More broadly, the Roundtable organizes regular meetings with sponsors of the NASEM report to collaborate on efforts to inform its implementation. This includes members who participated in the creation of the nation's <u>first scorecard</u> <u>for primary care</u>,¹⁶ as well as efforts to examine the methods and approaches to measure primary care spending in the United States.

What Do We Plan to Do: Our Future Work

Moving forward, the Roundtable will continue to elevate understanding about primary care and its value, potential, and needs among policy makers and other key stakeholders, as well as to support implementation of the 2021 NASEM report recommendations. The Roundtable will further our goals by engaging one another, new primary care research and policy centers that emerge, and international primary care partners to:

• Generate and/or synthesize new, policy-relevant evidence to inform primary care on multiple fronts, including payment, delivery, workforce, access, and quality

• Translate primary care evidence for policy makers and other decision makers through policy briefs, infographics, blog posts, and the like, to be strategically shared in meetings, webinars, and via testimony

• Convene key leaders committed to improving primary care

• Provide technical assistance where applicable

We also seek new and innovative ways to communicate more broadly with the primary care workforce, patients, policy makers, and change agents about why they need primary care and what they can do to help strengthen it.

Jennifer E. DeVoe, Lauren S. Hughes, Deborah J. Cohen and the Primary Care Centers Roundtable, <u>Center for Community Health</u> <u>Integration</u>, Kurt Stange, <u>Center for Excellence in Primary Care</u>, Tom Bodenheimer and Kevin Grumbach, <u>Center for Primary Care</u>, Russ Phillips, <u>Center for Primary Care Research and Innovation</u>, Deborah J. Cohen and Jennifer DeVoe, <u>Center for Professionalism and</u> <u>Value</u>, Andrew Bazemore and Robert L. Phillips, Jr, <u>Farley Health</u> <u>Policy Center</u>, Lauren S. Hughes and Shale Wong, <u>Larry A. Green</u> <u>Center</u>, Rebecca Etz and Kurt Stange, <u>National Center for Primary</u> <u>Care</u>, Anne Gaglioti and Dominic Mack, <u>Primary Care Research</u> <u>Center for Healing People and Communities</u>, Carlos Jaen, and <u>Robert Graham Center</u>, Alison Huffstetler and Yalda Jabbarpour

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LEADERSHIP CONFERENCE TOWN HALL

Town Hall Addresses Well-Being, Protecting FPs, Other Key Issues

AAFP officers and members discussed the Academy's work on the biggest issues family physicians are facing—including burnout and well-being, protecting physicians from legislative interference, and opportunities to lead change—in a Town Hall meeting May 10 at the 2023 AAFP Leadership Conference in Kansas City, Missouri.

Cutting Major Causes of Burnout

AAFP President Tochi Iroku-Malize, MD, MPH, MBA, said the Academy is actively working with Congress and

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supporting legislation that would reduce one of the leading drivers of burnout: administrative burden. One bill that would do that is the Safe Step Act of 2023, which would limit the use of step therapy protocols to ensure patients have access to treatment.

And while the AAFP is working to reduce burnout through legislation, numerous tools to help physicians strengthen and protect their own well-being are available at https://www.aafp.org/family-physician/practice-and-career/ managing-your-career/physician-well-being.html.

"Advocate for yourself the way you would advocate for others," Iroku-Malize said. "Take time out to refresh and rejuvenate and know what your boundaries are. You can't say 'yes' every day. Believe it or not, I do say 'no' occasionally. It doesn't have to all fall on you. Rely on others in your organization or your chapter to help."

She also noted that the AAFP has worked with technology companies to pilot artificial intelligence products that reduce administrative burden.

"It's important for us to be there as we build these tools," said Iroku-Malize, who emphasized the need to identify unintended consequences during development. "There are unintended consequences for any technology, so you have to think three steps ahead, like in chess."

"Our Job Is to Protect You"

Iroku-Malize said the AAFP is also pushing back at legislative attempts to criminalize certain aspects of comprehensive health care, including issues related to reproductive health and gender-affirming care.

"Any legislation or regulation that interferes with the patient-physician relationship or seeks to criminalize our physicians, we're going to oppose it," she said. "That's the bottom line. We have always advocated for everyone's right to health care."

Iroku-Malize acknowledged that there are "varying positions and feelings" regarding these issues. She noted that the AAFP's actions were not intended to negate opposing views, but to "support the patient physician relationship and make sure our members are not criminalized."

AAFP EVP and CEO Shawn Martin expressed "disbelief" that the AAFP is in a position that requires it to speak out to "protect the physical and mental well-being of our members."

This is not just an AAFP issue but an organized medicine issue. Physicians should be exempt from the political pressures of the day, he said.

"Our job is to protect you," Martin said. "We will continue to do everything we can to push back, speak out and protect your ability to take care of the other person in the room. We won't relent. Medicine cannot be criminalized based on the whims of the day. That's the fight."

How to Be Heard

One attendee asked what members can do to make their opinions known and to have a voice in AAFP decisions.

Iroku-Malize noted that Board members frequently attend constituent chapter meetings on listening tours and also are available to meet with members during Academy conferences.

"State chapter meetings are very important," she said. "We're trying to hear what's concerning to you."

Iroku-Malize also encouraged members to join member interest groups, noting that AAFP staff garner feedback from those groups.

President-elect Steven Furr, MD, said family physicians can influence the AAFP's work by completing the annual Member Satisfaction Survey.

"I get a lot of surveys," he said. "If you don't pay me money, I don't fill them out. This is one survey I do fill out. I can't emphasize how important it is. We slice and dice that information every way we can. It informs what we do."

Furr also pointed out that members can get directly involved by serving on one of the Academy's 8 commissions, which offer roughly 150 positions that influence the Academy's work on issues related to education, advocacy, public health, and more.

"It's an incredibly important way to work your way into leadership and connect with the national Academy and with your state chapter," he said. "Every year we have states that are not represented on commissions. No matter how small your state is, you should have at least 1 person on a commission."

> David Mitchell AAFP News



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STFM ANNOUNCES A NEW FAMILY MEDICINE POCUS EDUCATOR'S CERTIFICATE PROGRAM

Society of Teachers of Family Medicine (STFM) is recruiting core faculty and faculty instructors to develop the following components of the Certificate Program, which will launch in summer 2024. STFM is accepting applications for core faculty and faculty instructors for a new STFM Family Medicine Point of Care Ultrasound (POCUS) Educator's Certificate Program. This program will train family medicine residency faculty to serve as their program's POCUS champion with the skills to train family medicine

Faculty will help to develop the program workshops & modules in 2023-2024 and will lead components of the certificate program once it launches in May 2024. Faculty members will serve a 3-year term and are eligible for an additional 3-year term renewal.