**Teaching Dossier November 29, 2023**

### Position Description

|  |  |  |
| --- | --- | --- |
|  | Previous date range | **Current date range** |
| Teaching | 30% | **40%** |
| *- General* | *20%* | ***30%*** |
| *- Clinical Workplace* | *10%* | ***10%*** |
| Clinical (without learners) | 10% | **10%** |
| Research | 30% | **30%** |
| Administration | 30% | **20%** |

[Insert comment to contextualize if needed. Example: “Please note that although my job description is 10% of teaching in the clinical workplace, in practice, I have residents and students participating in nearly all of my clinics.”]

### Primary Teaching Responsibilities

[Describe the main focus of your teaching allocation for both the workplace component and general (i.e. non-clinical) component, as applicable]

### Teaching Philosophy

[Describe your teaching philosophy. Refer to this post for more information:

<https://www.ualberta.ca/the-quad/2020/02/crafting-a-teaching-philosophy-statement.html>]

### Teaching Strategies

[Provide examples describing how you have implemented your Teaching Philosophy into your teaching practices. Please include any innovations to your teaching.]

### Multifaceted Evaluation of Teaching

[Describe how you have evaluated your teaching beyond student evaluation scores and comments. For example, peer review of your teaching process, peer review of your course outline and materials, having a colleague develop a comprehensive review of your student evaluation comments, etc… You can find out more here: <https://policiesonline.ualberta.ca/PoliciesProcedures/Policies/Teaching-Learning-and-Evaluation-Policy.pdf>]

### Teaching Contributions – Non-Workplace Based (e.g. classroom, clinical skills, OSCE examiner)

*Undergraduate Medical Education (UME)*

*Frequently Taught*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Class / Course** | **Your role** | **Teaching Hours / year** | **Years in which you contributed** | **Description and Evidence of Teaching Excellence / Growth over time** |
| [e.g. MED529 Year 2 Psych]  | [e.g. lecturer, clinical skills preceptor etc..] | [e.g. 6 hours (4 hours prep, 2 hours delivery] | 2017, 2018, 2019, 2020, 2022, 2023 | E.g. I have been teaching the Neurotransmitter lecture for several years. When I first started teaching, the feedback from students indicated there was too much material and not much interactivity and I have focused on these areas over the years and these comments have reduced and now I get many students praising me for the interactivity in this class. |
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*Less Frequently / Ad hoc*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Class / Course** | **Your role** | **Teaching Hours / year** | **Years in which you contributed** | **Description and Evidence of Teaching Excellence / Growth over time** |
|  | [e.g. lecturer, clinical skills preceptor etc..] |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

*Postgraduate Medical Education (PGME) (i.e. residents)*

*Frequently Taught*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Class / Course** | **Your role** | **Teaching Hours / year** | **Years in which you contributed** | **Description and Evidence of Teaching Excellence / Growth over time** |
|  | [e.g. lecturer, simulation preceptor etc..] |  |  |  |
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*Less Frequently / Ad hoc*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Class / Course** | **Your role** | **Teaching Hours / year** | **Years in which you contributed** | **Description and Evidence of Teaching Excellence / Growth over time** |
|  | [e.g. lecturer, simulation preceptor etc..] |  |  |  |
|  |  |  |  |  |
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*Graduate Medical Education (i.e. Masters, PhD, Postdocs)*

*Frequently Taught*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Class / Course** | **Your role** | **Teaching Hours / year** | **Years in which you contributed** | **Description and Evidence of Teaching Excellence / Growth over time** |
|  | [e.g. instructor, etc..] |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

*Less Frequently / Ad hoc*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Class / Course** | **Your role** | **Teaching Hours / year** | **Years in which you contributed** | **Description and Evidence of Teaching Excellence / Growth over time** |
|  | [e.g. instructor, etc..] |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

*Faculty Development / Colleagues*

*Frequently Taught*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Class / Course** | **Your role** | **Teaching Hours / year** | **Years in which you contributed** | **Description and Evidence of Teaching Excellence / Growth over time** |
|  | [e.g. workshop facilitator, etc..] |  |  |  |
|  |  |  |  |  |
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*Less Frequently / Ad hoc*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Class / Course** | **Your role** | **Teaching Hours / year** | **Years in which you contributed** | **Description and Evidence of Teaching Excellence / Growth over time** |
|  | [e.g. workshop facilitator, etc..] |  |  |  |
|  |  |  |  |  |
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### Teaching Contributions – Workplace Based (i.e. Clinical)

*Undergraduate Medical Education (UME)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Course / Description** | **Your role** | **Teaching Hours / year** | **Years in which you contributed** | **Evidence of Teaching Excellence / Growth over time** |
| [e.g. MED 546] | [e.g. clinical supervisor etc..] | [13 weeks a year with 2-3 learners per week] | 2010-2023 | [insert how you’ve changed your approach based on feedback from learners and/or peers or other things you’ve learned] |
|  |  |  |  |  |
|  |  |  |  |  |

*Postgraduate Medical Education (PGME) (i.e. residents)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Course / Description** | **Your role** | **Teaching Hours / year** | **Years in which you contributed** | **Evidence of Teaching Excellence / Growth over time** |
|  | [e.g. longitudinal clinic supervisor etc..] |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

### Teaching Contributions – Curriculum Development

[insert curriculum development you have contributed to and describe your role, learner level, and scope]

### Graduate Student Supervision

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Trainee 1 Name** | **Your role** | **Start Date** | **End Date** (if applicable) | **Degree (e.g. Masters, PhD)** | **Program** |
|  | [e.g. primary supervisor] |  |  |  |  |

[Contextualize this supervision activity. Insert any unique factors, e.g. extended program, expected degree completion]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Trainee 2 Name** | **Your role** | **Start Date** | **End Date** (if applicable) | **Degree (e.g. Masters, PhD)** | **Program** |
|  | [e.g. primary supervisor] |  |  |  |  |

[Contextualize this supervision activity. Insert any unique factors, e.g. extended program, expected degree completion]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Trainee 3 Name** | **Your role** | **Start Date** | **End Date** (if applicable) | **Degree (e.g. Masters, PhD)** | **Program** |
|  | [e.g. primary supervisor] |  |  |  |  |

[Contextualize this supervision activity. Insert any unique factors, e.g. extended program, expected degree completion]

### Other Trainee Supervision (e.g. medical students, residents not in a formal graduate degree program)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Trainee 1 Name** | **Your role** | **Start Date** | **End Date** (if applicable) | **Trainee Level**  | **Project Description** |
|  | [e.g. primary supervisor] |  |  |  |  |

[Contextualize this supervision activity. Insert any unique factors, e.g. extended program, expected degree completion]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Trainee 2 Name** | **Your role** | **Start Date** | **End Date** (if applicable) | **Trainee Level**  | **Project Description** |
|  | [e.g. primary supervisor] |  |  |  |  |

[Contextualize this supervision activity. Insert any unique factors, e.g. extended program, expected degree completion]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Trainee 3 Name** | **Your role** | **Start Date** | **End Date** (if applicable) | **Trainee Level**  | **Program** |
|  | [e.g. primary supervisor] |  |  |  |  |

[Contextualize this supervision activity. Insert any unique factors, e.g. extended program, expected degree completion]

### Accomplishments of your Trainees

|  |  |  |  |
| --- | --- | --- | --- |
| **Trainee Name** | **Accomplishment Type** | **Date Received** | **Notes** |
|  | [insert if this is an award, scholarship, studentship, conference presentation, publication, etc…] |  | [Describe the accomplishment and include $ value if applicable] |

### Mentoring / Advising of Learners and Colleagues

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Mentee / Advisee name** | **Mentee / Advisee level** | **Start Date** | **End Date** (if applicable) | **Focus of mentorship relationship (e.g. career, academic productivity, etc…)** |
|  | [e.g. medical student, resident, Assistant Professor…] |  |  |  |

### Reflection on Teaching

[Write a reflection on your teaching, appropriate to the above teaching contributions - for more help you can check out CTL’s page: <https://www.ualberta.ca/centre-for-teaching-and-learning/teaching-support/reflection/what-to-reflecting-on-your-teaching/index.html>]

**Activities Undertaken to Improve Teaching**

[Describe activities such as professional development related to teaching and education (e.g. faculty development courses you have taken, advanced degrees etc…). Peer review of your teaching can be included in the Multifaceted Evaluation section higher up and how you have adjusted your teaching in response to learner feedback can be included in the column “evidence of teaching excellence / growth” above in the teaching contributions section]

**Teaching Awards**

|  |  |  |  |
| --- | --- | --- | --- |
| **Award Name** | **Date Awarded** | **Scope** | **Notes** |
|  |  | [local, regional, national etc…] | [Describe the award: who nominated you / learner level, how many teachers are eligible (if known), significance of the award etc… If you have the terms of reference for the award, state it briefly here.] |

### Funding and Scholarship

*Funding*

[list all competitive funding you have received for educational products of scholarship]

*Peer-reviewed Publications*

[list all of your peer-reviewed publications that focus on the education domain]

*Presentations*

[list all of your academic presentations that focus on the education domain e.g. grand rounds, conferences, etc…]

*Other Educational Products of Scholarship*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Title / Description** | **Year released / implemented** | **Scope** | **Peer reviewed?** | **Mode of dissemination** |
|  |  | [local, provincial, national etc…] | [Y/N] |  |

**Description:** [Please describe how this work meet’s Glassick’s criteria of scholarship:

Clear goals, adequate preparation, appropriate methodology, significant results, effective presentation, and reflective critique. You can also include policy papers, white papers for national educational bodies if they meet Glassick’s definition]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Title / Description** | **Year released / implemented** | **Scope** | **Peer reviewed?** | **Mode of dissemination** |
|  |  | [local, provincial, national etc…] | [Y/N] |  |

**Description:** [Please describe how this work meet’s Glassick’s criteria of scholarship:

Clear goals, adequate preparation, appropriate methodology, significant results, effective presentation, and reflective critique. You can also include policy papers, white papers for national educational bodies if they meet Glassick’s definition]

### Educational Leadership and Service

*Leadership Positions*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Position** | **Start Date** | **End Date** (if applicable) | **Scope** | **Description** |
| [e.g. Assistant Dean, MD Program, Chair, Exam Board, Royal College] | 2018 | 2023 | [local, national etc..] | [insert primary activities related to role and FTE for role] |
| Chair, Xxxx Committee, Faculty of Medicine & Dentistry | 2016 | ongoing | Local |  |

*Other Educational Service / Committees*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Description of Activity** | **Start Date** | **End Date** (if applicable) | **Scope** | **Description** |
| [e.g. reviewer, committee member etc…] |  |  | [local, national etc..] | [insert primary activities related to role] |
|  |  |  |  |  |