

ADFM 2020 Annual Conference – New Orleans

Breakfast Sessions

Saturday, February 15

7 – 8:30am (Topics presented in two, 45-min discussion blocks)

1. **Building Research Capacity (BRC): How Might a Consultation be Useful for Your Department?**

Anton Kuzel, MD and CJ Peek, PhD, Co-Chairs, Building Research Capacity (BRC)

Family medicine departments seek to build and sustain research and scholarship capacity *appropriate to their own goals and situation*—which vary department to department. BRC offers client-centered consultation—not a standard recipe—for helping departments build the kind of scholarship and research capacity that works for them.

2. **Establishing a Unified Departmental Quality Improvement Process**

Nitin Budhwar, MD, FAAFP, UT Southwestern Health Center (ADFM Leads Fellow Project)

My LEADS Fellowship project is to create a unified QI process across all our practice sites and systems that fully aligns with our umbrella organization's QI bench marks. So far, I have met with all the faculty including the Chair and have had valuable input in to what the faculty would like to see happen with QI. This has resulted in our research core putting QI on their radar as well as my getting some resources in terms of staff time to help build the needed tools so that we know what's being captures, reported and measured across the system. This will set up the ground work to be able to build new QI projects in collaboration and avoid duplication of efforts.

3. **Evidence-Based Primary Care Behavioral Health Integration: Screening System Implementation to Facilitate Awareness of and Treatment for Key Adult Behavioral Health Issues**

John Freedy, MD, PhD, Medical University of South Carolina (ADFM Leads Fellow Project)

Following careful literature review and consultation with key department, university, and community colleagues, I was lead-author on a clinical-services grant submission to Duke Endowment (06/15/19). We proposed to develop an evidence-based primary care screening system to facilitate education/treatment for key adult behavioral health issues (USPSTF A or B recommendations: depression; intimate partner violence for reproductive age women; alcohol misuse; tobacco use; obesity). Project features: 36-month performance period; \$1.5 million direct funding request; \$1.5 million in-kind support; baseline and quarterly quantitative/qualitative measures to determine impact; financial sustainability projected based on CMS BHI case management payments + E and M charges.

4. [The 2020 Board-approved "ADFM Process for Board Appointed and Elected Positions in ADFM" and "Pathways to leadership in ADFM"](#) will be discussed.

Amanda Weidner, MPH, Executive Director

5. **Make Family Medicine EPIC**

Ian Bennett, MD, PhD; Paul James, MD; Misbah Keen, MD; Eric Tobiason, MBA, University of Washington

What makes certain experiences more memorable than others? Research has shown that highly-rated experiences usually have memorable moments and that these moments occur at key times (Peak End Principle). Memorable moments leave lasting impressions and share characteristics that are rooted in our biology. Are memorable moments a product of luck (being in the right place at the right time) or can they be designed? What are their characteristics and how does one create them with minimal resources? This interactive session, mostly based on the Heath brothers' book, *The Power of Moments*, will attempt to answer these questions. Participants will create a draft of a memorable moment (or enhance an existing one) using the EPIC (Elevation, Pride, Insight, Connection) framework and determine where to place this moment for maximum impact.

6. Maximizing CPC+

Elizabeth Clark, MD, MPH, Rutgers RWJ Medical School (ADFM Leads Fellow Project)

The goal of this project is to use the CPC+ Program as a learning opportunity to improve all areas of my leadership skills. A successful project will a) meet all CPC+ requirements for the year, b) develop an effective core project team, and c) improve my skills in several leadership areas including strategic planning, financial skills, and communication.

7. Negotiating a Chair Package

Christine Jacobs, MD and Virginia Westermeyer, Saint Louis University

For prospective permanent chairs and their administrative partner. Designing and negotiating your leadership package, considerations, and lessons learned.

8. Opportunities to Participate in the ADFM-NAPCRG Building Research Capacity (BRC) Initiative

Bernard Ewigman, MD and David Schneider, MD, ADFM-NAPCRG Building Research Capacity (BRC) Steering Committee

Interesting roles and collegial networking are available to chairs, administrators, ADFM LEADS fellows, and research leaders through BRC. BRC helps departments build research and scholarship capacity tailored to their own goals and situations through BRC learning workshops at national family medicine meetings, a client-centered consultation service, and a fellowship for aspiring change agents.

9. Stages of Development for Rural Residency Programs

Frederick Chen, MD, MPH, University of Washington

Sharing what we've learned as part of the work team developing a Technical Assistance Center for Rural Residency Program Development grantees.

10. Strategic Planning for Advocacy During AHC Transition

Rachel Franklin, MD, FAAFP, University of Oklahoma College of Medicine (ADFM Leads Fellow Project)

I had initially planned this project as an opportunity to re-design the department's practice plan to support our growth as the organization moves into value-based care; unfortunately, the University had begun this work already, and alignment was low for additional input in their iterative process. However, I was asked around the same time to imagine how, on our landlocked campus, an unused clinical space of 150,000SF might be redeveloped. The project developed unintended "legs" and triggered campus politick, ultimately leading to a meeting with the Executive Dean/Practice Plan President (who was, thankfully, also my program director in residency and rescued me from some treacherous shoals!). To say I learned a lot about us as a health system/university partnership would be an understatement.

11. Systematic Continuous Strategic Planning in a Department of Family and Community Medicine to Increase Student Interest in Family Medicine

John Boltri, MD and Lacey Madison, MBA, MEd, Northeast Ohio Medical University

While many family medicine faculty desire to increase medical student interest in family medicine, few employ a comprehensive approach with focused strategies and goals. In this discussion, we share our strategic process that lead to a set of goals and actions to increase student interest in family medicine. Several strategies that have led to positive outcomes will be described and we will share and demonstrate how we developed new pathways and programs, faculty buy-in, and student engagement on a limited budget.

12. What do Deans and CEOs Expect of Department Chairs?

Steven Zweig, MD, University of Missouri