

# Negotiating a new chair package: context and considerations

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## ABSTRACT

Negotiating a resource package as a potential new department chair is common practice in academic medicine. The foundations for this negotiation include the historical presence of the department in relation to the broader institution, projections for future growth, accounting for mission/vision, resource needs (space, personnel, finances, etc), faculty and staff development, and external partnerships within and outside the institution. Despite similarities in this process across departments, many nuances influence the development of a specific new chair package, such as, department size; desires, perspectives and talents of the incoming chair, the department faculty, the medical school and dean; prevailing agendas and mission imperatives; and the overall priorities of the institution. With strategy and forethought, a new chair package can promote a successful chair tenure and departmental growth. Assembled through the Association of Departments of Family Medicine with input from several dozen department chairs and senior leaders, this is intended to serve as a practical guide to new chair packages for chair candidates.

## INTRODUCTION: WHAT IS A CHAIR PACKAGE?

As part of the process for hiring a department chair, an institution will typically offer start-up resources to the candidate to whom they offer the position. Typically budgetary, these are intended for use within the department to further its current missions or to develop new programmes and projects. The amount of this ‘chair package’ can be proposed by the candidate or by the institution and then is negotiated before hiring is finalised. To date, the literature shows that constant changes to academic health systems and structures have had a profound effect on the role of a department chair, which in turn, has affected the negotiation process.<sup>1,2</sup> The chair package is an opportunity for a chair candidate to articulate and secure a vision for the department and make a case for the resources necessary to accomplish it.<sup>3</sup> This vision must be responsive to the realities of the department structure and culture in a way that pulls the department into a future that the new chair, as well as internal and external

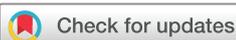
key stakeholders, desire. The intention of this guide is to create a resource to assist departments and chair candidates in maximising the potential resources offered during the hiring process.

## RATIONALE: WHY PUBLISH PRACTICAL WISDOM ON NEGOTIATING A CHAIR PACKAGE?

Among those who have had to negotiate for their own chair package, there are many tips and words of wisdom along with words of caution.<sup>4</sup> This information has historically been available to those who have networking connections with current or former department chairs but may be unknown or unavailable to others, or may be impractical due to brisk processes for hiring/appointing. The Association of Departments of Family Medicine (ADFM) is committed to supporting current and potential family medicine leaders. In that spirit, we have set an organisational goal to create more resources for future department chairs or other senior leaders, including increasing women and under-represented minorities in leadership positions. Although this document was generated by members of the discipline of family medicine and may have some aspects that are specific to family medicine, we hope that it is useful to future leaders across academic medicine.

## METHOD FOR DEVELOPING THIS GUIDE

Our guide was developed using an iterative process seeking written and verbal input from several dozen family medicine department chairs and senior leaders from varied department settings across the USA. The ADFM Research Development committee, comprised current and past chairs and other senior leaders, began by brainstorming the research-specific resources that may be proposed as part of a chair package and then expanded the project to include the other



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mission areas of an academic department. We sought feedback from the ADFM Leader Development and Education Transformation Committees (also comprised current and past chairs and other senior leaders) during committee meetings and then added suggestions from several other chairs who had participated in an earlier webinar directed toward our leadership development fellowship participants on the topic of negotiating for a new chair package. This culminated in a document that went through several iterations of revisions with representatives from each of these groups (the author team) and is shared here as a resource for departments and chair candidates participating in the chair hiring process.

### KEY STEPS FOR NEGOTIATING A NEW CHAIR PACKAGE

We have suggested five key steps for considering a chair position and then negotiating a new chair package: (1) gather information before proceeding; (2) propose an integrated vision: frame the proposal for success; (3) articulate your requests and provide evidence to support them; (4) present your vision and package proposal and then negotiate; and (5) know when to walk away. Below, we further describe these key steps and specific considerations for each.

#### Gather information before proceeding

The process of gathering information about the position helps the department, the institution and dean, and the candidate. At a department level, key faculty and staff leaders can use this exploration phase to help share the department's priorities, areas of need, current strengths and opportunities for future development, as well as to evaluate candidates' depth of understanding based on what information they ask for. Institutions can use this opportunity to decipher whether a candidate understands the scope of the position and can use resources appropriately for the role. And on an individual level, it can be used to help candidates assess whether they can see a future vision for the department, what kinds of investments they might need to advance that vision and whether they can see themselves as part of that future vision.

Candidates typically begin by learning the strategic priorities of the medical school and the health system, the expectations of the institution and the dean, and how the department fits in achieving these priorities. Questions to consider finding the answers to include: What does success look like at 1, 3 and 5 years to the dean/institution? How are faculty positions hired and paid for and which budgets and reporting lines are in the chair's control? Does the dean already have a vision of how the department can fit into the institutional priorities and needs?

From this, the chair candidate can better assess what might be the opportunities to build capacity and address gaps, which may begin to develop into ideas for the future vision of the department and the list of requests to

support that vision. **Box 1** provides suggestions of questions to ask about the core departmental mission areas of clinical care, teaching and research during this information gathering phase, as well as resources to consider within these areas; **box 2** includes similar considerations for cross-cutting missions and support areas within a department.

Expectations, priorities and resource considerations can be sought from current department leadership and faculty, and the current department administrator may be a great resource for revenue and expenses. Since department finances and funds flow are key, candidates should ask for budget and cost sheets and review them closely. Department strategic planning documents or external department reviews can also be a source of valuable information. Additionally, Chair candidates typically reach out to other department chairs in their network and at the institution to gather data on the institution and to get a sense of the typical scale and scope of chair packages. They can ask for the opportunity to interview institutional leaders, especially those with whom the department works closely and those who have become chairs within the last 5 years. All of these sources will help the chair candidate assess whether they are interested in the position; whether there are any 'red flags' that they may need to consider, such as any information that will not be shared; and what the breadth of opportunities are or could be in the role.

#### Propose an integrated vision: frame the chair package proposal for success

*Begin the proposal with a mission-aligned vision.* Once the chair candidate has a good sense of the department's current landscape and the institution's goals, a written proposal for what will be requested as a package of start-up resources can be drafted. A successful proposal will be framed to align with the departmental and institutional missions and address how the department can deliver on institutional priorities. This may begin with a coherent vision statement and 3-year and 5-year goals, including how reaching this vision in a collaborative way is both complementary to the school and health system goals.

*Keep the emphasis on the department.* Chair candidates must responsibly negotiate on behalf of the department. A chair package is a unique opportunity to infuse resources into a department to address barriers and stimulate growth. While it may be helpful for candidates to emphasise how their particular skills and strengths can uniquely enable processes and desired outcomes, a chair package should not be used to support the passions or hobbies of a particular candidate.

Viewing the negotiation as a responsibility to the department is crucial, and thinking about it with this framing may help some candidates negotiate more successfully. This can be especially true for women, as the negotiation framework often triggers gender-based reactions, both for the candidate and her evaluators.<sup>5</sup>

### Box 1 Questions to ask in the process of negotiating a chairs' package or information to find in advance—in core missions of clinical care, education, research

#### Clinical care

##### Control and department role

- ⇒ Does the department alone control its clinical enterprise or is it run with or by a multispecialty group or practice plan?
- ⇒ What is the department role in hospital setting(s)?
- ⇒ Who is responsible for clinic support staff, including oversight for their hiring, firing and salary determination?
- ⇒ How and by whom is the clinical portion of faculty salary determined, including initial support for new hires and any clinical incentives?
- ⇒ Is the clinical enterprise revenue-generating or a cost for the department? If the clinical enterprise does not generate funds, how are those costs offset?

##### Institutional finances and structures

- ⇒ Is the institution able to secure downstream revenue from primary care or is it limited to billing for physician services?
- ⇒ What is the payor mix?
- ⇒ Is the revenue cycle effective with low lag days or billing at median levels among commercial insurers?
- ⇒ What degree of 'pay for value' revenue does the organisation attract or is capable of obtaining?

##### Clinical performance and reputation

- ⇒ What is recent data from patient ratings or public performance reporting?
- ⇒ Has there been a recent analysis of patient demographics and community health needs, for example, by zip code?
- ⇒ How do other chairs perceive and support the department's clinical practice?
- ⇒ How is clinical quality measured, how does the department perform, how is quality incentivised and what are the emphasised quality goals?

##### Strategic plans

- ⇒ What if any department or institutional strategic or business plan is in place?
- ⇒ What growth in clinical services is planned? Is there adequate clinical space?
- ⇒ How does the department create and measure clinical innovation?
- ⇒ What is the institution's commitment to health equity in the community and what is being done to move the needle?
- ⇒ How do the department and institution approach population health?

#### Education

##### Medical student education

- ⇒ How large is the family medicine role in medical student teaching compared with other departments? In which courses do faculty make the most significant contributions?
- ⇒ Are there enough family medicine full-time equivalents for medical student education?
- ⇒ How is the department funded for its part in medical student education?

##### Residency

- ⇒ How is residency education funded (the funding lines)?
- ⇒ How is GME organised within the sponsoring institution and participating health systems?
- ⇒ Is size of current residency training programme(s) adequate; could or should it be expanded?

Continued

### Box 1 Continued

#### Student and residency education

- ⇒ Are there specific educational programmes that should be developed, enhanced or expanded?
- ⇒ What use of community physicians is taking place? What is the regional competition for preceptors? Are they paid from the department?
- ⇒ What is the institution's commitment to educating on anti-racism, social justice, and other diversity, equity, inclusion (DEI) efforts?

#### Research, quality improvement and scholarship

##### Capacity

- ⇒ Where is the department in terms of research capacity?<sup>17</sup>
- ⇒ What resources exist in the institution for research infrastructure, faculty hires and faculty development?
- ⇒ How is research funded?

##### Expectations

- ⇒ What expectations/vision does the dean have for research and how does family medicine fit in?
- ⇒ Is there an expectation for number of research faculty, amount of grant funding that must be secured or research ranking?
- ⇒ What are the research or scholarship requirements for all faculty; value placed on clinical faculty doing research and scholarship and publication?
- ⇒ What are the department faculty's views toward this mission?

##### Community engagement, equity in research

- ⇒ How is DEI tied into research, for example, what does the department or institution do to foster trust and participation in research, within community, especially minority populations?
- ⇒ What level of interest, commitment and activity exists in community-engaged research?

Chairs are sometimes recruited with hopes of rescuing the department from a difficult situation or bringing new ideas. Candidates can leave space for such thinking in their vision statement and proposed package. Novel ideas are highly valued and can help the institution envision a new path forward, provided they fit within the strategic plan of the institution. For example, the institution may have little or no experience with a clinical service like Integrated Behavioural Health; linking this idea to cost reduction, increased patient satisfaction and improved quality measures, which all may be strategic goals of the institution, can help persuade the Dean or CEO to support the new expenses.

*Articulate key environmental realities.* Chair candidates should begin by naming key realities in the environment (eg, performing a strengths/weaknesses/opportunities/threats (SWOT) analysis; referencing the what they found in the information gathering stage, see suggestions in [boxes 1 and 2](#)). As an example, for a request related to research support, it should be acknowledged that research generally loses money, even when department faculty succeed in obtaining grants.<sup>6</sup> It often takes new faculty several years to get independently funded and similarly, it may take a clinical faculty 1–2 years before their clinical work reaches target levels.<sup>7</sup> Throughout their proposal requesting start-up resources, the chair candidate needs to be as specific as possible, tying their

## Box 2 Questions to ask in the process of negotiating a chairs' package or information to find in advance—in cross-cutting missions and support areas

### Administration/operations

#### Finance and business model

- ⇒ What are the revenue sources? All sources including philanthropy. Do any funding sources have restrictions on expenditures (eg, public funds)?
- ⇒ What is the budgetary process? How does money flow? How is the budget put together?
- ⇒ When a faculty member gets a federal grant, what happens to the indirect dollars?
- ⇒ Is there a specific compensation plan, and who controls that plan? Are productivity measures tied to compensation and if so, which benchmarks are used?
- ⇒ Are faculty lines funded through tuition revenue (traditional 'hard salary lines'), through clinical revenue generated by the department, through grantsmanship or through a combination of efforts?
- ⇒ What funds are available for new hires? What are current faculty and staff recruitment efforts?
- ⇒ How are faculty incentivised across the different missions and funding lines?

#### Administrative function

- ⇒ What is the school's use of department administrators (their role)?
- ⇒ How is the department's administrative structure organised?
- ⇒ Does the department have their own department administrator? Are they hired by the chair? Do they report to the chair? How is staff salary determined?
- ⇒ Is the administrative structure of the department appropriate for its size and needs? Has it grown with the size of the department?
- ⇒ What are the space needs? Where is the department located in relation to other parts of the institution? Is this something that needs to change to strengthen the department?
- ⇒ How does the department get the data that it needs and what infrastructure is in place to support data acquisition and analysis?

### Advocacy

#### Mission

- ⇒ Does the department explicitly include an advocacy or policy mission?
- ⇒ Does the department strive to become a trusted voice for scientific information or consultation; perhaps a source of trusted testimony at the legislature?
- ⇒ How (if at all) is advocacy connected with community engagement as a way to reliably understand what to advocate for and how?

#### Advocacy education and individual action

- ⇒ Does the department have an advocacy curriculum for residents or students?
- ⇒ Does the department or institution have a guidelines or restrictions regarding advocacy (eg, the rules and understandings governing faculty and staff; coordination with institutional advocacy voice)?

### Diversity, equity, inclusion (DEI)

#### Aims and plans

- ⇒ Does the department have a DEI aim and initiative underway? A plan? How far along?
- ⇒ Are DEI aims embedded in all departmental mission areas? Whether yes or no, how is DEI understood in application to department missions?

Continued

## Box 2 Continued

- ⇒ To what extent has salary equity been addressed by the department and institution and what are the continuing plans for reassessment and improvement in equity?

#### Leadership and support

- ⇒ Does the department have a DEI officer or position?
- ⇒ Does it have a full-time equivalent for this position? Is it funded?
- ⇒ Is there a leadership path to this position? Is the position attractive to faculty?

#### Engagement and commitment

- ⇒ What is the level of faculty and staff engagement with department DEI work?
- ⇒ What is the level of institutional commitment to DEI, antiracism and social justice?
- ⇒ What is the DEI culture within the institution and department? What structures exist to include and support diverse faculty?

### Faculty affairs related

#### Promotion and tenure

- ⇒ What is the promotion environment like in this department and institution, for example, distribution of rank, faculty interest in advancing?
- ⇒ What is the tenure environment like in this institution, for example, tracks, policies, proportion of positions?
- ⇒ What challenges does the promotion process create uniquely for family medicine faculty, if any?

#### Faculty development

- ⇒ What resources are available to help department chairs with their professional development?
- ⇒ Are there faculty and leadership development opportunities that are known to be needed by this department?
- ⇒ How does the department nurture new or existing faculty?
  - ⇒ Mentoring structure.
  - ⇒ Leadership team.
- ⇒ Are there formal mentorship programmes available in the institution?

#### Institutional self-reflection

- ⇒ What is the recent history of deans and senior leadership at this institution? Has there been turnover and if so, why?
- ⇒ Have external department reviews been conducted within the institution? What is contained in the most recent one?

### Philanthropy

#### Mission or aim

- ⇒ Does the department explicitly include a philanthropy mission or aim?
- ⇒ What are the expectations/vision of the dean for the roles of chairs in philanthropy?

#### Philanthropic relationships and support

- ⇒ What is the process for attracting donors and foundations to the department's journey in ways that align with their own?
- ⇒ What is currently supported by philanthropy? What is the department level of philanthropic support and is it growing?

#### Leadership and team

- ⇒ Is there a department-level philanthropy leader or coordinator? Where is that position in leadership structure?
- ⇒ Is there a communications team that can help articulate the department story to the appropriate audiences?
- ⇒ What is the current relationship with the institutional philanthropy office?
- ⇒ Is there an example of a current chair who is doing well with philanthropy? What has been key to their success?

Continued

## Box 2 Continued

## Wellness

## Mission or aim

- ⇒ Does the department have explicit values, goals and plans that promote wellness?
- ⇒ What is the level of institutional commitment to faculty and staff wellness? A chief wellness officer (or equivalent) for the institution?

## Actions and resources

- ⇒ What resources are in place to help keep faculty well and productive? For staff?
- ⇒ Have there been any recent surveys on faculty wellness or morale? Are these ongoing?
- ⇒ Are organised plans and efforts to support faculty and staff wellness actually taking place?

ideas for expansion or new projects to the institutional mission.

### Articulate your requests and provide evidence to support them

A thorough proposal will be detailed, supported by data and tied into the candidate's vision for the future of the department. Candidates may glean additional ideas and considerations for the proposal from the suggestions in [boxes 1 and 2](#); most resources will be related to personnel to support growth and expansion of programmes across each of the mission areas. When asking for resources for new faculty positions to expand or enhance programmes and clinical structures, consider aspects such as personnel, time, space and finances as well as the extra benefits of making changes that may enhance clinical structures in way that it simultaneously increases educational and scholarship opportunities. For example, a clinical office is often the teaching and research laboratory for clinical faculty and learners. A clinical question from observing patient outcomes, for example, why a laboratory value is higher in older adults after prescribing a certain medication, can become a research question which will help educate learners to not only understand clinical outcome but can also develop into a scholarly project using clinical data. Connecting and harmonising the missions of the department will build a better foundation for including these specific requests and how they are all a part of your cohesive story.<sup>8</sup>

Much of the context below is specific to faculty needs, but it is crucial to have enough support and administrative staff to help faculty perform their core duties. Staff positions can support multiple areas of the department. For example, an academic writer can help with grants, manuscripts and other needs of the research enterprise, but can also be structured to support departmental communications, philanthropy and faculty promotion.<sup>9</sup>

For new faculty positions, chair candidates should specify goals for productivity, full-time equivalent allocation (eg, what percentage of time for research, clinical care, education), expectations for salary support and whether the request for institutional salary support is a one-time request or is ongoing (eg, tenure track lines).

For any faculty recruits, consider academic rank and educational background (MD/DO, PhD, other). Assistant professors may be easier to recruit, but early-career faculty will need time for development and access to senior faculty mentors. Beyond salary, candidates must consider space, equipment and other material expenses as well as the costs of the recruitment itself, which can be substantial.<sup>10–12</sup>

In addition to the above, a request for new research faculty should include the cost of one or more full or half-time research assistants, doctoral fellows or postdoctoral fellows for 3–5 years, who are crucial to research success and might also need seed funding for start-up costs. The candidate should learn what the typical packages are for new research hires at the institution and negotiate if these are too small to successfully recruit faculty. Specifically, budgeting for a proposed research hire might include 1.5–2× the cost of an annual per year plus moving expenses. It is important to understand that start-up funds for scientists in clinical disciplines are usually much less than the start-up for basic scientists, so feel confident as you ask for resources.

There are many creative opportunities for negotiation and leveraging of resources to support the vision within a proposed start-up chair package. For example, for faculty positions, chair candidates may consider shared hires with another department or school (eg, public health, social work, education, engineering, nursing). However, they should be careful of overlapping calendar years and different expectations for faculty in other schools (eg, 'summer salary' for main campus/non-school of medicine faculty; teaching loads). Shared hires between departments should include a memorandum of understanding (MOU) about how costs, research credit and indirects will be shared.

In addition to salary and material support for faculty and staff, chair candidates may request funding for professional development for them and their team. This may include access to an Executive Coach (at least 5 years of support is recommended); leadership development opportunities, such as ADFM's LEADS fellowship,<sup>13</sup> Drexel University's ELAM Executive Leadership in Academic Medicine fellowship<sup>14</sup> or the Organisational Leadership in Academic Medicine workshops offered by the AAMC<sup>15</sup>; money to support an external departmental review or specific outside consultation if needed (eg, research development consultation through the Building Research Capacity Initiative).<sup>13–16</sup>

Finally, chair candidates may consider support for faculty well-being, such as retreats, wellness activities or team-building initiatives. The chair package negotiation process may be an opportunity to maintain or develop equity and diversity within the department, for example, it may provide an opportunity to address gender-based or race-based salary disparities. Gaining an understanding of allowable expenses within funds (eg, expenditure of state/public funds) and limitations, as well as what might be negotiated in terms of institutional overhead or the

rate of indirects that come back to the department are also important in planning for financial realities as a future department chair.

### Present your vision and package proposal and then negotiate

Chair candidates should choose the right time and manner to present their vision and their proposed start-up package. Given the amount of information needed to develop a comprehensive statement, this may occur later in the hiring process. Candidates could, however, consider sharing an outline of thoughts earlier in the process as a means to engage the Dean, institution and department leaders in an effort to help them see the candidate's vision and create alignment. Their comments will create an opportunity for further refinement and may streamline the process of negotiating the new chair package from what the chair candidate proposes to what the Dean ultimately agrees to.

Most new chair packages cover 3–5 years window of time. Chair candidates should consider how this aligns with the goals and vision they have created and consider asking whether money could be stretched beyond this if the funds have not been spent down. They may also consider requesting the opportunity to renew or renegotiate the package at the end of the initial window if they can show measurable success towards milestones. For this, they will need to get in writing what measurable success would look like as well as written agreement that the dean will evaluate future needs.

### Know when to walk away

If the candidate is offered the position but cannot agree on a package of resources with the dean after sharing their proposal and negotiating, or finds that the current departmental faculty are not supportive of the proposed vision, the position probably is not a good fit. Additionally, if they are not convinced the dean is committed to their success, they should not take the job. Ideally, the candidate and the dean share a common vision for the department, as this contributes to a productive relationship and the likelihood of a successful tenure as Chair.<sup>3</sup> Candidates must determine if the package offered to them can meet the expectations of the dean within the time frame they are requesting. If there is a mismatch and the gap cannot be reconciled, the position may not be the right one for the candidate.

If the candidate's vision is embraced by the department and institutional leadership, and the package they are offered has enough resources to support moving towards these goals, they should be well set to work toward growing the department as they have envisioned it. However, candidates should keep in mind that everything can be affected by institutional political, which can shift with leadership changes. In times of significant institutional and leadership change, the department and institution's core resources and environment will be the bedrock that allows the vision to continue to move forward.

### CONCLUSION

The process of creating and proposing a start-up resource package for a new chair position hinges on gathering and processing information from key informants about strengths and opportunities for the department that are grounded in both data and institutional realities, but engage a creative vision for the future. As prospective chair candidates begin the process of developing a proposal for a chair package, they should ensure:

1. They have learnt what the school/system priorities are and how the department can fit into achieving those.
2. They have proposed an innovative but coherent vision with an understanding of the department's realities and priorities to take it forward with a package of resources to enable them to do it—at a deep enough level of detail and with breadth across missions and areas.
3. They can be seen as someone *already* working on behalf of the department via this proposal and the negotiation is clearly focused on the success of the department.
4. Their sense of timing for unfolding this vision and package is responsive to the people in front of them and what matters to them across all the moments in their negotiation.
5. They create a shared vision with the dean and faculty, maximising the opportunities for success for the chair and the department.

A chair's package is vital to the success of the department as well as to a chair's role as a leader within the institution. With strategy and forethought, a new chair package can lend itself to a successful chair tenure and the ultimate growth of a department.

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