

encourages researchers to appreciate the need for timely information for policy decision-making. Similarly, decision-makers need to understand the rigor required to provide methodologically sound data."<sup>6</sup>

### Consider Interpretation Skills by Decision Makers

Well-presented information is not enough to ensure research use. Decision makers are being told to use research findings, however many of them have not been educated to evaluate findings, placing them at risk of using poor quality research to inform their decisions. Britain's National Health Service developed the Critical Appraisal Skills Program. This program offers workshops to help decision makers develop skills to find and make sense of research evidence, making it easier for them to action knowledge into practice.<sup>7</sup>

Funders' attitude toward research is critical. Given Federal Parliamentarians' role in setting government funding for health research, a survey was conducted. Participants perceived health research to be a low priority for Canadian voters.<sup>8</sup> Decision makers need to understand what they are missing without research findings such as outdated recommended care.

### Evaluate Strategies

Evaluating strategies that are effective and promoting them is important (eg, developing an impact analysis of a quality of care improvement). "Health care researchers should ask: What is everyone learning?" says Donald Berwick of the Institute for Healthcare Improvement in the United States. Asking this question will help decision-makers and researchers see further in the journey toward improvement."<sup>9</sup>

### Conclusion

Effective connecting with decision makers presents an important opportunity in our current research environment. We need to make research right for the knowledge user by identifying and involving decision makers, creating presentations that help interpretation, and putting key messages in context.

Researchers need to be in the public domain presenting arguments concerning health research benefits. To this end, NAPCRG's Communications Committee has proposed a Public Relations initiative, including a plan for facilitating NAPCRG members' specific expertise for the media. Presenting at conferences with a broader target audience such as Data Users 2008 ([http://www.cihi-conferences.ca/datausers2008/welcome\\_e.html](http://www.cihi-conferences.ca/datausers2008/welcome_e.html)) where an aim is to engage in a dialog on how to "put data into action" can help link the health information chain.

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### AAFP BRINGS OUT VARIETY OF NEW TOOLS FOR EMPLOYERS, RESIDENTS, STUDENTS AND CONSUMERS

The AAFP has been busy expanding the Academy's core information in a variety of areas. The Academy has worked with the Patient-Centered Primary Care Collaborative, or PCPCC, to create a purchaser guide designed to encourage large buyers of health care to adopt the patient-centered medical home as part of their health care plans. In addition, the AAFP has created an online directory of family medicine residencies that offer international rotations, revamped its Web site for medical students interested in family medicine, and added a new Web site aimed at encouraging consumers to advocate on issues important to family medicine.

#### Health Care Purchaser Guide

The PCPCC's *Patient Centered Medical Home Purchaser Guide* serves as both an educational tool and an informative guide, explaining how health care purchasers can readily make the patient-centered medical home a cornerstone of their health care plans.

The guide is divided into sections that define the patient-centered medical home, outline its core concepts, and explain why it is a wise investment for purchasers of health care. The booklet also lays out strategies for purchasers to follow to adopt the medical home and provides sample insurance contract language to help purchasers jump-start that process. The guide was developed by the PCPCC's Center for Benefits Redesign, 1 of 4 working groups of the collaborative. The AAFP is a founding member of the collaborative.

"We, as large employers, used to think of ideas and throw them over the fence at the providers and the health care plans and say, 'Implement this—this is what we want to buy,'" said Paul Grundy, MD, MPH, chair of the PCPCC and director of health care technology and strategic initiatives at IBM.

The purchaser guide represents the first time health care professionals, health care plans and consumers all have collaborated on a purchasing document, giving the booklet a multisided perspective that other guides lack, Grundy said. Moreover, the document is aligned with the joint principles of the patient-centered medical home adopted by the AAFP, the American Academy of Pediatrics, the American College of Physicians, and the American Osteopathic Association, making it a powerful tool that can drive systematic change, Grundy added.

### International Rotations

Medical students looking for family medicine residencies that offer international rotations now can turn to a new, online directory from the AAFP that describes 56 programs in 22 states.

Residencies listed on the "Residency Programs with International Rotations" Web page at <http://www.aafp.org/online/en/home/aboutus/specialty/international/oppo/residencies.html> are grouped by state. Each entry includes a brief description of the program's international activities.

By clicking on the name of the residency, students will be directed to a page that provides detailed residency contact information; a description and location of the international program; and descriptions of the field experience participants can expect, didactic sessions offered, costs, level of faculty involvement, and trip duration.

The international rotations are offered in countries in Central and South America, Africa, Asia, the Middle East, the Caribbean, and Western and Eastern Europe.

"Students' interest in international experience has become one of the multiple factors that may influence medical students' career choices," said Alexander Ivanov, the AAFP's international activities manager. In addition to medical students, family medicine residents

and faculty also want access to reliable information on international health opportunities that can be updated easily, he said.

The AAFP Division of Medical Education compiled the directory after surveying residency programs in spring 2008.

### Virtual FMIG Gets New Look

The AAFP's Web site for medical students interested in family medicine has undergone some major changes.

A grant from the AAFP Foundation, allowed the family medicine interest group, or FMIG, Web site at <http://fmignet.aafp.org/online/fmig/index.html> to be redesigned. In addition to new features and content developed just for students, the Academy has added a new section for pre-medical students.

Virtual FMIG focuses on giving students relevant and timely information about the specialty of family medicine, including information about the scope, training, and lifestyles of family physicians, according to Amy McGaha, MD, assistant director of the AAFP Division of Medical Education. Resources on the site include promotional materials and presentations that students can use when discussing family medicine with their colleagues.

One new feature, the Student Interest Discussion Forum, provides a communication tool that allows students to share information and experiences as they explore family medicine, McGaha said. Students can subscribe to the forum by submitting their e-mail addresses.

"Today's medical students rely on the Internet to receive the most up-to-date information about medicine and to connect with peers who share similar interests," said McGaha. "The AAFP, through Virtual FMIG, has long been a reliable source for excellent information about family medicine, and we want to continue to provide medical students with the resources they need to research careers in family medicine. The enhanced Virtual FMIG allows us to integrate new formats to deliver this information in innovative ways."

The newly added section for pre-medical students includes information specifically targeted to younger students, such as descriptions of the rigors and joys of a medical career, a primer for applying to medical school, and more information about family medicine as a career.

### Patient Advocacy Site

The AAFP also has launched a new Web site aimed at educating patients about family physician issues and encouraging them to join with their family physicians in advocating those issues with state and federal legislators.

Family Health Advocate at <http://www.family-healthadvocate.org/> was created as part of the Academy's "bold champion" initiative to support the AAFP's legislative advocacy agenda with consumers. The site's purpose is to inform patients and consumers about the Academy's advocacy issues and to motivate them to make their voices heard about those issues on family physicians' behalf.

According to information on the Web site, patients play an invaluable role in the health care system and need to have their voices count on issues that affect their health and that of their family members. "Your voice counts," notes the site. "Join us and become a family health advocate to help make sure the health care system supports you. Together, we can send the message that the health care system needs to change, and it needs to change now."

The site, which had a "soft" launch early in 2008, uses the Academy's consumer Web site [familydoctor.org](http://familydoctor.org) as a springboard to reach the 2.5 million health care consumers that visit [familydoctor.org](http://familydoctor.org) each month.

Family Health Advocate features articles about advocacy issues that are important to family physicians and Web tools that make it easy for patients to contact their elected officials about these issues. The Medicare payment cut, the patient-centered medical home and health care reform all have been topics featured on the site.

Visitors to the site also can sign up to receive monthly e-mail newsletters and action alert e-mail notifications that focus on "hot" legislative issues and ask users to take immediate action by contacting their elected officials. Included in each action alert is a link to letter templates and contact information for legislators on a state-by-state basis. Action alerts sent in June to registered users of Family Health Advocate resulted in a significant percentage of those users contacting their legislators to urge a favorable vote on the Medicare payment bill.

Although primarily focused on advocacy issues, Family Health Advocate also includes stories on health care tools and tips for patients, AAFP programs and initiatives, and some clinical information.

*Editors  
AAFP News Now*



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## **NEW ALTERNATIVES IN MC-FP PART IV MODULES**

Every ABFM Diplomate will be required to complete a Part IV module during the Maintenance of Certification for Family Physicians (MC-FP) process. Part IV modules include the Performance in Practice Module (PPM), approved alternatives, and now available, the Methods in Medicine Module (MIMM), as well as the ABMS Patient Safety Improvement Program.

Roughly 20% of ABFM Diplomates practice in environments in which they do not have access to a continuity practice that they can utilize for PPMs. The MIMMs now provide a Part IV alternative for Diplomates in these professional roles. The MIMM is designed to mirror the process of pre-intervention audit, the conduct of a quality improvement activity, and the post-intervention audit used in the PPMs. The PPM and the MIMM modules are included in the MC-FP process fees.

Diplomates can access the ABMS Patient Safety Improvement Program through the ABFM Web site or at <http://www.healthstream.com/hlc/abfm/>. Diplomates will be asked to log in and pay a fee of \$55 to HealthStream, the organization that delivers the module for ABMS. You will also be required to provide your ABFM ID number to HealthStream in order for the ABFM to confirm your completion of the Patient Safety Improvement Program. Once you've provided HealthStream with your ABFM ID number, the ABFM will access your records with HealthStream and award the MC-FP credit for completing the Patient Safety Improvement Program as long as ABFM MC-FP fees are current.

If you need help with logging in or completing modules, or if you have any questions regarding your current MC-FP status, please contact our Support Center at 877-223-7437 or via email at [help@theabfm.com](mailto:help@theabfm.com) for assistance.

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