

UC San Diego

UC San Diego Previously Published Works

Title

Gaps and Opportunities for Faculty Workload Policies in Pharmacy and Health Professions Education

Permalink

<https://escholarship.org/uc/item/84p8b3mk>

Journal

American Journal of Pharmaceutical Education, 87(2)

ISSN

0002-9459

Authors

Park, Sharon K
DiVall, Margarita V
Lee, Kelly C
[et al.](#)

Publication Date

2023-03-01

DOI

10.5688/ajpe9012

Peer reviewed

COMMENTARY

Gaps and Opportunities for Faculty Workload Policies in Pharmacy and Health Professions Education

Sharon K. Park, PharmD, MEd,^a Margarita V. DiVall, PharmD, MEd,^b Kelly C. Lee, PharmD, MAS,^c Lisa Lebovitz, JD, MS,^d Surajit Dey, PhD,^{e,f} Omar F. Attarabeen, PhD^g

^a Notre Dame of Maryland University, School of Pharmacy, Baltimore, Maryland

^b Northeastern University, Boston, Massachusetts

^c University of California San Diego, Skaggs School of Pharmacy and Pharmaceutical Sciences, La Jolla, California

^d University of Maryland, School of Pharmacy, Baltimore, Maryland

^e Roseman University of Health Sciences, Henderson, Nevada

^f Editorial Board Member, *American Journal of Pharmaceutical Education*, Arlington, Virginia

^g University of Maryland Eastern Shore, School of Pharmacy, Princess Anne, Maryland

Submitted December 23, 2021; accepted April 21, 2022; published February 2023.

Faculty workload is difficult to delineate and quantify equitably because of the various factors and diverse roles that define faculty positions. This is especially true in health professions education, including pharmacy. Nonetheless, ensuring fair and transparent distribution of faculty workload is necessary for equity and engagement of the faculty workforce. While it is impossible to develop a uniform policy for all faculty, there can be a guide for how workload is developed and measured, especially for promotion or awarding of tenure, focusing on equity and transparency. Developing clear definitions of workload, setting mutually agreed expectations, and sharing transparent workload assignments and distribution within the institution may be needed. It is imperative to discuss an optimal policy for equitable and transparent workload in each institution and in academic pharmacy as a whole; a lack of this effort can create undue hardship for faculty, decrease productivity, potentially worsen faculty morale, and ultimately impair faculty retention.

Keywords: faculty workload, faculty promotion, equity, workload metrics, faculty retention

INTRODUCTION

One of the most debated yet underdeveloped areas of pharmacy programs is defining and measuring faculty workload.¹⁻⁵ Issues related to faculty workload span across all levels of education and types of degree programs, and evidence-based strategies for measuring faculty workload have been discussed in higher education.⁶⁻⁹ In health professions education, faculty workload is difficult to quantify because faculty responsibilities and activities vary widely. There have been several attempts in the health professions literature, mostly from nursing¹⁰⁻¹⁴ and medicine,^{15,16} and few in pharmacy,^{1,2,4} to define and measure faculty workload. Because of its varied programs and continued faculty shortages, nursing literature has a persistent and concerted discussion about quantifying and evaluating faculty

workload using a standardized and meaningful metric.¹⁰⁻¹⁴ Overall, the efforts may still be perceived as inadequate because, without clear definitions and transparency of the data, the assignments and workload distribution may continue to be perceived as inequitable.

In academic pharmacy, perceptions regarding faculty workload assignments and effort are reflected in the recent data from the American Association of Colleges of Pharmacy (AACP) 2021 Curriculum Quality Survey of Faculty.¹⁷ Among 3619 respondents, 35% (n=1268) and 34% (n=1217) of the faculty disagreed or strongly disagreed that their program had a sufficient number of staff and a sufficient number of faculty to effectively address programmatic needs, respectively. Moreover, 18% (n=654) and 21% (n=750) of the faculty responded that the proportion of their time spent on teaching and on service was too much, respectively. Additionally, 15% (n=555) and 17% (n=604) disagreed or strongly disagreed that their performance assessment criteria were explicit and clear, or that their allocation of effort had been clearly

Corresponding Author: Sharon K. Park, Notre Dame of Maryland University, School of Pharmacy, 4701 North Charles St., KSC-135, Baltimore, MD 21210. Tel: 410-532-5576. Email: spark@ndm.edu

stated, respectively. Comparing the faculty survey summaries for public and private institutions, most faculty from both public and private institutions perceived their time allocation for teaching as appropriate (78% and 77%, respectively). However, there was a large difference in faculty perception of appropriate time spent on research (70% from public institutions compared with 56% from private institutions).

Despite a large percentage of the faculty who deemed their workload as being appropriate in the survey, still one-fifth of the entire faculty believed otherwise (n=1159). The literature on nursing and medicine faculty workload demonstrates that faculty perception of their workload can affect their job or career satisfaction,^{11,15,16,18} thus, understanding faculty workload issues in pharmacy programs may help faculty recruitment and retention, especially during this challenging time for all health care professions with the COVID-19 pandemic and its impact on physical and mental health. The negative impacts of the imbalances in workload and decreased job satisfaction may pose detrimental consequences to academic pharmacy, with faculty burning out, disengaged, and departing from their teaching positions. It is also vital in achieving some of the 2021-2024 AACP Strategic Priority Goals,¹⁹ including to “cultivate innovative faculty” (2.2), “cultivate and support a more diverse faculty” (3.2), and “promote well-being in colleges and schools of pharmacy” (4.2).

While it is important and perhaps necessary to have a clear definition of faculty workload across the pharmacy Academy and health professions, it may be impossible to define and implement a one-size-fits-all package for faculty workload due to individuals’ different roles and responsibilities, even within the same discipline. However, there can be a guide for how workload can be developed and measured, especially for faculty promotion or awarding of tenure as well as faculty retention. This Commentary discusses the challenges and opportunities in approaching faculty workload and potential suggestions to improve equity and job satisfaction among faculty in pharmacy and health professions.

Concerns With Current Measurements and Metrics

While there are various reasons why faculty workload should be measured, the task could be challenging to manage or controversial to implement. Faculty workload can be difficult to define and quantify fairly and equitably because diverse factors can play a role in the workload equation. Faculty workload policies must take into account different types of faculty appointments (eg, research focused vs teaching focused, clinical vs nonclinical, precepting Doctor of Pharmacy [PharmD] students and

residents vs nonprecepting roles, teaching in PharmD vs PhD or master’s programs) and levels of responsibilities and activities (eg, administrative duties at the school, campus bound, clinically focused). However, optimal policies must transcend disciplines, gender roles (eg, women faculty are given more mentoring and advising responsibilities; promotion and tenure time constraints are affected due to maternity leave),^{6,20} and career paths of all faculty if they are to be perceived as fair.^{1,20,21} Even within the didactic environment, the extent and type of teaching in health professions programs (eg, lecturing vs laboratory teaching, traditional vs blended or flipped, coordinating vs instructing, chairing vs contributing) may not be easily captured compared with research productivity outcomes (eg, the number of publications, the number and funding amount of grants).

Another area of concern pertaining to faculty workload is how workload is used in promotion and tenure processes. The outcomes needed to demonstrate a satisfactory performance evaluation may not always match with workload assignments, and it is unclear whether the workload should be used in the consideration for faculty promotion or reviewed only for productivity or outcomes. One of the reasons for a lack of consistent effort in measuring faculty workload may be due to its futility and the impossibility of accurately tracking and measuring all efforts. Doing so may jeopardize good citizenship for faculty and foster a culture of “bean counting” (ie, expectation of tracking and receiving credit for everything that faculty does). This scrutinization, while well-meaning, may decrease faculty morale and increase disengagement, burnout, and turnover among faculty.²² The ultimate goal is to recognize faculty excellence in different areas while trying to be equitable, and to balance their good citizenship while encouraging them to excel in their areas of focus. Alternatively, using generic workload policies that do not track and measure all efforts can potentially disincentivize faculty from activities that are not clearly tied to a workload value. This may promote individualism and further complicate workload distribution among faculty.

Accurately measuring faculty workload in the name of equity, transparency, and outcomes may be too prescriptive to capture the essence of what faculty do. Faculty, especially clinical faculty, typically earn less than their counterparts in other professional sectors for the same level of knowledge and skills. However, faculty work hours are somewhat flexible, which provides an intangible benefit for faculty. Thus, is there a value to quantifying workload and, more importantly, who actually benefits from workload evaluation? Quantifying faculty workload may be necessary and measurable for a “typical”

faculty but may not be sophisticated enough for faculty with unique positions or responsibilities, as their duties might be too unique and time-consuming to quantify and compare with others. Measurements and evaluations not well constructed or highly prescriptive may complicate the supervisor's ability to assign various roles and responsibilities. When too broad or generic, the workload assignment does not properly serve its intended purpose.

Establishing Faculty Workload Metrics Based on Equity and Transparency

The cornerstone for establishing workload policies within institutions is to provide equity and transparency among faculty. There should be a formal process as to who makes the decisions for an individual faculty member's workload and how and when that is negotiated, in the context of institutional needs. The individual who makes the decisions should be fully informed regarding all facets of the individual faculty's roles and responsibilities (Table 1) and recalibrated when circumstances change. The policy should also reflect the emphasis of the institution (eg, teaching intensive vs research intensive) and factors that are critical to the promotion and tenure process. It is important that this policy is introduced to the faculty when they are hired or, arguably, in the interview process, to serve as a guidance for setting mutually agreed expectations and engagement and reviewed with their supervisor at annual performance evaluations.

There are several benefits to the institution and the individual faculty member when establishing a transparent workload policy. For the institution, the workload policy allows justifiable assignment of work to a faculty member that is critical to the missions of the institution, whether it be teaching a course or leading a search committee. Having a transparent policy also minimizes the perception of unfair distribution of workload that could be based on gender, seniority, race, or other factors.^{1,20,22,23} Having a well-grounded policy allows the administration to make equitable decisions regarding merit, promotion, and tenure and protects the institution from perceived bias or discrimination claims regarding workload assignment or promotion/tenure processes. Finally, establishing a fair workload distribution process ensures that individuals who cannot or who are unwilling to perform certain mission-critical duties are informed of their underperformance as a first step to correcting such imbalance. Promoting a fair and transparent policy for workload distribution is important for ensuring good citizenship, improving faculty morale, increasing collegiality, and, ultimately, promoting faculty retention. Awareness of

workload data and fair assignments can also assist institutions in justifying additional faculty positions if they experience program growth and innovation or when replacing a vacancy.

For the individual faculty, a transparent workload policy can increase engagement with their colleagues and can help one recognize elements of the workload that are critical to the institution and, perhaps, may be beneficial for promotion and tenure decisions.²² Faculty may also be less inclined to feel injustice toward their workload, since the expectations of workload are clear for everyone. Additionally, such policies improve perceptions of equity.^{6,23} Workload policies should be dynamic and regularly updated as the needs of the institution change over time; as such, policies should include rotating or sharing of time-intensive tasks. They should be periodically reviewed and approved by the faculty to ensure transparency and full disclosure.

Considerations for Improvement in Workload Evaluation

While the merits of adopting workload policies and the need for workload quantification can be debated, there is a documented inequity of workload distribution in higher education,⁶ and anecdotal perceptions related to workload inequity are frequently shared. The Academy needs to explore workload policies, processes, and metrics across pharmacy programs through the lens of potentially disparate impact of their implementation. If they currently exist in certain pharmacy schools/colleges, policies might be variable in nature and limited in utility. Perhaps national academic pharmacy organizations (eg, AACP, Accreditation Council for Pharmacy Education [ACPE]) can propose guidance that aims to promote fair workload distribution among pharmacy faculty and minimize perceptions of workload inequities. Such guidance can serve as a starting point for pharmacy programs when drafting their own policies. Common terminology and metrics should be proposed, particularly given the complexity of academic pharmacy and other health professions and the differences across faculty in their responsibilities. Typical academic roles (ie, teaching, scholarship, research, service, clinical) may overlap or have many gray areas that cannot encompass all faculty activities. Therefore, the Academy may consider moving away from this classification when trying to quantify faculty effort. Ideally, the Academy can discuss with and learn from other health professions and establish a reasonable and recognized "weights of effort" for all the additional responsibilities that faculty have each year. The Academy may consider adding questions regarding measurement and perceived

Table 1. Key Considerations for Faculty Workload Measurements and Metrics

Element of workload	Contributing factors
Teaching	Program (eg, PharmD, PhD, master's) Course credit hours Class size (eg, number of enrollment x credits = student contact hours) Activities (laboratory vs lecture) Preparations for teaching/lesson planning Course coordinator role vs instructor Experiential teaching hours and number/type of trainees Advising (eg, student organizations, assigned advisees) Mentoring hours (formal or informal) Interprofessional courses/experiences Cocurricular involvement
Clinical work	Number of patients/beds serviced Number of hours per week in service Staffing tasks Number or hours of committee work Writing or presentations for clinical site Number of continuing education sessions provided Number or hours of teaching nonassigned trainees (eg, medical students and residents, etc.)
Research and scholarship	Grants and contracts commitment Number of patents Number of research proposal submissions Number of projects Number and type of publications Number and type of presentations Number of trainees for research oversight Research protocol oversight Impact of disseminated projects (ie, regional, national, international) Impact of trainees mentored (ie, employment, funding)
Service	School/university committee membership School/university committee chairship National and regional membership and chairship Residency/fellowship program directorship S/COP mission-driven and strategic activities Mentorship of faculty colleagues (formal and informal) Administrative duties (department/division chair, assistant/associate dean, director of research center/center of excellence)
Others/unexpected	Faculty shortage (eg, departure, reassignment, illness, or parental short-term leave, APPE student sharing) Student performance issues (eg, remediations) Additional student advising/mentoring (additional students assigned)

Abbreviations: PharmD=Doctor of Pharmacy; S/COP=school or college of pharmacy; APPE=advanced pharmacy practice experience.

equity in workload in the AACP Faculty Survey to heighten awareness in this area.¹⁹ Having guidance and best practice recommendations across the Academy can help reach equity beyond individual institutions.

CONCLUSION

Ensuring fair and transparent distribution of faculty workload is challenging for pharmacy programs but necessary for equity and engagement of the faculty workforce.

Various factors contribute to and should be taken into consideration when developing workload policies. Academic pharmacy should discuss an optimal policy for equitable and transparent workload and share guidance and best practice recommendations. A lack of such effort can create undue hardship for faculty, decrease productivity of faculty, potentially worsen faculty morale, and ultimately impair faculty retention.

REFERENCES

1. Wilborn TW, Timpe EM, Wu-Pong S, et al. Factors influencing faculty perceptions of teaching workload. *Curr Pharm Teach Learn*. 2013;5(1):9-13. doi:10.1016/j.cptl.2012.09.011
2. Fitzpatrick LR, Millette-Snodgrass C, Atef E. A novel mathematical model for determining faculty workload. *Am J Pharm Educ*. 2016;80(9):Article 152. <https://www.ajpe.org/content/ajpe/80/9/152.full.pdf>. Accessed February 27, 2023.
3. El-Ibiary SY, Yam L, Lee KC. Assessment of burnout and associated risk factors among pharmacy practice faculty in the United States. *Am J Pharm Educ*. 2017;81(4):Article 75. <https://www.ajpe.org/content/ajpe/81/4/75.full.pdf>. Accessed February 27, 2023.
4. Hoover RM, Hunter ML, Krueger KP. Survey of faculty workload and operational characteristics for academic drug information centers. *Curr Pharm Teach Learn*. 2018;10(5):579-583. doi:10.1016/j.cptl.2018.02.003
5. Prescott WA. Facilitating advancement of clinical-track pharmacy faculty members. *Am J Pharm Educ*. 2020;84(5):Article 7910. <https://www.ajpe.org/content/ajpe/84/5/7910.full.pdf>. Accessed February 27, 2023.
6. O'Meara K, Culpepper D, Misra J, Jaeger A. Equity-minded faculty workloads: What we can and should do now. *American Council on Education*. 2021. <https://www.acenet.edu/Documents/Equity-Minded-Faculty-Workloads.pdf>. Accessed February 27, 2023.
7. Soliman I, Soliman H. Academic workload and quality. *Assess Eval High Educ*. 1997;22(2):135-157. doi:10.1080/0260293970220204
8. Townsend BK, Rosser VJ. Workload issues and measures of faculty productivity. *NEA High Educ J*. 2007;14. https://web.archive.org/web/20180411220448id_/http://www.nea.org/assets/img/PubThoughtAndAction/TAA_07_02.pdf. Accessed February 27, 2023.
9. Griffith AS, Altinay Z. A framework to assess higher education faculty workload in U.S. universities. *Innov Educ Teach Int*. 2020; 57(6):691-700. doi:10.1080/14703297.2020.1786432
10. Bittner NP, Bechtel CF. Identifying and describing nurse faculty workload issues: a looming faculty shortage. *Nurs Educ Perspect*. 2017;38(4):171-176.
11. Lobo ML, Liesveld JA. Graduate nursing faculty workload in the United States. *J Prof Nurs*. 2013;29(5):276-281. doi:10.1016/j.profnurs.2012.10.006
12. Durham S, Merritt J, Sorrell J. Implementing a new faculty workload formula. *Nurs Educ Perspect*. 2007;28(4):184-189.
13. Ellis P. A comparison of policies on nurse faculty workload in the United States. *Nurs Educ Perspect*. 2013;34(5):303-309. doi:10.5480/1536-5026-34.5.303
14. Gerolamo AM, Roemer GF. Workload and the nurse faculty shortage: Implications for policy and research. *Nurs Outlook*. 2011; 59(5):259-265.e1. doi:10.1016/j.outlook.2011.01.002
15. Nassar AK, Waheed A, Tuma F. Academic clinicians' workload challenges and burnout analysis. *Cureus*. 2019;11(11):e6108. doi:10.7759/cureus.6108
16. Krueger P, White D, Meaney C, Wong J, Antao V, Kim F. Predictors of job satisfaction among academic family medicine faculty. *Can Fam Med*. 2017;63(3):e177-e-185. <https://www.cfp.ca/content/cfp/63/3/e177.full.pdf>. Accessed February 27, 2023.
17. American Association of Colleges of Pharmacy. Faculty Survey 2021 National Summary Report. July 2021. https://www.aacp.org/sites/default/files/2021-07/2021-faculty-national-summary-report_0.pdf. Accessed February 27, 2023.
18. Bittner NP, O'Connor M. Focus on retention: Identifying barriers to nurse faculty satisfaction. *Nurs Educ Perspect*. 2021;33(4): 251-254.
19. American Association of Colleges of Pharmacy. 2021-2024 Strategic plan priorities, goals, and objectives, July 22, 2021. <https://www.aacp.org/sites/default/files/2022-10/aacp-strategic-plan-2021-2024.pdf>. Accessed February 27, 2023.
20. O'Meara K, Kuvavaeva A, Nyunt G, Waugaman C, Jackson R. Asked more often: Gender differences in faculty workload in research universities and the work interactions that shape them. *Am Educ Res J*. 2017;54(6):1154-1186. doi:10.3102/0002831217716767
21. Phillips JA, Schumacher C, Arif S. Time spent, workload, and student and faculty perceptions in a blended learning environment. *Am J Pharm Educ*. 2016;80(6):Article 102. <https://www.ajpe.org/content/ajpe/80/6/102.full.pdf>. Accessed February 27, 2023.
22. Viswesh V, Hassell K, Coyne L, Erstad BL. Ten tips for pharmacy faculty members for successfully navigating promotion and tenure. *Am J Pharm Educ*. 2021;85(1):Article 8414. <https://www.ajpe.org/content/ajpe/85/1/8414.full.pdf>. Accessed February 27, 2023.
23. O'Meara K, Lennartz CJ, Kuvavaeva A, Jaeger A, Misra J. Department conditions and practices associated with faculty workload satisfaction and perceptions of equity. *J High Educ*. 2019;90(5):744-772. doi:10.1080/00221546.2019.1584025