Development of a Physical Therapy Faculty Workload Measurement Tool

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DEVELOPMENT OF A PHYSICAL THERAPY FACULTY WORKLOAD MEASUREMENT TOOL
Wanda Nitsch, PT, PhD; Kathleen Manella, PT, PhD; Jodi Liphart, PT, DHSc; Cherie Peters-Brinkerhoff, PT, EdD; Terri Roberts, OTD, OTR/L

INTRODUCTION
- Counting credit hours is not an equitable way to measure faculty workload in physical therapy education considering online delivery with heavy workloads negatively impacting satisfaction, learning outcomes, and research productivity.
- The University of St. Augustine for Health Sciences (USAHS) is a graduate-level institution in the United States, with seven Doctor of Physical Therapy programs offered in four US locations.
- USAHS faculty workload includes 50% teaching, 20% scholarship, 30% a combination of service, administration, release, and discretionary time.
- The aim of this study was to develop a faculty workload measurement tool that quantifies productivity, was easy to use, and equitable.

METHODS
- Faculty workload taskforce reviewed literature, benchmarked, and gathered data regarding teaching time per course, committee and research time.
- Contact hour-point conversion tables were created in an MS Excel worksheet based on type of delivery method, number of faculty teaching in the course, and number and type of learning assessments completed; aligned with promotion criteria.
- A small pilot of five faculty was completed and adjustments made.
- Two large faculty pilots were completed; data and open-ended responses were used to develop a final version of the workload measurement tool to be fully implemented in late 2018.

RESULTS
- The tool was built for all full-time faculty (1 FTE) with a 100% workload equivalent to 100 points.
- Standardized expectation guidelines needed to be determined before tool development.
- The taskforce developed a workload measurement tool that appears to be accurate, transparent, and impartial.
- With the addition of directions and the self-calculating formulas, the form provides quick, consistent information to faculty and their supervisors regarding division of workload between the four main areas of faculty time.

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FUTURE CONSIDERATIONS
Two issues arose during the development process that will require additional attention:
1) some faculty with high administrative responsibilities need adjusted workload formulas; and
2) any curriculum change will require new conversion tables.

Future work will involve adding professional development to the tool and more detailed instructions.

IMPLICATIONS
The findings of this study indicate that an equitable measurement of faculty workload in health science programs can be achieved. An accurate and transparent measurement tool can support efficient use of resources, productivity, and faculty satisfaction.

REFERENCES

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