

ADFM Newsletter

• • Summer 2016 • • Volume 5 (2) • •

The ADFM Newsletter is an update of key information that all members of ADFM should know, with highlights on the recent work of our committees. We'd love to hear your feedback (aweidner@adfm.org)!

Happy reading!

NOTE: anything in blue text is a hyperlink to a resource or email.

SAVE THE DATE!

**ADFM "Town Hall"
November 12, 2016**

10:30am - 12:00pm
Hyatt at Olive 8
1635 8th Ave, Seattle, WA

Please note that this timing is in conjunction with the AAMC Annual Meeting but that the Hyatt at Olive 8 where we are meeting is not one of the AAMC hotels.

Did you know...?

Almost 1/4 of Chairs responding to ADFM's 2015 Annual Survey indicated that they are unlikely (<20% likelihood) to continue in their current chair role for the next three years.

With this information, and with a large number of chair positions open around the country already, ADFM has taken the lead on a new CAFM initiative whose charge is to examine different pathways to leadership with the goal of increasing the leadership pipeline for the discipline.

ADFM Data-gathering Initiatives

As follow-up to the "Using our Data" session at the Winter Meeting that focused on potential questions that could be used to gather data to fulfill the ADFM "minimum data set," the ADFM Research Development committee has been collaborating on two projects to gather the data set elements related to research.

The first of these projects, a collaboration with the FMAHealth Research team and CERA, is a survey for Family Medicine Department Chairs to assess the research capacity of each department. The project is currently under IRB review and should be making an appearance in your inbox soon - keep your eyes out!

The second project is a collaboration with the Robert Graham Center and some independent researchers looking at two possible methods of bibliometric analysis to create a measurement standard for assessing research productivity (i.e. publications) across Family Medicine departments. More information will be shared as this project progresses.

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*Ideas for future
newsletters?*

Contact Amanda

Weidner at:

aweidner@adfm.org

The Health is Primary campaign event at the AAFP's National Conference of Family Medicine Residents and Medical Students included the premier of a poignant new music video by physician/rapper ZDoggMD (also known as Zubin Damania, MD) that describes his journey through medical school and the impact caring for patients has had on his life. The video highlights the importance of working together to produce a "Health Care 3.0" that values primary care and patients.

**If you haven't yet seen the video, [check it out here](#) -
and share it with your students, residents and faculty!**

ADFM's Joy in Practice Initiative

ADFM has taken on an effort to continue the learning and sharing of best practices that we started at the 2016 Winter Meeting around ways to improve practice workflow, uptake of systems-level changes, personal resilience, etc to help ourselves and our teams find our way back to

joy in practice.

The two main elements of this initiative are a listserve and a webinar series.

All Department Chairs, Administrators, faculty and departmental-related entities are welcome to participate.

Those who are interested in joining the listserve can subscribe here: <https://mailman1.u.washington.edu/mailman/listinfo/joyin-practice>

The first webinar in the series was held on June 3rd and featured M. Norman Oliver from University

of Virginia and Michael Rabovsky from Cleveland Clinic sharing their different models for team documentation ("court stenographer" vs "enhanced MA role" models).

If you missed our first webinar, you can access the resources and the recording of the webinar here: <http://www.adfm.org/Members/Webinarsresources>

The second webinar of the series is planned for late September (see the save-the-date below) with the intent of offering subsequent webinars in November and January.

"For every hour physicians provide direct clinical face time to patients, nearly 2 additional hours is spent on EHR and desk work within the clinic day..."

Sinsky C, et al. Allocation of Physician Time in Ambulatory Practice: A Time and Motion Study in 4 Specialties. *Ann Intern Med*. Published online 6 September 2016 doi:10.7326/M16-0961

Read the article [here](#)

SAVE THE DATE:

2nd "Joy in Practice" webinar
Update on Coordinating Optimal Referral Experiences Program
September 27, 2016
12pm Eastern/11am Central
[Register here](#)

Please mark your calendars and register – access information will be sent to registrants closer to the date. Members of your departments and affiliates are welcome to participate as well!

In the 2 years since receiving a CMMI Health Care Innovation Award, the AAMC has been working on the Coordinating Optimal Referral Experiences program (Project CORE), which focuses on implementing an eConsult and enhanced referral model in academic medical centers to reduce marginal referrals, improve access to specialists, and enhance patient experience. The project has been well-received by primary care faculty, who appreciate reconnecting with their specialty colleagues and better coordinating care with them. ADFM has been collaborating with Scott Shipman, MD, MPH, Director of Primary Care Affairs and Workforce at the AAMC to support work around the project, which has involved a number of ADFM member departments. Last July, ADFM co-sponsored a webinar with the AAMC to communicate with more of our DFMs about this model and to help engage institutions interested in participating in the second cohort of the CORE project that began in 2016.

Our second "Joy in Practice" webinar will feature Scott Shipman with an update on progress in implementing this care innovation in the 12 participating AMCs across 2 cohorts. In addition, he will provide updates on the findings and outcomes to date of the CORE project, and how the program fits into evolving payment models. Paul James, Chair at University of Iowa and past ADFM President, Sean Bryan, Chair at Greenville Health System and ADFM Healthcare Delivery Transformation Committee member, and Cathy Morrow, Chair at Dartmouth University, will be available to lend the perspective of departments that have been engaged in the first and second cohort of participating institutions.

Follow up from the Practical Playbook's first National Meeting

Over 300 individuals searching for ways to improve health through partnerships between public health and primary care attended the first annual Practical Playbook National Meeting on May 22-24 in Bethesda, MD. Amanda Weidner attended on behalf of ADFM.

Attendees heard from collaboration thought leaders such as Bechara Choucair of Trinity Health, Karen Remley of the American Academy of Pediatrics, and Michael McGinnis of the National Academy of Medicine in plenary sessions and participated in numerous workshops that encouraged practical, actionable ways to advance their own collaborations. Workshop focused on: using data to support collaborations; best practices for collaboration; managing collaborations; and funding and sustainability. The National Meeting also featured over thirty different posters showcasing innovative case studies and tools to advance collaboration; plenty of time for network-ing; and a number of "take home" tools and resources to advance collaboration. Materials from

the meeting are available for download [on the web-site, here](#).

Some of the key themes that were arose across the sessions included:

- The language and cultural barriers to collaboration and how to overcome them, including finding common definitions (what is population health, community health, population health management?); finding someone who is "bilingual" in public health and primary care; and looking for "unlikely bedfellows", including those in the private sector
- Solving complex data issues to advance collaboration (finding a "data diplomat" who can help find the mutual interest to overcome privacy, proprietary, and policy considerations; shareability, scalability, and how to combine data across sectors; how to better use technology to gather, visualize, and share data; how to make data useful "in the trenches" of

patient care)

- Addressing social determinants of health is challenging for everyone; it requires creative thinking, open lines of communication, and persistence

**BRINGING
PUBLIC HEALTH
and PRIMARY CARE
TOGETHER**

**The Practical Playbook
National Meeting**

May 22-24, 2016 x Hyatt Regency
Bethesda, Maryland

PRACTICAL PLAYBOOK®
Public Health. Primary Care. Together.®

deBeaumont FOUNDATION

Duke Community & Family Medicine
Duke University School of Medicine

CDC
CENTERS FOR DISEASE
CONTROL AND PREVENTION
"To save lives, we must act together."
For more information, visit www.cdc.gov

- Leadership may come from many different places and requires flexibility; leadership, science, technology, funding and culture are the keys to a sustainable collaboration between primary care and public health.

A few neat tools shared at the National Meeting

[CDC's Health and Well-Being for All meeting-in-a-box](#) – provides everything needed to explore the determinants underlying health problems faced by patients and communities. Simulates a 6-step process for leading change to improve the community's health.

[Community Commons from the University of Missouri](#) – a GIS data mapping tool with a number of pre-loaded secondary data sets, can upload your own primary data to map with the secondary data; auto-generates a Community Health Needs Assessment for your state and county/counties

[The Community Guide: What Works to Promote Health](#) – collection of materials to help assess and carry out evidence-based public health strategies and interventions to meet a community's critical health needs

Do you know AFMAC?

The Academic Family Medicine Advocacy Committee (AFMAC) is a committee composed of members from each of the academic Family Medicine organizations that is tasked with developing and advocating for policy. AFMAC is the body that represents the interests of academic family medicine in the federal government arena.

AFMAC is currently made up of the following organizations (*= members of CAFM):

- Society of Teachers of Family Medicine (STFM)*
- North American Primary Care Research Group (NAPCRG)*
- Association of Family Medicine Residency Directors (AFMRD)*
- Association of Departments of Family Medicine (ADFM)*
- American Academy of Family Physicians (AAFP)
- American Board of Family Medicine (ABFM)

ADFM has 3 representatives to AFMAC. These

individuals are Dr. Joseph Hobbs, Dr. Tony Kuzel, and Dr. Elissa Palmer.

Functionally, AFMAC has been in existence since 1992, although under a different name and auspice. Membership has historically been the four CAFM organizations and the AAFP. In February of 2014, the American Board of Family Medicine became a member. The founding premise behind AFMAC is that the “family” of family medicine jointly develops policy and works together with respect to academic family medicine legislative and regulatory issues. Generally speaking, academic family medicine issues include programs that fall under the headings of workforce, such as Title VII primary care training and Medicare Graduate Medical Education, as well as research, particularly primary care research. With the creation of the Council of Academic Family Medicine (CAFM), in 2010, the previous iteration of AFMAC was renamed AFMAC, and became one of the standing committees of CAFM.

STFM serves as the convener of this committee. Dr. Tricia Elliot is the current chair of AFMAC and sits on the STFM Board in that position. AFMAC is staffed by CAFM Director of Government Relations, Hope R. Wittenberg.

AFMAC Charter

In early 2015, AFMAC developed a charter that identifies the committee’s guiding principles and operating procedures, including its decision-making processes. This document has been adopted by all six member organizations, and is now final. The document makes a distinction between the policy development work of the committee, and the strategic decision-making that is the domain of our government relations staff.

Annually, the domain of AFMAC priorities will be reviewed and adopted by AFMAC and the member organizations, and included as an appendix to the Charter.

In the July edition of “What’s on our plate,” ADFM President Joseph Hobbs reported on two important items for the ADFM membership to be aware of:

1. Board-approved recommendations regarding engagement of member Departments of Family Medicine &
2. Building Research Capacity (BRC) initiative

In case you missed it, you can check it out here.

SAVE THE DATE

2017 Summit on State GME Initiatives: Educate, Embrace, Energize

January 22-24, 2017
Albuquerque, NM

More info at:
<http://www.gmeinitiative.org/>

HAVE YOU SEEN THESE RECENT RESOURCES?

New reports from the Center for Healthcare Quality and Payment Reform include: [A Guide to Physician-Focused Alternative Payment Models](#), co-published with the American Medical Association and a [Better Way to Pay for Cancer Care](#).

Starfield Summit Follow Up:

Check out the “BIG idea” talks
<http://www.starfieldsummit.com/videos/>

Meet our ORR Reps!

Catherine Coe, MD, MPH
*University of North Carolina
 Family Medicine Residency,
 class of 2017*

Catherine Coe is thrilled to serve her second term as an ADFM representative to the Organization of Resident Representatives. She received degrees in Molecular, Cellular and Developmental Biology and Biochemistry, as well as her M.D from the University of Washington. During medical school she was a Family Medicine Interest Group Leader and was inducted into Alpha Omega Alpha. She moved across the country to pursue residency at the University of North Carolina – Chapel Hill where she is currently a third year resident.

Catherine's interests include working with the pipeline of future family physicians and curriculum

development. She serves as the Resident Advisor to the only Undergraduate Family Medicine Interest Group (uFMIG) in the nation, helping to establish a standardized curriculum for the program and shadowing opportunities for college students. She has also been integral in the development of a three-year MD curriculum at UNC (the FIRST Program), whose curriculum is highlighted by early exposure to clinical experience, training at UNC's Family Medicine Residency Program, and ties to service in underserved areas of North Carolina. She was also recently inducted into the Academy of Educators. Catherine is committed to a career in academic medicine and is excited to show future physicians the joys of family medicine.

Cleveland Piggott, MD, MPH
*University of Colorado
 Family Medicine Residency,
 class of 2018*

Raised in a suburb of Atlanta, GA, Cleveland did his undergraduate at the University of Georgia where he double majored in Biology and Psychology. He then completed his medical school training at the University of North Carolina where he also received his MPH with a concentration in Health Care and Prevention. He and his wife are currently second year residents at the University of Colorado Family Medicine Residency. Cleveland's interests in medicine are behavioral health, health equity, and the primary care work force. Outside of medicine, he loves ballroom dancing, hiking, and spending time with friends and family.

Team-Based Care Training Camp

November 1-3, 2016
**Lambeau Field,
 Green Bay, WI**

*co-sponsored by the AMA
 and Bellin Health*

An opportunity for teams to learn the granular details that make for successful implementations of advanced team-based models of care.

For more info, visit:
<https://www.bellin.org/appointments-registration/team-based-care-training-camp>

NOTABLES & MILESTONES

Deborah Clements has been appointed to a four-year term to the NRMP Board of Directors, effective July 2016

The Department of Family Medicine and Community Health at the Perelman School of Medicine, University of Pennsylvania received a HRSA AU-PCTE Integrating Behavioral Health into Primary Care Award

Chyke Doubeni is beginning his term as chair of an NIH study section

Duke Family Medicine resident [Everlyn Perez was recently named to the AAFP's Emerging Leaders Institute](#) and Duke Family Medicine chief resident [Tiffany Covas has been selected as a Feagin Leadership Scholar](#).

Duke Community & Family Medicine celebrated the department's 50th anniversary in July. A series of stories were published celebrating the department's history, available at: <https://cfm.duke.edu/about/history>

(send Amanda Weidner your "notables & milestones" at aweidner@adfm.org)

Follow Up from ADFM Session on Student Interest: responses to microblog questions from the AAFP, Part 3 of 3

Ashley Bentley, MBA, AAFP Student Interest Strategist

Connecting health care and schools: a joint commentary signed by the Secretary of HHS and Acting Secretary of Education

<http://www2.ed.gov/policy/elsec/guid/secletter/160115.html>

At its annual winter meeting in February 2015, ADFM members took on the topic of student interest and student choice of family medicine. Among its speakers on the topic, ADFM hosted representatives from the American Academy of Family Physicians' Medical Education Division to share perspectives on the issues, strategies, and resources at play. Below are answers from the AAFP to questions raised during that session, which were captured on a microblog discussion taking place as the speakers presented.

***This is the final part of a 3-part series - this section focuses on questions related to the AAFP and student membership**

Q: What are the best conferences for students and residents?

The AAFP publishes a list of conferences for medical students, especially those interested in primary care, at <http://www.aafp.org/medical-school-residency/fmig/lead/meetings.html>. Among the list are the AAFP National Conference of Family Medicine Residents and Medical Students every summer in Kansas City; regional and state family medicine conferences such as Family Medicine Midwest, Family Medicine Education Con-

sortium (Northeast), and state Academy of Family Physicians meetings; and conferences like the Society of Student-Run Free Clinics, the American Medical Student Association Annual Convention, and the Student National Medical Association Annual Medical Education Conference.

Q: Are the AAFP Board Review Questions that students use to review for their exams on the AAFP clerkship flashdrives?

The AAFP Clerkship Flashdrives can be found at <http://www.aafp.org/medical-school-residency/fmig/lead/fmig-advisors/clerkship-request.html>. These USB drives are offered free to departments to distribute to students on their family medicine rotations. The resource includes the mostly highly regarded resources from the AAFP for students during their clerkship years, including access to American Family Physician journal articles, Strolling Through the Match, and the free Board Review Questions that students love to use to study. The flashdrives can also be modified to house your syllabus and any resources on family medicine your department would like to distribute.

Q: If there are more student members in the AAFP, why do we have so much

trouble recruiting? Why don't we have more impact on that 25% of students? How many AAFP student members choose family medicine? Why are these students AAFP members? How many of them are really interested?

While students join the AAFP during all four years, they are more likely to join during their clinical years, likely reflecting their high regard for members-only resources including the Board Review Questions and American Family Physician. AAFP student members are more likely to enter a family medicine residency program upon graduation than the general allopathic student population at a statistically significant rate; a majority of the AAFP's student members are from allopathic medical schools. In the AAFP's analysis of the match results for family medicine (<http://www.aafp.org/medical-school-residency/program-directors/nrmp.html>), we capture our take on this issue as a sign of the significant barriers to a career choice in primary care. Student interest is high and has seen rapid growth. It is possible, and hopeful, that student choice is still lagging behind and will catch up. However, the significant barriers in the system— including prominent, systematic barriers in

Have you seen the commentary in the Jul/Aug edition of the *Annals of Family Medicine*, "Reflections on Primary Care Research. Post-Starfield Summit: Thinking Pragmatically, Thinking Big"?

All *Annals of Family Medicine* commentaries from ADFM are archived on our website, at <http://www.adfammed.org/Commentaries>

Did you know that ADFM has a Facebook page? Friend us or

 Like us on
Facebook

graduate medical education funding and medical school accountability, student exposure to practices that deliver on the concepts of patient-centered, team-based care and emerging practice models that demonstrate to medical students the group impact they can have as primary care practitioners and create excitement, and the impact of financial factors on student choice that need to be addressed through physician payment reform and student debt relief—counter that interest before it becomes choice.

Q: How can we get the student members of the AAFP more engaged in our departments?

The AAFP is happy to provide a list of members from your institution to you upon request to the Medical Education Division. Ashley Bentley, student interest strategist, is available at abentley@aafp.org or (913) 906-6000 or ext. 6725. Your department can seek opportunities to support the FMIG, teach courses and host special workshops

on topics that interest students but that they may not yet connect with a family medicine career such as global health, population and public health, advocacy, social determinants of health, sports medicine, and others. To really set yourselves apart, take the time to understand a little bit about what motivates each student, and seek opportunities to match that motivation with family medicine. Follow up after rotations. Give students opportunities to reconcile myths they may have come to understand about family medicine once beyond the doors of your department. Take the time to show them that they want to join the family medicine community by helping them see themselves in family medicine. Do this by connecting them with meaningful clinical experiences that reflect their interests and offering a listening ear. They don't get that from most or all of their other rotations.

Q: Why is family medicine often the highest rated clerkship in enjoyment, but

choice is low?

Some current studies in the field are looking to uncover just that. Data from Michigan State University suggests that students do rate their family medicine clerkships highly and that immediately following their clerkship they are more likely to report that they are strongly considering family medicine.¹ However, that drops off after a few months, and so do their beliefs about what family physicians can do. Though we should wait for the study's results to draw concrete conclusions, departments could try to address this pattern by finding ways to engage students beyond their rotations. Get them involved in research projects with family medicine residents and faculty, offer mentorship, offer compelling elective opportunities, or even just follow up to find out how they're doing later in the year.

¹Phillips J, Charnley I. Third- and Fourth-Year Medical Students' Changing Views of Family Medicine. *Fam Med* 2016 Jan;48(1):54-60

Schools planning to require prescriber education for graduation

In connection with a March 29th announcement from the Obama Administration about additional actions to address the prescription opioid abuse and heroin epidemic, "...more than 60 medical schools are announcing that, beginning in fall 2016, they will require

their students to take some form of prescriber education, in line with the newly released Centers for Disease Control and Prevention Guideline for Prescribing Opioids for Chronic Pain, in order to graduate."

A list of the schools who

have made this commitment and the other elements of the administration's plan are available at: <https://www.whitehouse.gov/the-press-office/2016/03/29/fact-sheet-obama-administration-announces-additional-actions-address>

On June 27, nine New England Departments of Family Medicine met at a historic Inn in Sturbridge Massachusetts to discuss the state of their departments, provide "group think" in solving dilemmas, and coordinate efforts. This highly productive meeting included Boston University, UMass, UConn, UVermont, Netter School of Medicine, UNCOM, Albany, Dartmouth, and Brown (the host). Chairs and Administrators took part in the productive meeting -- something we might recommend to others around the country!

ADFM plans to have another "state and regional networking" breakfast session at the 2017 Winter meeting - this would be a natural time to discuss and strategize for those who are interested in trying this out!

Want an Advisor or Want to Become an Advisor?

ADFM offers all new chairs and administrators who join the opportunity to be paired with a peer with more experience.

Chairs should contact
Amanda Weidner,
aweidner@adfm.org

Administrators can
learn more here:
[http://www.adfm.org/
Members/AdministratorArea/Mentorship-
Program](http://www.adfm.org/Members/AdministratorArea/Mentorship-Program)

WELCOME TO NEW MEMBERS

CHAIRS

- Reid Blackwelder (*East Tennessee State University*)
- Jennifer Devoe (*Oregon Health & Sciences University*)
- Mark Johnson (*Howard University*)
- Muneeza Khan (*University of Tennessee - Memphis*)
- Nirandra (Eddie) Mahamitra (*Cooper Medical School-Rowan University*)
- David Mason (*UNTHSC Texas College of Osteopathic Medicine*)
- Aaron Michfelder* (*Loyola University Stritch School of Medicine*)
- Jeffrey Quinlan* (*Uniformed Services University*)
- Dave Raket* (*University of New Mexico*)
- Mack Ruffin* (*Penn State*)
- Sonia Velez (*New York Medical College*)

*Participated in ADFM Fellowship Program

New members since our last issue in March 2016. If this information is incorrect or you have additional information, please let Amanda Weidner know (aweidner@adfm.org).

ADMINISTRATORS

- Jamie Baker (*Morehouse School of Medicine*)
- Renee Bockes (*Michigan State University*)
- Kimberlee Daniels (*University of Maryland*)
- Anntonette Nelson (*University of Oklahoma*)
- Marcie Ordowich (*University of Pennsylvania*)
- Teri Scott (*University of Missouri – Kansas City*)

OPEN CHAIR POSITIONS

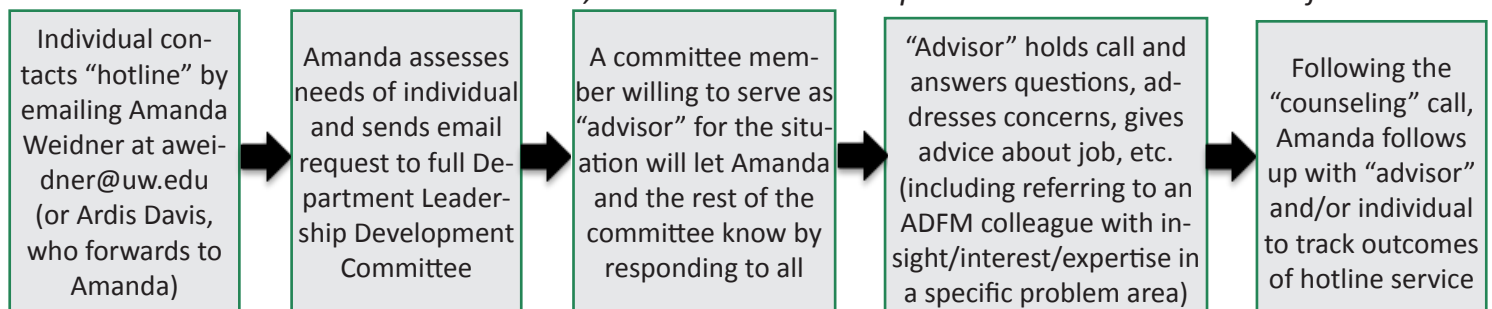
with an active search underway

- Cleveland Clinic
- Cooper Medical School of Rowan University
- Eastern Virginia Medical School
- Howard University
- Jefferson Medical College
- Maine Medical Center
- Meharry University
- Morehouse School of Medicine
- University of California - Irvine
- University of North Dakota
- University of Oklahoma - Tulsa
- University of South Carolina - Palmetto Health
- University of Texas Health Science Center at Tyler
- University of Texas Southwestern
- University of Utah
- University of Washington
- Wayne State

* If this information is incorrect or you have additional information, please let Amanda Weidner know (aweidner@adfm.org).

Don't forget about our Interim Chair "Hotline"!

The ADFM Leadership Development Committee has a "hotline" service for those who have been asked to become interim chairs in the near future or have been in the interim chair role a short time and have not yet been connected with an advisor, but have immediate questions related to the chair job.



Please be sure to pass this information on to your colleagues for whom it might be useful (e.g. other members of your department if you are planning to retire or change roles, or colleagues at other institutions).