Family Medicine Updates



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AFMRD STRATEGIC PLAN 2017-2019

The AFMRD is pleased to announce its Strategic Plan for 2017-2019. The AFMRD conducted a strategic plan process including member surveys and interviews to update the previous strategic plan. The AFMRD Board reaffirmed the mission and vision and updated the major goals and objectives.

Mission

The Association of Family Medicine Residency Directors inspires and empowers family medicine residency program directors to achieve excellence in family medicine residency training.

Vision

The Association of Family Medicine Residency Directors envisions a vibrant community of residency directors engaged in excellence, mutual assistance, and innovation to meet the health care needs of the public.

1. Professional Development and Education

Outcome: Implement education programs that enhance the professionalism and knowledge of program directors

- 1.1 Form a Professional Development Task Force to conduct a needs assessment and make recommendations on what kind of NIPDD-type programs and faculty development opportunities are feasible to support program directors
- 1.2 Maintain excellence of AFMRD professional development programs for program directors, including NIPDD and PDW
- 1.3 Provide assistance and direction in the transition of osteopathic family medicine into ACGME through initiatives such as the Accreditation Navigation Course and resources designed for new and transitioning programs
- 1.4 Evaluate opportunities to conduct regional meetings and activities
- 1.5 Provide guidance and assistance for program directors to deal with burnout and wellness
 - 1.6 Continue to seek increased involvement and

recognition of AFMRD in the AAFP Program Directors Workshop

1.7 Recognize Program Directors for leadership achievement, including Program Director Recognition Awards

Residency Program Quality Improvement (RPQI)

Outcome: Provide programs and tools to help members increase the efficiency, effectiveness and quality of their residency programs

- 2.1 Develop and maintain a robust toolbox for program directors
- 2.2 RPI Committee work to increase the effectiveness and participation in the Residency Performance Index (RPI) by determining how to reduce time required to participate, including software to conduct the survey
- 2.3 Residency Curriculum Resource (RCR) editors and management team will utilize data from AFMRD member needs assessment to analyze, update and expand the RCR
- 2.4 Conduct the expanded salary survey with more detailed information and increased participation
- 2.5 Monitor the use of Entrustable Professional Activities (EPAs) in resident training
- 2.6 Encourage members to utilize resources available to engage in new models of family medicine practice and payment
- 2.7 Work with ABFM to develop methods for program directors to report resident USMLE/COMLEX Step 2 and 3 exam scores to assist in predicting ABFM board scores

3. Advocacy and Collaboration

Outcome: Provide input directly and through collaborative efforts on regulatory, legislative and health policy issues that impact family medicine residency programs

- 3.1 AFMRD will be the voice of program directors in relationships with entities that impact family medicine, such as ACGME, RC-FM, ABFM, CMS, AAFP, etc
 - 3.2 Evaluate opportunities for GME reform
- 3.3 Advocate for and inform members about efforts by AFMRD on legislative and health policy issues impacting program directors, including new payment models
- 3.4 Collaborate with other organizations on health policy and academic issues, including FMAHealth, AAFP, Council of Academic Family Medicine (CAFM),

the Academic Family Medicine Advocacy Committee (AFMAC), and maintain liaisons with external groups

3.5 Determine best utilization of Family Medicine Advocacy Summit Scholarships

4. Communications

Outcome: Pursue communication opportunities and information dissemination through the AFMRD website, discussion forum, and publications

- 4.1 Identify online special interest community opportunities and initiate a pilot project
- 4.2 Increase awareness of AFMRD, its programs and board activities through all communications and emerging media opportunities
- 4.3 Promote membership growth, retention, and value
- 4.4 Continue to evaluate and improve electronic communications, including the discussion forum, website, development of a Resource Library, social media, etc

5. Infrastructure

Outcome: Provide the governance, staff, and financial support necessary to effectively administer AFMRD

- 5.1 Develop competency areas for elected positions and utilize them in the selection and/or election process
- 5.2 Implement changes to the nominating and election procedures
- 5.3 Implement committee and task force guidelines that include job descriptions and annual charges designed to reflect their role in implementing the strategic plan
- 5.4 Promote participation in governance by informing members of opportunities for volunteers
- 5.5 Implement an on-going board self-assessment program to improve efficiency and effectiveness
- 5.6 Maintain the effective and efficient staff structure through the Management Services Organizational Agreement with AAFP and an annual evaluation of the executive director and administrative services

The AFMRD Board is now in the process of implementing the objectives through identifying specific tasks, assignments and timelines for each objective to reach measurable outcomes. Committed to being responsive to our membership, much of the implementation will be through member task forces. Ultimately, the strategic plan is designed to support program directors to create excellent family medicine education in our changing health care system.

Karen B. Mitchell MD, President-Elect James Jarvis MD, President Association of Family Medicine Residency Directors



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NAPCRG LAUNCHES TRAINEE ENGAGEMENT PROGRAM

In October 2015, NACPRG passed its first ever Trainee Program committed to providing tailored and personalized experiences specifically for trainees. Composed of 5 major pieces that are designed to give students, residents, and fellows an environment that cultivates their skill sets, the program also provides invaluable mentoring in specified fields.

The first part of this program is a preconference that made its pilot debut at the 2016 NAPCRG Annual Meeting-planned by Victoria Adewale of University of Virginia School of Medicine, and Madison Willenborg of William Jewell College. Two keynote speakers kicked off the preconference with short briefings on important topics to trainee development. Gillian Bartlett, Associate Professor and the Research and Graduate Program Director for the Department of Family Medicine at McGill University, spoke on "Making Meaningful Decisions about Your Future in Healthcare," and Sarah Gebauer, a second year Academic Family Medicine Fellow and an adjunct instructor of Family Medicine at Saint Louis University School of Medicine, spoke on "The Bumpy and Unexpected Road to Primary Care Research."

Next, four round-table discussions took place where trainees had the opportunity to speak with NAP-CRG professionals on the topics of finding a mentor, leading a multidisciplinary career, grant writing, and research methodologies. These discussions provided trainees time to cultivate and focus on career development with guidance from professionals in the field. Finally, a "speed-dating" mentoring session was held in which trainees had short, one-on-one discussions with NACPRG members to network and ask questions specific to their field. This time allowed trainees a time to network, to ask questions of professionals, and bring perspective to their professional journeys. Overall, the conference saw great feedback and was warmly welcomed by the NAPCRG community.

A second portion of the Trainee Program is dedicated to promoting trainee attendance at the annual meeting. Ten trainees applied for and were awarded \$1,000 training stipends. The stipend program promotes trainee involvement in NAPCRG and also encourages students to attend the Annual Meeting who may not be able to do so on their own.