McMaster Program for Faculty Development (MacPFD)

Spark Podcast

Official Transcript

Episode Number: 1
Title of Episode: Design Thinking with Dr. Fleisig | Nursing Education & Academic Leadership with Dr. Ruth Chen
Producer: Nick Hoskin
Music by: Scott Holmes
Featured Guests: Dr. Fleisig and Dr. Ruth Chen
Interviewer: Dr. Teresa Chan
Date of original release: September 23, 2020

Dr. Teresa Chan (00:02):
Welcome to the MacPFD Spark Podcast. This is a podcast that focuses on helping you develop your career as a faculty member. Our goal is to spark your enthusiasm and passion in one of our four main pillars of development, creativity and humanism, scholarly practice, leadership, and of course, teaching and supervision. Throughout this podcast we're aiming to bring you insightful and inspiring conversations that spark your interests and opened up your mind to new ways to grow as a faculty member. Okay, have we sparked your interest yet? Let's get started with this month's episode.
Thank you for tuning into our first MacPFD Spark Podcast episode, my name is Teresa Chan, and I'm the Assistant Dean for the Program for Faculty Development here at McMaster's Faculty of Health Sciences. I'm going to be bringing you two segments where I've interviewed some really cool people that I'd like you to know about.
In this episode, we'll be featuring a discussion that I had with Dr. Robert Fleisig. He's cross appointed to the faculty of health sciences, but he mainly situates himself in the faculty of engineering here at McMaster University. He is a fellow design thinking nerd just like me, so we're going to be taking a deep dive into the idea of design thinking and where it fits within the academy.
And next we have a really amazing person that I want you to meet, Dr. Ruth Chen. She is in the school of nursing and she's both an Assistant Dean and Associate Professor. In this segment she shares with us some pearls for leading in the academic environment. She drops so many awesome pearls and tips it's amazing, and it's no wonder because she is the assistant director of the academic leadership program, and she is also the course director of the masters of health sciences education program's leadership and management course. Are you really excited? Because you should be. Let's listen in now to the first segment.
Hello everyone, I am here with one of my colleagues from the school of engineering, in the practice and technology stream, Dr. Robert Fleisig. He is just a creative soul and an awesome, inspiring teacher, and I thought that, you know what? It's probably time for us to look outside our usual faculty of health sciences and bring in some people that are inspirational to talk to. So Rob, can you say hi to everyone?

Dr. Fleisig (02:27):
Hello, I'm Robert Fleisig, nice to meet you.

Dr. Teresa Chan (02:30):
All right, well thank you very much. And Rob and I are, we've intersected a couple different places, but I first met you, I think, when colleague of ours, Sean Park, he's one of our teaching professors in the faculty of health sciences, and you started on this track to improve and use design thinking to improve education. Can you tell me a little bit more about that project?

Dr. Fleisig (02:51):
Well, that was something Sean Park and I began, it was probably a year and a half ago, we applied for and earned the MacPherson Institute's Leadership in Teaching & Learning Fellowship, ostensibly to create a community of creative practice through design thinking around education at McMaster. So it's primarily targeting not students, but other instructors and educators who are looking to insert experiential learning or better student experience into their classroom and everyday teaching. Yeah, so what we did last year, we actually ran a two day workshop for a group of people, about 10 instructors and educators, where we gave them a little bit of a crash course, a bootcamp, first of all a day where we showed them a little bit about design thinking, and the second day where we actually had them to rethink or reimagine or recreate one of the student experiences that they used to teach their students.

Dr. Teresa Chan (03:42):
Oh, that's really interesting. I mean, I've heard of design thinking before, can you give us a rundown of what that is?

Dr. Fleisig (03:47):
So design thinking has a long history, but I think the design thinking, what we're talking about is something that's been popularized by, and studied very heavily, by the D School at Stanford, it came actually out of a practice environment, it came out of the practice world. But essentially what it is, is a way of designing by focusing very heavily on the human experience, and doing that in a way that is very creative as the primary way of bringing people together and thinking about creating great new products, great new services, great new experiences, no matter what the are. So it applies to technology as much as it applies to, well, education.

Dr. Teresa Chan (04:24):
Yeah, that sounds amazing. I mean, I'll be honest with you, I'm playing dumb for the podcast, but I've written a paper on design thinking and it's uses in medical education, so I'm actually a big fan of it, I asked that question more because I think some people might not have heard about it, but I'm a big fan, I'm definitely a convert. I think that it fits in with the bigger movements around user centered or student centered, or even patient centered as a clinician movement, we actually care about the person at the other end, rather than coming at it from a very self-centered, I'm the prof, it's much more easy for me to just get on a podium and just start talking, that is way easier than designing a really good series of quests or activities or breakout groups, and all the prep work that goes into that, that's actually much harder to do.
So the temptation, obviously, is just to do whatever easiest for us, but I don't think that gets us closer to the best experience for our end users, whether they are, like I said, other faculty members, like you've done, or other students.

Dr. Fleisig (05:24):
It's challenging in healthcare, just like in education, you're trying to design for the big and for the small, but it's an and, not an or, the big being the system, being the healthcare outcomes that you're

trying to attain, or the educational learning that you're trying to attain. At the same time you want to create, we want to solve or design for the small, the experience of the patient, experience of the student. And that's the big design challenge, it's not how we do one or the other, it's how to do both of them together.

Dr. Teresa Chan (05:48):
Yeah, I love thinking about those things as design challenges, because I think a lot of us in teaching, the temptation is to think of them as complaints, or problems, or fires to put out, but I think that when you reframe it as a challenge, game on, let's do it, [inaudible 00:06:05].

Dr. Fleisig (06:05):
That's the exciting part, and when you make it that more of a challenge, the opportunity for creativity is that much greater.

Dr. Teresa Chan (06:13):
Yeah, and I think that that's really exciting for me to hear. Okay, so tell me more about this MacPherson thing.

Dr. Fleisig (06:19):
The Leadership in Teaching and Learning Fellowships, and so where Sean and I imagine this is going next is, I think there's an opportunity here, especially with our teaching professors, is to how do we apply design thinking or human centered design approaches to the design of educational leadership initiative. So imagine that what you're trying to do is you're trying to build or grow a community around some of the teaching you do. So how do you do that? How do you design those experiences for, it might be other faculty, it may be students, it may be for members of the community, it might be for all of them, but to reimagine or to create those experiences in a way that it would be positive for them, but also creates the sort of outcomes that you're looking for as an educator.

Dr. Teresa Chan (07:00):
Amazing.

Dr. Fleisig (07:00):
So that could be developing a mentorship program, or developing a community practice, or any number of other things.

Dr. Teresa Chan (07:06):
Or a community engagement, there's the Office of Community Engagement that gave a talk at our virtual annual day in faculty development this year, and they had a really good impact, and I think a lot of people walked away scratching their heads and in thinking about how they might be able to do that, and I think that your program might be the way to do it. So we should definitely talk more and think about how we can develop that out, but that's really exciting to hear. So you're doing really what my job is doing in faculty health sciences, you're just doing it maybe for everyone on campus, so it'd be lovely for us to obviously partner and do some really cross campus stuff.

Dr. Fleisig (07:38):
I would love to do that, yeah.

Dr. Teresa Chan (07:39):
But yeah, this feels super exciting. Now in terms of the LTL fellowship, was it hard, just tell me a little bit more about that, because I think there are probably other members of our faculty health sciences that just didn't even know this fellowship, is it something, do you get money to do this project? Or what is it?

Dr. Fleisig (07:55):
It's like any other similar such program, it's something's that put out, there's a call annually. I think pretty well any faculty member can apply for it. Of course there is an application process, you have to put together a proposal, budget, and all that, it goes through peer review, and I think you can get up to $15,000 for a two year fellowship.

Dr. Teresa Chan (08:17):
Oh, very cool. And that's to fund the work probably, right? Not so much yourself.

Dr. Fleisig (08:21):
That's right, that's right.

Dr. Teresa Chan (08:21):
Yeah, yeah.

Dr. Fleisig (08:22):
Fund your work, it could be to fund dissemination, it could be fund probably students, if possible.

Dr. Teresa Chan (08:30):
Yeah, yeah, like work study students, or other students to apprentice under you.

Dr. Fleisig (08:33):
Or student partners, yeah.

Dr. Teresa Chan (08:34):
Yeah, yeah, student partners to make the project work, that sounds really cool.

Dr. Fleisig (08:34):
Yeah.

Dr. Teresa Chan (08:37):
Yeah, so I guess people have to just look out for that email when their chair sends it to them, I guess, or their head of school, because I think it's easy to let those things fly by, but if you're someone that's truly interested in education, it sounds like this could be a great opportunity for you to carve a niche in an area and just dedicate some time and resources to that. I mean, I think it sounds like the MacPherson, I think the MacPherson Institute also supports the LTL fellows in some way?

Dr. Fleisig (09:01):
Oh, absolutely. It's not simply a fellowship program, they build a community around it. There's of course the expectation that you're going to share the work that you come up with, there's a hope that there's going to be some level of scholarship that's going to come out of it, so it's intended to leave a longterm mark, not just to be a one-off thing.

Dr. Teresa Chan (09:21):
Oh, that's very cool, so it's kickstarting your scholarly journey.

Dr. Fleisig (09:21):
Yeah.

Dr. Teresa Chan (09:24):
Yeah. We've been doing a lot of stuff around scholarly practice, so that's good, this is a real pearl for a lot of people, if they're carving at a scholarship niche in education. We have a lot of people super we're excited about education scholarship, one of my colleagues, actually now that you reminded me what it is, actually holds one of these. He was able to accrue some funding to actually do the clinician educator diploma program that we have for, unfortunately right now just the physicians, but hopefully we'll be expanding that program soon to have other people that can participate as well, and he built a simulation program at Joe Brant Memorial Hospital, and was working with one of our med students as a student partner, so Dr. [inaudible 00:10:03] is another one of our FHS faculty who have done that. So now we have both Sean and Aleim that people could reach out to you and maybe ask what the fellowship was all about. All right, well thank you so much for sharing.

Dr. Fleisig (10:15):
You're welcome.
Dr. Teresa Chan (10:15):
I'm going to bring you back again to talk a little bit more about all the cool stuff that you do, because you're such a creative soul, so thank you so much for spending the time with me right now.

Dr. Fleisig (10:23):
You're welcome, Teresa, it was my pleasure.

Dr. Teresa Chan (10:26):
Wow, that was a really awesome first segment of the MacPFD Spark Podcast. And now, onto our second segment.
All right, hello everyone, I'm here with one of my friends and colleagues, Dr. Ruth Chen. Dr. Chen is an Assistant Dean in the School of Nursing, and she is also an Associate Professor in the same school. And so welcome, Ruth, to this podcast.

Dr. Ruth Chen (10:56):
Thanks, Teresa, it's good to be here.

Dr. Teresa Chan (10:58):
Oh, great, thank you, thank you for being here. So I want to start with a little conversation with you just to understand what it means to be a nursing professor, because first of all we have some listeners that might be just in nursing school and just excited about education, might be listening to this as a fan boy, a fan girl, of someone like you, who's risen in the ranks and does great stuff. Some people might be community nurses that aren't sure how they would actually get back in the game if they wanted to get involved with teaching, and so I thought I'd have a conversation with you a little bit about your personal journey and how you got to where you are. So can you tell me a little bit about that?

Dr. Ruth Chen (11:32):
Sure, so our school of nursing is quite large, actually. We have both an undergraduate and a graduate program, and our undergraduate program is delivered across three sites, we have the McMaster, Mohawk, and Conestoga collaboratives BScN program, which has approximately 2000 students enrolled every year. And within the school of nursing, we also deliver graduate programs for master's degree, primary healthcare nurse practitioner program, as well as PhD program.
So many different programs across the undergraduate and graduate programs, and then also we have full-time faculty, approximately 37 full-time faculty, and then we hire sessional or part-time instructors every semester to teach across our entire school of nursing. Additionally, we also have clinical faculty appointments, and so our clinical faculty are also involved with the school of nursing. So every year, every semester we have approximately 100 sessional instructors that teach with the school of nursing, and we have a pool of approximately 250 clinical faculty members as well. So there are many opportunities to be connected with the school of nursing if you are working outside of the school and in a clinical practice setting.

Dr. Teresa Chan (12:56):
And so from your perspective, how did you get to where you are right now?

Dr. Ruth Chen (13:00):
The path that I took was probably not, if I think back to it, it wasn't deliberate and it was very much not intentional. I pretty much fell into teaching with the school of nursing way back in the early 2000s. So I came to the school of nursing in 2002, and at that time I was brought on as a CLA, so a contractually limited appointment position. And then I moved into the school of nursing teaching full time, into a teaching track role. So we have two different types of tracks in the school, and across the university, we have a tenure track path, and then also a teaching professor track, so I moved into a teaching professor track and moved into permanence. And then in 2017 I took on the role of Assistant Dean of Academic Resources and the department education coordinator. So there are DECs, or department and education coordinators, across all of the faculty of health sciences, and this is one of the roles that I have in the school of nursing as well.

Dr. Teresa Chan (14:11):
And somewhere along the way, I guess, did you do your graduate training before you came, or did you do it after?

Dr. Ruth Chen (14:16):
Oh yeah, good question. Yeah, this all happened pretty serendipitously, I guess. I was trained in the US for my undergraduate degree in the sciences, as well as my graduate degree in nursing, and so being trained as a nurse practitioner in the US, I was really expecting to stay in the US to practice, and I ended up moving to teach at UBC at first for a year, and then I came to McMaster. So after I came to McMaster in 2002 I was teaching with the school of nursing exclusively, and then I decided to do my PhD at McMaster, and so that's when I connected with Geoff Norman in the CE&B department, I think it's now called AGI, and I did my PhD with him.

Dr. Teresa Chan (15:06):
Okay, very cool. All right, so you have that in common with me, Geoff has also been one of my mentors, and he will be on the podcast at some point, or has been already, I don't know. But the idea would be that, yeah, I mean, I think that you've mirrored what I hear a lot from academics, is that it's not always a strict shot path.

Dr. Ruth Chen (15:06):
Definitely.

Dr. Teresa Chan (15:24):
People see on someone like yourself as being this rock star person that does all this cool stuff, and really has a finger in the pulse on nursing education, at least at here at McMaster, and yet you didn't set out to go for that path, and so that's a leadership journey that you've been on that's not necessarily straightforward, but meanders and you took different opportunities as you went, right?

Dr. Ruth Chen (15:48):
Definitely. That's something that I realize pretty much on a regular basis, is that this path that I am on was completely not structured and not planned, and if I think back to why I decided to even go into nursing, for example, I did not ever envision that I was going to be here in Canada, in Ontario, at McMaster, and primarily within an administrative role, rather than practicing as a nurse practitioner with children, which was where my training was, in the US. So definitely serendipity, a lot of different doors opened along the way that I didn't expect, and so I'm very happy to be here now, but it wasn't intentional, that's for sure.

Dr. Teresa Chan (16:39):
Oh, that's interesting, because I know that you also teach in our health science education program and teach the leadership course, and so clearly you have some training in leadership. Do you think this is common for a lot of people, that their leadership journeys are actually not as straightforward?

Dr. Ruth Chen (16:56):
Yeah, good question.

Dr. Teresa Chan (16:56):
You've seen that meme online where it's the pathway that other people see is a straight line and it's [inaudible 00:17:03], but in real life it's this meandering line that goes up and down, up and down, and the trend is probably in the right direction, but most people, their leadership journeys are more reflective of what you've just confessed, which is that it wasn't straightforward, and it does take different detours at different times.

Dr. Ruth Chen (17:19):
Yeah, I think that's a really good point, because what I find in my administrative role is that I meet with a lot of individuals who are asking for advice about next steps. And so they come to me with their various life experiences, their various clinical backgrounds, and they say, "Well, what should I do next? How do I position myself?" And while I try to provide as much insight and guidance into that as I can, from my own experiences and my perspective, so much of it is that opportunities will come and present themselves when you don't expect it and you're pursuing certain directions, and sometimes those directions and paths will work out, and sometimes they won't.
In the leadership course you mentioned, that too came to me and fell into my lap four years ago now, actually. So I teach in the health sciences education program, the master's program there, and the course that I teach is leadership and management in health profession and education. I wasn't looking to teach that course, it fell into my lap, and then I started to develop that course, and concurrently I assumed another leadership role within the school of nursing as well. And so it became a great opportunity for me not only to develop my leadership skill and my leadership

knowledge, so having that theoretical knowledge complementary, or in parallel with the leadership experience, but also then to be developing a course that could bridge the theoretical with the practice. So a lot of what I have learned in the past few years in being the course coordinator is based on learning from experience, and not because I set out to get a degree in leadership management, but rather learning as I go.

Dr. Teresa Chan (19:10):
And I think as you learn as you go, there's also opportunities, like [inaudible 00:19:14] Harvard Business Review, or you take a course here and there, or maybe you do a MOOC. There's so many opportunities now, hopefully with program faculty development you can do some of our leadership pillar work and up your game in those ways, and I think leadership is just like a clinical skill, you have to have a leadership practice. So you were probably right in the right spot where you're at the intersection between theory then, and practice, which I think all of us, that will probably hopefully resonate with others that are listening to the podcast.

Dr. Ruth Chen (19:42):
Yeah. I would say, if I think about leadership and management specifically, and reflecting on what I have learned, or what I've gathered from all these different resources that I've been able to access, as well as learning from resources like the Harvard Business Reviews, et cetera. I also took a management development program at the Harvard Graduate School in, I think it was 2017 now, and so helped to solidify some of theoretical knowledge. But if I were to summarize what I think are the three key components of any person that is interested or wants to develop their leadership skill, I'll summarize it very quickly in these three points. First one would be that if you want to be a leader you have to be able to get things done. The second point is that as a leader, you have to have people that want to follow you. And then the third point is that as a leader you have to have the wisdom to be able to make good decisions. And I could totally break these three components down for you further if you're interested.

Dr. Teresa Chan (20:54):
Certainly, I'd love to hear more about each one of those, so why don't we go over the first one?

Dr. Ruth Chen (20:59):
Well, I've thought about these three factors or variables a lot because of not only what I've had to practice, but also what I've seen and observed from others. So the first one, you need to be able to get things done. The reason I say this is the necessary first step, even though in my mind I visualize these three components as three legs of a stool, and if you have only two legs, or if you only have one leg of the stool, obviously the stool doesn't work. So the first step of being able to get things done is because frequently I see in the literature, and I see in leadership practice, there are ways in which leaders can get paralyzed with indecision, and get paralyzed in not making decisions and not getting things done by resting in the safety of committees, further consultations, and further meetings and meetings and meetings to make a decision. So the necessary first step, you need to be able to get things done.

So the next variable is that you have to, as a leader, you need to have people that are willing and wanting to follow you, because what I have also seen is that having a leadership role is not enough. To have a leadership role and to be able to enact that role and to have people listen to your direction, or obey your direction, follow your lead, or follow your expectations, is not enough as a leader. People will do that by virtue of you being in a role and them being in a position that is

perhaps subordinate or reporting to that role. So the second necessary criterion in my mind is that you need to be an individual that people will want to follow. And that's not easy, it's easier said than done.

Dr. Teresa Chan (22:55):
Yeah, that's a challenging one, because sometimes what happens is that you're given a title, but there's a possibility, maybe because of the previous person, because of the legacy of that role, you can think of there being compliance officers, or something like that, in a hospital, no one wants to talk to that person. But if you put the right person in that role and it's the safety officer, and maybe what the right circumstances, like a pandemic, now everyone's listening to this person, because they're really important, but it also helps if they have some level of charisma, some emotional intelligence, maybe some people debate whether that exists, but the wherewithal to be able to read other people and respond to them appropriately, I think those are the skills that you need to have so that people will want to follow you. Because you could bark at people all the time, and you could use the sticks rather than the carrots, but wouldn't it be nice to just invite people along the way to have a carrot party with you, rather than having to make sure that they're coming along with the stick.

Dr. Ruth Chen (23:56):
Yeah, and to have people that want to follow you, it allows you to get so much more done. So that's how it ties into the first piece as well, being able to get things done as a leader is not you doing everything or you micromanaging everyone else to get things done, but it's rather that you are able to get things done by virtue of you having built a team, or building a cohort of individuals that also want to follow you and wants to work alongside you to get those things done.

And so I think those two necessary variables also lead into the third variable, which is that you have to have, or you need to possess wisdom in order to make right decisions. Because you can have the first two, you can get things done, you can have people that want to follow you, but if you do not have the ability to make sound decisions, if you do not have the humility to recognize when decisions are poorly made, or that we needed to have gone down a different path, or we need to revise because this was not the best course of action, if you don't have that wisdom to be able to recognize good decisions and make good decisions and learn from that, then you don't have the third necessary qualification to be a good leader.

Dr. Teresa Chan (25:09):
This sounds really great, I really love those three. I really like the fact that they're all tied together, like that three legged stool, in my head, I immediately thought of that, I'm like, okay, so you need to be able to make decisions so you can get things done, and not get driven to indecision and let that be the way that you hold back, because you want to just ask more people and ask more people and don't take that first step.

It sounds like the second step really is around that cultivating the followership in some ways, but also building up capacity so that people can follow you in a way that's meaningful that's not just driven by them following you for no good reason, but rather they can build skill sets, it sounds like it was more of that transformational leadership mindset that you were thinking of, is that invest in people so that they can do more great things with you, and I think that that's really powerful as well. And then that third part is that you have to try to do it because it's the right reason for the world, and to have that quality improvement lens on yourself so that you can do things better and better as you go along.

Dr. Ruth Chen (26:18):
Mm-hmm (affirmative), yeah, no, I think you've captured those three points. And these are the things that I think about constantly in my leadership roles, as I'm developing the leadership course, as I am a follower in certain contexts. In some contexts I am the follower, in other contexts I'm the leader, and so reflecting on these three legs of a stool, if you will, I think really helped me to understand what I see, and also help me to understand myself, because usually when I see in myself an error, or when I notice that there's something that's not right about the situation, if I go back to these three things, I realize that there's likely a lopsidedness in one of those, one or more of those three variables.

And I'll just put in a quick plug for Aristotle, not to get overly philosophical about this, but Aristotle talks about this golden mean, or the Aristotelian mean, they say, and it's really this wisdom that comes from having the right balance in the middle between two extremes. And so if we look at these three variables and we look at the extremes of these, even the very first one, about being able to get things done, on one side it's the extreme of indecision and not being able to do anything and paralysis, but on the other extreme is getting things done, but not in the ways that would be wise, or not in the ways that would be characteristic of a strong leader, but rather micromanaging, doing things yourself, doing things, yes, and getting them done, but they're all done in isolation and by yourself, rather than building up a team. And so taking all three of those variables and looking at that Aristotelian balance, or the mean in the middle, really helps me to understand how I can refine my own leadership practice and my own skills.

Dr. Teresa Chan (28:07):
Yeah, that's really well put, and you're so wise yourself, so thank you so much for sharing that with us. But to be honest, I think that the hardest part about that is that there is always a tension between being able to, often people in academia, especially, rise to leader positions because they do have a reputation of getting things done, and they do have a reputation of rolling up their sleeves and doing the hard work that it takes, but what I'm hearing from you is that sometimes you have to take a step back because you have to help develop others now, when you're in that leadership position, again, the transformational leadership theories come to bear, but I think another part of it is that it's your way of building up capacity so others could follow in your path afterwards and take that spot when you're done.

Because at Mac we believe in term limits, but we extend people's term limits when there isn't someone that's an obvious candidate that could take over, that there aren't people who do, or multiple people who to apply for the position if it were to be vacated, so those are definitely things that I think that you've embedded in your really wise statements that I'll just call out, because sometimes wise people like you say things so succinctly, but when you break it all down, there's definitely way more to unpack.

Dr. Ruth Chen (29:22):
Oh, definitely. Yeah, I mean, you're right, because capacity building I really see is a vital rule of leadership. Capacity building is not creating, in my mind, capacity building is not creating people just to do what you say, or building up people so that they can carry out what you want them to, but rather there needs to be a posture of humility and a posture of knowing that you are building someone else up, and that is good for the whole, and it's also good for you. It's not something that

takes away from yourself, or it doesn't lessen you, but rather it's for the good of the organization, or good for the group. And so yeah, capacity building is a really important part of good leadership practice and good leaders.

Dr. Teresa Chan (30:12):
Wow, that's such amazing advice, I think I'm going to try to see what I can do to live by some of those words. I'll just print out an infographic with your three legged stool and just paste it somewhere on my wall so that everyone can remind me, "You're micromanaging, you should stop doing that." I think there's a tendency for all of us, obviously, to reach those things.

Dr. Ruth Chen (30:33):
Oh definitely.

Dr. Teresa Chan (30:33):
But to have some strong advisors, and a psychologically safe enough environment that your staff and your colleagues, and even people who report to you could speak up and say, "Hey, stop micromanaging me, or maybe we're not going the right way, maybe this isn't the wisest choice," I think it's about how do we involve activist followers to take part and speak up when speaking up needs to be done. We see that in patient safety, the idea is everyone should be looking out for patient safety, and no co-team leader or medical or nursing leader who's in the clinical space should ever discourage that, because then that's actually the biggest threat to a safety culture is the lack of openness.

I think that definitely is something that hopefully resonates with people and we can import that to our other part. Even if this is something that you don't routinely do, taking a page out of the patient safety manual to say, how can we create that psychologically safe, open culture in academics, is actually a really important thing, so I'm going to put that challenge out there, how can we take some of those lessons learned from our clinical side, and the clinical experience that some of us have, and how do we import that over? It's easy to tell people to maybe not speak up because then you don't have a problem. It's like [inaudible 00:31:50] from the House of God, if you don't take a temp, you can't find a fever.

Dr. Ruth Chen (31:56):
Yes.

Dr. Teresa Chan (31:56):
Same thing here is that if you don't report this incident, then we don't have to deal with the paperwork, and that to problems like failure to fail with our students, it leads to problems with mistreatment and abuse and McMaster, unfortunately, is one of those schools where as things get reported, more and more things get reported.

And that's actually, to me, that means that that's a good thing, because it means that we're entering into a safe culture, and we know from patients safety literature that because people are now finally reporting all the stuff they used to be doing by sweeping it under the rug, and now I think that that's what we want to try to do I think in academics as well, because if there is a prof that isn't doing the best thing for their students, whether it's a little bit of mistreatment here or full on some malfeasance and true abuse, it'd be nice if we had a culture where you could report that and we could then deal with it head on, because I think that you and I, as both academic leaders, we know

that if these things fester they create toxic work environment, toxic learning environments, and that's just not a good place for people to be.

Dr. Ruth Chen (33:03):
Yeah, I really like your points, and I think that it is a really good opportunity for those that are leaders, that are aspiring leaders, or those that are informal or in formal leadership positions, to assume that responsibility of being part of the culture change.

Dr. Teresa Chan (33:23):
And I think that that's something we all have to wrestle with, and Black Lives Matter, or the #MeToo movement, there's been a lot of social movements in the last decade that really highlighted a call to arms that maybe the systems that we have haven't worked for a lot of people, and so how can we think through that equity, diversity, inclusion lens in a more systematic way when we are in positions of authority, power, and leadership? And I think you're right, it starts even if you don't have a formal leadership role, so you talked about informal, and then when you are in a formal leadership role, those are two different things, you've highlighted how there's a lot of people who are leaders in their own right and they lead every day with little moments of leadership, and yet they don't have a formal title.

Maybe there's someone that's a close to retirement person that's held every official title and they have a lot of soft power, maybe they're just a really young, brilliant person that everyone respects for a different reason. Maybe they're that fulcrum that everyone goes to because they're a conciliary, and everyone goes to their office, closes the door, and then rages at them and they always calm that person down. Each of those different phenotypes of people may not have an actual titled role, but they are a leader in themselves, and I think that we can all aspire to, even if you don't have a formal title, to think of yourself as a leader.

Dr. Wong, who is one of our colleagues, obviously, she has that leadership 101 module that we've helped her co-produce on MacPFD.ca, so she talks a lot about that, the fact that you can be a leader, even if you don't have a formal title, and I would encourage everyone to go and watch that.

Dr. Ruth Chen (35:04):
Oh, that's great.

Dr. Teresa Chan (35:05):
Excellent. Well, thank you so much for hanging out with me today, this has been awesome conversation.

Dr. Ruth Chen (35:09):
My pleasure.

Dr. Teresa Chan (35:10):
And I've learned so much, so thank you so much.

Dr. Ruth Chen (35:12):
Oh, likewise, thanks.

Dr. Teresa Chan (35:15):

Thank you so much for tuning in to the MacPFD Spark Podcast. Just so you know, this podcast has been brought to you by the McMaster Faculty of Health Sciences and specifically the Office of Continuing Professional Development and the Program for Faculty Development. If you're interested in finding out more about what we can offer for faculty development check out our website at www.macpfd.ca that's www.M-A-C-P-F-D.ca. Many of our events are actually web events that are free. Finally, I'd like to thank our sound engineer Mr. Nick Hoskin who has been an amazing asset to our team, thanks so much Nick for all that you do. And also thank you to Scott Holmes for supplying us the music that you've been listening to. All right. So until next time this is MacPFD Spark signing off.