

# The Individual Development Plan (IDP) – Department of Anesthesia

NAME:

Degrees

Current Rank

Years at Current Rank

Academic Track

Areas of Clinical Interest/Subspecialty

a)

b)

Names of your mentor/s

What are your **long term career objectives?** ( What type of work would I like to be doing? Where would I like to be in the organization? What is important to me in a career?)

## **Short term goals over the next 2 years**

CLINICAL (how would you like to improve your clinical expertise eg TEE certification; improving patient care thro policy making and implementation; quality improvement )

a)

b)

TEACHING (Contributions to teaching med students, residents, peers both at departmental, university and national level)

a)

b)

RESEARCH (phase of research process, proposed deadlines for the different phases)

a)

b)

LEADERSHIP AND CAREER (Director of a program/center/service)

a)

b)

Do you have a signed mentor-mentee contract:  Yes  No

I have discussed/planned my IDP with my mentor  Yes  No

Have you met with the Vice-Chair for Faculty Development this academic year (not sure if needed?)

I fully understand the criteria for faculty promotion  Yes  No

Academic metrics for previous academic year

- Manuscripts submitted
- Manuscripts published
- Manuscripts rejected
- Manuscripts resubmitted
- Editorials, reviews etc published
- Grants submitted
- Grants awarded
- Nominations/ teaching Awards etc

How best can the department meet your needs to achieve your goals

a)

b)

(For future meetings)

What was successful in achieving the goals on your IDP?

What were the barriers in achieving the goals on your IDP?