



From the Association of Family Practice  
Residency Directors

## SCHOLARLY ACTIVITY IN FAMILY MEDICINE RESIDENCY PROGRAMS: THE NEED FOR SKILLED AND SUCCESSFUL FACULTY MEMBERS

Research and scholarly activity are important components of family medicine education. The Accreditation Council for Graduate Medical Education (ACGME), through the Core Competencies, has introduced and required additional goals for residency programs. Several of these competencies involve the incorporation of scholarly activity into the patient care experience. Of the 6 core competencies, practice-based learning and improvement and systems-based practice specifically address issues of utilizing scientific evidence and improving patient care. Specifically, practice-based learning and improvement involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care; whereas systems-based practice is manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system for health care and the ability to call on system resources effectively to provide care that is of optimal value.

To integrate research and scholarly activity successfully, residency programs require energetic faculty that possess the necessary skills, expertise, experience, and success. Faculty involvement has been noted to be a characteristic of programs that are successful in research.<sup>1</sup> Currently, only 12.9% of family practice residency programs require faculty to engage in research or scholarly activity.<sup>2</sup> To engage in these types of activities, many faculty members may require additional training or incentive. Alternatively, family physicians with formal training in research may need to be hired to fulfill these roles in residency programs

One way to build capacity and increase productivity in any organization is to have an appropriately trained and skilled workforce. Formal training in research and other scholarly activities is available through full-time and part-time faculty development fellowships. Currently, the STFM Web site provides a listing of 37 such fellowships. In general, the focus of these fellowships is to develop skills in teaching, research, and other scholarly activities in preparation for service as departmental or program faculty.

For residency programs addressing the need for a formal curriculum in research, the graduates of these faculty development programs offer an alternative solution for increasing the program's scholarly activity and productivity. As suggested by Arch G. Mainous, III, PhD, professor and faculty development fellowship director in the Department of Family Medicine at the Medical University of South Carolina, "The goal of increasing scholarly and research productivity in residencies could be facilitated by a greater use of individuals who have completed faculty development fellowships." Especially for programs with little or no record of successful research endeavors, Dr. Mainous suggests that "actively recruiting individuals who are already trained could really jump-start initiatives to increase scholarly productivity."

In addition to providing a needed service to programs and departments through emphasis on research and scholarly activity, these fellowships have provided additional personal as well as professional benefits. For instance, graduates of faculty development fellowships have reported that getting their fellowship encouraged them to pursue their ideal position in academic family medicine.<sup>3</sup> Furthermore, alumni of faculty development programs have a high service rate in federally designated medically underserved communities.<sup>4</sup>

For the discipline of family medicine, as well as the enhancement of the associated residency programs, the faculty development fellowships provide the research and scholarly activity foundation necessary for the maintenance of a medical discipline. As such, Dr. Mainous notes "it is in the best interest of both university departments as well as residencies to keep a pipeline going that produces fellowship-trained family physicians."

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## References

1. DeHaven MJ, Wilson GR, O'Connor-Kettlestrings P. Creating a research culture: what we can learn from residencies that are successful in research. *Fam Med*. 1998;30:501-507.
2. Neale AV. A national survey of research requirements for family practice residents and faculty. *Fam Med*. 2002;34:262-267.
3. Woods SE. A qualitative assessment of one cohort from the University of North Carolina Family Medicine Faculty Development Fellowship. *Fam Med*. 2002;34:126-131.
4. Kohrs FP, Mainous AG, Fernandez ES, Matheny SC. Family medicine faculty development fellowships and the medically underserved. *Fam Med*. 2001;33:124-127.