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## THE GRANT GENERATING PROJECT: GIVING PRIMARY CARE RESEARCHERS TOOLS TO SUCCEED

As noted by McWhinney as early as the 1960s, one of the critical criteria for the ongoing development of an academic discipline, such as primary care, is an active area of research.<sup>1</sup> Added to this is the long-standing premise that it is essential for primary care evidence to be generated by primary care researchers with primary care physicians with and for primary care patients.<sup>2,3</sup> This has been the core tenet of NAPCRG since its founding in 1972,<sup>4</sup> and one of the reasons the Committee on Building Research Capacity launched the Grant Generating Project (GGP).<sup>5</sup> The 1-year “fellowship without walls” was developed to support researchers with consultation, technical assistance, and peer review for grant applications—resources that researchers often lacked in their academic environments.<sup>6</sup> Supported by the various organizations such as the American Academy of Family Physicians’ Plan to Enhance Family Practice Research, NAPCRG’s Committee on Building Research Capacity, the Society of Teachers of Family Medicine, and the Foundation of the American Academy of Family Physicians, the program successfully met research and scholarship capacity-building needs in primary care for over 20 years.<sup>7</sup>

During this time, research complexity steadily increased<sup>8</sup> and the number of grant applications being submitted more than doubled (NIH Data Book 2023) with success rates dropping from over 30% in 1998 to near 20% in 2022. Accompanying these challenging trends were innovative advances in andragogy through blended learning, active teaching, and improvements in education technology. With this shifting landscape, in 2017, NAPCRG took full responsibility for the GGP and committed to reimagining the program. As Chair of Committee for the Advancement of the Science of Family Medicine and having developed several primary care graduate degrees at McGill University,<sup>9</sup> I volunteered

to lead the transition of GGP into a full blended-learning program. With the help of Dr Tamara Carver on the education technology front and GGP Alumni Dr Nancy Elder and Dr Douglas Archibald, this superannuated course that was taught during 4 in-person sessions over the course of a year was completely overhauled within 6 weeks. The program was turned into a cutting-edge blended-learning experience with tuition. The extensive online materials with 12 modules were complemented by 2 in-person sessions supported by 3 virtual classrooms. As part of this course, 1 module is dedicated to dissemination and implementation science as well as how to do community-partnered research. For the online curriculum, materials were developed that addressed both the United States’ and Canadian funding contexts. Fellows from this program came from diverse backgrounds, with differing levels of experience and health care contexts. Building on earlier success of the program, the restructured version of GGP has continued to help new researchers to achieve funding success in the US and Canadian context. With the success in relaunching this important education initiative, several partner associations including STFM, ABFM, and the College of Family Physicians of Canada have committed to providing annual scholarships. With the relaunch in 2017 with 16 Fellows, we have created an annual cohort of learners who have developed enduring professional collaborations and successful grant applications. This year the GGP will see the addition of focus on primary care researchers applying for Artificial Intelligence/Machine Learning (AI/ML) grants through the generous support of the Gordon and Betty Moore Foundation.

While primary care has been identified as a critical component for the delivery of high-quality health care and for the improvement of global health,<sup>10</sup> we also live in an environment of rapidly changing health care systems with increasing expectations, knowledge, and involvement of patients, families, and communities. There is a growing preoccupation with cost and performance leading government or other decision makers to intervene, control, and reform. Finally technological developments such as artificial intelligence, big data and machine learning along with the genomics have created new hopes and expectations for primary care.<sup>11</sup> The advent and progression of a global pandemic only intensified these issues. All these factors lead to the conclusion that to improve health care, a strong evidence base for primary care is essential. To do this, we must prepare our researchers to be competitive in the funding application arena. GGP is one effort to ensure this happens.

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## STUDENTS, RESIDENTS BUILD CONNECTIONS AT NATIONAL CONFERENCE

Medical students and residents from around the country gathered in Kansas City, Missouri, for the 2023 National Conference of Family Medicine Residents and Medical Students July 27-29, 2023 to make connections, learn new skills, and get information they'll need to thrive in family medicine.

High on the list of topics that many of them came seeking guidance about this year was the slate of new residency program requirements for family medicine that took effect July 1, 2023, as well as numerous updates to the Electronic Residency Application Service (ERAS).

"There are a lot of questions this application season, and there are a lot of changes for our class specifically," said Kirsi Anselmi-Stith, a 4th-year student at the University of Utah School of Medicine, who attended 1 of 2 sessions about ERAS changes presented by Steven Brown, MD, director of the University of Arizona College of Medicine-Phoenix Family Medicine Residency. "It's nice to hear how we can use them to our advantage, as well as what pitfalls to avoid. This gives us some clarity."

### Hands-On Learning

Second-year resident Kristina Lim, MD, was back for her 4th National Conference and participated in skills workshops.

"We do this on a daily basis on the labor-and-delivery floor," she said after simulating repair of a 2nd-degree perineal laceration on a sponge. "But it's helpful to review skills in a safe and supportive environment."

Students also participated in the clinical procedures workshops, giving them experiences they don't get on a daily basis.

"It's different to put your hands on something and see how it works rather than watching others or reading about it in a textbook," said Aliah Moore, a 3rd-year student at St George's University School of Medicine, Grenada, who attended a workshop that used models to simulate vasectomies.

### Packed Expo Hall

Finding the perfect fit for residency was the goal of Gabriela Elias, a 4th-year medical student from St George's. Elias, a Florida native, said she visited with programs.

Elias found the Expo Hall's more than 600 booths overwhelming at first, but the AAFP events app helped her locate programs and connect with their websites, and a new system of grouping programs by region also simplified the experience.

"Everything has been amazing," said Elias, whose highlights included a mainstage event with Jen Caudle, DO, a session for international medical graduates and a presentation about residency interviews. "I attended online 2 years ago, but nothing compares to being here in person."

### Picture Perfect

Students will need to provide a recent professional headshot when they begin submitting applications in ERAS. The AAFP Foundation took the cost of photos and questions about ERAS specifications out of the equation by providing new headshots for more than 500 attendees.

"I'm applying this year, so I'll probably use this for my ERAS photo," said Jenna Kanner, a 4th-year student at the University of Maryland School of Medicine. "We also had headshots at my school, but they don't give you a ton of time or choices, so it's nice to have a 2nd option."

### Mission Accomplished

The conference drew 4,815 registrants, including 1,453 students. That's an increase of nearly 400 people compared to 2022, which was the 1st in-person version of the event after 2 years of virtual meetings during the COVID-19 pandemic.

Derek Southwick, a 4th-year student at the University of Washington School of Medicine - Moscow, Idaho, did his part to boost attendance. Southwick noticed that several states had not sent student delegates to the National Congress of Student Members in recent years. As the Family Medicine Interest Group regional coordinator for the Western United States during the 2022-23 school year, Southwick reached out to state chapter executives in his region multiple times throughout the academic year and urged them to send delegates. Seventeen of the 18 chapters did.

Southwick, not to be denied, found students from the 1 remaining state on site and convinced them to participate