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Establishing Leadership Roles & Responsibilities in Academic Medicine



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Introduction

Every Academic Medical Centre (AMC) has the tri-partite mission to deliver excellent healthcare for patients while concurrently also undertake research and education to advance the body of knowledge to improve healthcare over time.

In this context, it is essential to have clarity on the optimal framework of roles and responsibilities to be undertaken by key appointment holders (KAHs) in an academic clinical department (or Academic Clinical Programmes (ACPs) in the case of SingHealth Duke-NUS AMC).



Objectives

The aims of this study are to develop a common understanding and an optimal framework of the roles and responsibilities of KAHs of ACPs in the SingHealth Duke-NUS AMC.

Methodology

- 1 A literature search and an internet search on the roles and responsibilities in AM were conducted.
- 2 Focus group discussions (FGDs) were held at the SingHealth Duke-NUS AMC Academic Leaders' Forum on 22 March 2014. A total of 70 academic leaders attended and participated in the FGDs.



SingHealth Duke-NUS AMC Academic Leaders' Forum - 22 March 2014.

- ❖ There were 4 FGDs; i.e. one each for (1) the Academic Chairs; (2) the Vice Chairs, Research; (3) the Vice Chairs, Education; and (4) the Vice Chairs, Clinical.
 - ❖ Senior leaders of the respective domains facilitated each of the FGDs.
- 3 Prior to the FGDs, there was sharing of experience by a senior academic leader from an established overseas AMC.



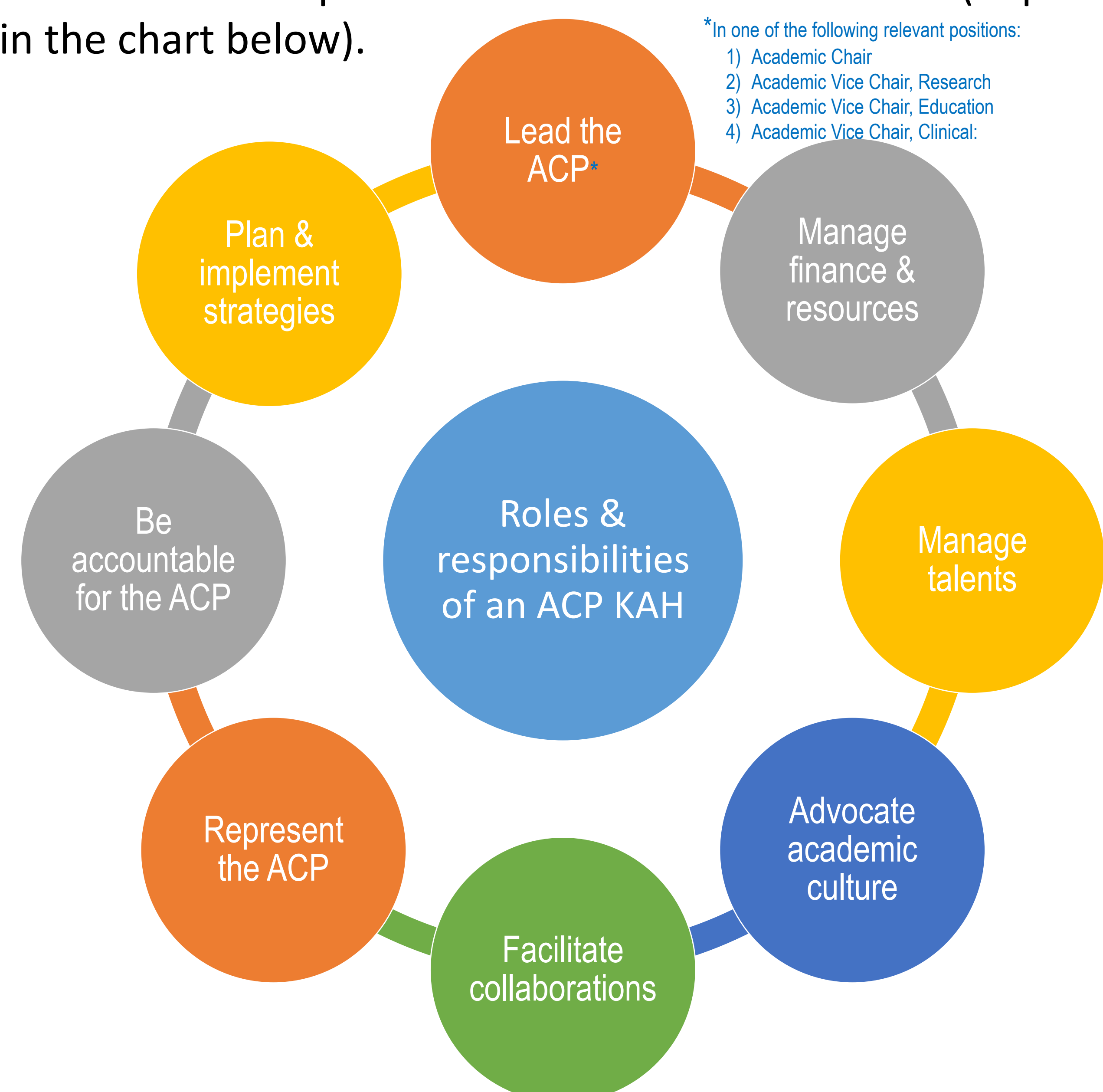
2 photographs of the FGDs



- 4 After the FGDs, all participants came back together. Each group then presented its findings in a townhall discussion. This resulted in consensus on the respective Terms of Reference (TORs) for roles and responsibilities of Academic Chair, Academic Vice Chair Research, Academic Vice Chair Education and Academic Vice Chair Clinical.

Results

- 1 Internet search revealed very limited information. There was also a paucity of published information describing the roles and responsibilities of academic leaders.
- 2 After the FGDs there was consensus on eight key aspects of the roles and responsibilities for academic leaders (depicted in the chart below).



- 3 Clear TORs were developed based on these inputs. The TORs were accepted by the SingHealth Duke-NUS AMC leadership.
- 4 Inputs received from a voluntary Post-Event Survey about the FGDs were positive:
 - ❖ 89% of respondents felt that the “Discussions were useful”
 - ❖ 95% felt that the discussions were “helpful in providing insights” on setting priorities for the ACP and for its management.

Conclusions

- 1 FGDs were effective in developing a common understanding of the roles and responsibilities of academic leaders in the ACPs.
- 2 The TORs and framework developed were not only clearer, systematic and synergistic for the domains; they also had buy-in of these academic leaders.
- 3 These TORs are applied to all ACPs in the SingHealth Duke-NUS AMC.