



CFAS Connects: Faculty Perspectives and Experiences in the COVID Era

Wednesday, September 30, 2020; 3:00 – 4:00 p.m.

Moderators: CFAS Diversity and Inclusion Committee Chair VJ Periyakoil, MD, and CFAS Mission Alignment and Impact of Faculty Educators Committee Chair Stewart Babbott, MD, and CFAS Chair-elect Aviad “Adi” Haramati, PhD

Main themes:

The pandemic has exposed many of the challenges medicine has faced and spoke to the reality that COVID-19 has disproportionately affected people of color. The silver lining is that the pandemic has unveiled some of the things that have been happening in the country for generations, including structural racism. This crisis has allowed the opportunity to have open and honest conversations. CFAS has a responsibility to represent all faculty voices across academic medicine.

Discussion

- The American College of Radiology’s stands on equity and racial justice, like the AAMC’s, has been helpful to staff members and engendered a stronger allegiance to the organization. They have also provided opportunities for open communication and training to combat these issues.
- One institution does not own a clinical enterprise, but their students visit sites all over Ohio and other nearby states. Those clinical faculties have medical school appointments. Salaries were cut at Akron Medical and there are no raises until the end of 2020. Many of these losses have started to come back as they have gotten a handle on the changes as a result of the pandemic.
- For another institution, changes in procedures have happened and faculty are almost never involved in these decisions. Many additional stresses have been added to the plates of faculty members, and little to no consideration was made for things like child care by leadership. Much of the staff have been working remotely during this time and some staff cuts have happened. He later explained that the labs have been closed to students and basic scientists since the pandemic, so research is not happening. Most of their financial accounts have been frozen as well.
- One rep discussed the “minority tax” happening at institutions, where minority faculty feel that they must respond to organization initiatives related to structural racism and the efforts to combat it. This has forced faculty in general to work harder than they ever have.
- Another rep expressed that faculty have had to work harder than they ever have during this pandemic, while they are being given additional tasks. Amid the COVID-positive rate in her state rising to 5%, faculty are being asked to come back to work at their institutions.
- A rep echoed many of the same things happening at other institutions. Many of those lost wages and benefits have started to come back, but their initial loss took an emotional toll on faculty. Being an African American faculty member at her institution, there has been increasing

desire from her colleagues to address the other pandemics happening in the country, including police brutality and structural racism. She has been called upon to tell their stories in a space that does not feel safe.

- One rep feels that her workload (personal and professional) has increased, while her capacity and ability to focus is much lower.
- Someone spoke about promotion and tenure, and how much of the tenure track has been paused during the pandemic. She explained that elective surgeries were the first thing to be paused during the pandemic but have been the last thing to return. Instead, surgeons are being asked to do surgeries during times that conflict with trainee times.
- There was discussion of “Zoom fatigue” happening at institutions. While any interaction with colleagues is welcomed, it is still very different doing so virtually. A different rep explained that more faculty are coming to virtual meetings than the previous in-person meetings.
- The increasing amount of Zoom meetings is making the days much longer. Faculty are being asked to work at 110% but are not given solutions to issues that have arisen with the new normal. Also, faculty will lose their vacation time because they have been asked to work during the time that they would usually take vacation.
- One rep felt the pressure of her faculty as a Division Chief. Faculty at her institution donated their vacation time to fight COVID at a time where a lot of faculty were laid off. This meant that those that remained employed had to work even harder.
- For another rep, operational meetings of departments have worked fine on Zoom. Surgeon attendance has gone up tremendously as a result. However, human connection has been missing. Zoom is not giving faculty a place to socialize with colleagues.
- Certain departments are more active on Zoom. There have been health equity updates on these calls as opposed to operational updates. One department held weekly wellness check-in appointments to ascertain how faculty were doing for just 30 minutes.
- One rep described a mass exodus of radiologists leaving New York City during the pandemic because of the way things have been going there. The workload is increasing and the return to school for children has not made it any easier. One positive is that her department has started a completely virtual radiology elective and many of the more recent attendees have been visiting students. As a CFAS rep, she feels that the ideas the council had come up with surrounding resilience and faculty wellbeing need to be used to help at all institutions.
- Another rep reported that many faculty members (as well as those in the general population) feel physically and financially vulnerable. Many mental health issues have arisen among faculty and patients as a result of the pandemic. It’s challenging to mitigate these issues, but the rewards for the hard work cannot happen due to financial constraints and social distancing.

Comments

- We are expected to perform at the same level as we did when we were in person, but now we have a ton of additional meetings and training related to COVID. We are working from home but are now being told we need to come back, as our governor has completely opened the state while our COVID positive rate is above 5% and it looks like a 3rd wave might be arriving.
- I feel like my workload has increased 100% (clinical, academic, administrative, home, kids, etc.), while my capacity (ability to focus, complete tasks, plan, etc.) is at 50.
- How faculty up for tenure are doing during the COVID-19 crisis at your institution? We are taking case by case!!
- For our basic science researchers, labs had been totally shut down for several months. Slow, limited openings now, no students until next month, frequent visits by monitors to assure compliance, many of our financial accounts (not grants) frozen.
- I am clinical faculty- we have not had salary cuts- but are told they may still come at first of year. As a small school there have been many more meeting to establish protocols for COVID screening and acute testing, etc. We have had a clinical faculty member who has not been comfortable coming into the office because of COVID fears- limiting patient care as well as access for learners.
- I divide my time between clinical, teaching and admin - hard for our educators who have had to pivot - teaching in person, online, planning for every contingency. We are tired.
- More senior faculty are being impacted tremendously, I had witnessed the unfortunate decline in respect for senior faculty in past years, but I felt some institutions are using the Pandemic as an excuse to push out many of them due to the loss of money during the pandemic crisis.
- Started better in the beginning of the pandemic, but now worse
- Regarding the attendance of conferences online, it's in and out. You can go but it's harder to engage.
- We had many more people coming to our society meeting in an online setting.
- Zoom meetings have seen better attendance by faculty. The meetings are more frequent and makes your day longer.
- Agree that the work days are much longer and for non-clinical faculty like me, there is a growing expectation that we can do more since we are primarily at home
- Our department is definitively closer through Zoom/Teams meetings. But Zooming from 6 a.m. from 7 or 8 p.m. means there's no work-life separation. We're Zooming all the time.
- More quantity, but less quality...
- More community preceptors and adjunct faculty are joining in our zoom meetings. We have 350 faculty in our dept., 25 employed but usually only 15 join faculty meetings. Now sometimes 50-

75 join. We've changed our meetings to have a health equity focus and presentation each month.

- Attendance in my department has been better with virtual meetings.
- Re: remote working, there are also disparities in home-based equipment (computer, internet, etc.) and our university's policy is not to reimburse or cover expenses related to the needs for remote working. For some, this is an added expense that is difficult to cover.
- Agree -- vacation lost, given partial "furloughs" with no change to hours and in fact being asked to work more and doing support work for those no longer there or working. My department has varied in attendance.
- I am sustained by my patients. There is such a sense of isolation. Being able to have that contact with another human is very valuable to me. I find that I spend more time dealing with the person in the office as much as the patient in my office.
- Here up north, it's become extremely difficult to buy a house! We have a lot of "urban refugees"!
- I am happy everyone is well and dealing with the crisis in the best possible way. We will persevere, we just have to show resilience. WE CAN DO IT!!!
- The crisis has really shown how non-tenured faculty are at risk.