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| --- | --- | --- | --- | --- | --- | --- |
| Selection Criteria | Description of Criteria | Indicators of Performance | | | | Score |
|  |  | 4 | 3 | 2 | 1 |  |
| **Innovation/Relevance** | To promote innovation in scholarship, creative teaching/learning projects or faculty development that reflect patient/family-centered care, improve care of patients.  Anchored in Best Practices as defined by:  Humanistic practice – commitment to incorporate human values of caring, compassion, and respect into healthcare relationships  Interprofessional education – proposal/project designed for targeted learners (students and/or professionals) from two or more health professions so that they may learn about, from and with each other to enable effective communication and improve health outcomes  Optimal teaching-learning experience- Fosters collaboration and shared accountability within the learning community | • Proposal or faculty development identifies an emerging problem or adds new dimension to previously identified need/project.  • Reflects patient/family-centered care, improves care of patients.  • References relevant published scholarly work in healthcare and beyond that supports proposed project.  • Articulates the **three** best practices. | • Proposal or faculty development identifies an emerging problem or adds new dimension to previously identified need/project.  • Reflects patient/family-centered care; improves care of patients.  • References relevant published scholarly work in healthcare and beyond that supports proposed project.  • Articulates **two** of the best practices. | • Proposal or faculty development consistent with current, similar projects, teaching practices or faculty development.  • Improves care of patients  • Includes references to published scholarly work that supports proposal/faculty development.  • Articulates at least **one** of the best practices. | • Proposal unsubstantiated or inconsistent with need and/or method  • Does not address care of patients or faculty development related directly to improved patient care.  • Lacks references to relevant published scholarly work or publication dates older than 10 years  • Articulates to some degree but not fully, one of the best practices. | Numerical Score:  Comments: |
| **Impact** | Advances knowledge, with impact in healthcare, art of patient/family-centered care, patient advocacy, health of communities, and influence on learners and/or teaching-learning experience.  Advocacy for marginalized learners, individuals. | • May lead to significant results with potential to fill a gap in current literature related to knowledge, with impact in healthcare, art of patient/family-centered care, patient advocacy, health of communities, influence on learners and/or teaching learning experience.  • Gives voice to marginalized learners, individuals. | • May lead to results with potential to further substantiate current literature related to knowledge with impact in healthcare, art of patient/family-centered care, patient advocacy, health of communities; influence on learners and/or teaching learning experience.  • Potential to give voice to marginalized learners, individuals. | • May lead to results similar to current literature related to knowledge in healthcare, art of patient/family-centered care, patient advocacy, health of communities, influence on learners and/or teaching learning experience.  • Does not give voice to marginalized learners, individuals. | • Lacks potential to fill a gap or inconsistent with current literature related to knowledge with impact in healthcare, art of patient/family-centered care, patient advocacy, health of communities, influence on learners and/or teaching learning experience.  • Does not give voice to marginalized learners, individuals. | Numerical Score:  Comments: |
| **Reach** | The proposal or faculty development encompasses a previously unexamined area of teaching and/or scholarship. | • Applicant(s) explicate an approach/method or creative area of individual professional growth not currently recognized within their work that indicates a direction not previously taken. | • Applicant(s) explain an approach/method or creative area of individual professional growth not currently recognized within their work that includes an element of a direction not previously taken. | • Applicants’ explanation of reach inconsistent with a new approach/method or area of individual professional growth within their work that indicates a direction not previously taken. | •Not explained. | Numerical Score:  Comments: |
| **Theoretical Approach** | Theory and framework related to learning, teaching, education, or healthcare practices. | • Anchored in known theoretical framework or  theory related to best practices.  •May include evidence-based approach. | •Somewhat anchored in known theoretical framework or  theory related to best practices.  • May include evidence-based approach. | •Vague or unclear theoretical framework, best practice.  • Not supported by evidence. | • Lacks theoretical framework, best practice, or evidence-based approach. | Numerical Score:    Comments: |
| **Methods, Educational Strategies** | Utilizes methods related to learning, teaching, education, healthcare practices. | • Applies the science of learning: Active/interactive learning, e.g.,  Problem or team based;  Flipped classroom; simulation.  • Well-articulated, feasible, ethical goals.  • Objectives/outcomes specific, measurable, actionable, relevant, time-oriented. | • Combines the science of learning with traditional educational methods and strategies, e.g., lecture, PowerPoint.  • Well-articulated, feasible, ethical goals.  • Objectives/outcomes specific, measurable, actionable, relevant, time-oriented. | •Describes traditional learning methods and strategies, e.g., lecture, PowerPoint.  • Feasible, ethical goals.  • Objectives/outcomes are not specific, measurable, actionable, relevant, or time-oriented. | • Educational strategies not described.  • Lacks feasibility.  • Goals unclear.  •Objectives/  outcomes not stated. | Numerical Score:  Comments: |
| **Budget Feasibility** | Requested funds support scope of project; economical use of funds; Itemization with specific objectives. | • Detailed outline  Itemized for each year of grant.  • Includes rationale and specifics for expenditures  Includes specifics of cost containing measures. | • Some details in outline  Itemized for each year of grant.  • Estimates rather than specifics for expenditures.  • Addresses cost containment to some degree. | • Estimations of costs, expenditures.  • Budget inconsistent with probable total costs of project. | • Budget plan not submitted or incomplete. | Numerical Score:  Comments: |
| **Timeline** | Project likely to be implemented within two-year span of grant. | • Highly feasible within span of grant. | • Feasible within span of grant. | • Somewhat feasible within span of grant. | • Not feasible within span of grant. | Numerical Score:  Comments: |
| **Evaluation Plan** | Evaluation design to identify merit, value, and worth of project.  Results will inform the future of the project. | • Measurement criteria: Impact that improves patient care, patient/family-centered care.  • Transfer of learning; observed changes in learners behaviors over time. | • Measurement criteria: Knowledge and skills gain, attitudes change –short and/or long term. | • Measurement criteria: Learner satisfaction. | • Evaluation plan vague, without metrics,  or lacks identified plan for evaluation. | Numerical Score:  Comments: |
| **Dissemination Plan** | Identification of stakeholders within the community at large that will eventually receive information about the project (who is the community). | • Articulates a coordinated plan and method for communicating the outcomes/findings of the project to appropriate stakeholders.  • Plan includes presentation within University or at Regional, National, or International Conference.  • Plan to publish. | • Articulates a coordinated plan and method for communicating the outcomes/findings of the project to appropriate stakeholders.  • Plan includes presentation within University or at Regional, National, or International Conference. | • Limited outreach/ audience. | • Lacks identified plan for dissemination. | Numerical Score:  Comments: |
| **The PI and Team** | Background and commitment to education; clinician-teacher excellence; qualifications relevant to project; department or site support. | • CV representative of formal education as educator or expert resources available for consultation.  • Ongoing teaching experience and commitment to education.  • Evidence of teaching effectiveness.  • Letters of support substantiate above  • Includes letter of support from course director or department chair. | • CV representative ongoing formal teaching experiences and commitment to education.  • Letters of support substantiate above  • Includes letter of support from course director or department chair. | • CV representative of involvement in teaching activities and commitment to education.  • Letters of support substantiate above.  • Includes letter of support from course director or department chair. | • CV inconsistent with background in education, teaching.  • Letters of support do not address teaching experiences.  • Lacks letter of support from course director or department chair. | Numerical Score:  Comments: |

Please tally total score:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please include verbatim feedback for applicant:

For resources, refer to the Frymoyer Scholars Program Toolkit: <http://www.med.uvm.edu/teachingacademy/frymoyer-scholars-program-toolkit>