines]
- Reduction in teaching and/or clinical duties following birth or adoption [UTL, MCL, NTL]
- Additional policy resources:
 - **Stanford Faculty Handbook:** facultyhandbook.stanford.edu
 - **School of Medicine Office of Academic Affairs:** med.stanford.edu/academicaffairs
 - **Stanford WorkLife Office:** worklife.stanford.edu

University Health and Wellness Resources

- **Stanford Committee for Professional Satisfaction and Support (SCPSS):** The SCPSS (Stanford's physician wellness group) provides extensive resources and self-assessment tools on wellness, work-life balance, health, and time management. wellmd.stanford.edu
- **Health Improvement Program (HIP):** All Stanford employees can participate in a variety of health improvement and fitness programs. hip.stanford.edu
- **BeWell@Stanford:** A program for all Stanford employees focused on health and wellness. bewell.stanford.edu Full list of resources for Stanford faculty and staff at: bewell.stanford.edu/resources/staff
- **Stanford Coordinated Care:** A Stanford Hospital program for Stanford employees and retirees experiencing chronic conditions. stanfordhealthcare.org/medical-clinics/coordinated-care.html
- **Faculty Staff Help Center (FSHC):** The Stanford Faculty Staff Help Center (FSHC) is focused on providing Stanford employees with counseling and short-term support in addressing mental health issues. helpcenter.stanford.edu
- **Office of Religious Life (ORL):** The Stanford ORL has a mission to ensure lively, thoughtful, and supportive contexts for Stanford students, faculty, and staff who wish to pursue spiritual interests. web.stanford.edu/group/religiouslife/cgi-bin/wordpress/