



From the Association
of Family Medicine Residency Directors

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QUALITY IN RESIDENCY EDUCATION

The Association of Family Medicine Residency Directors (AFMRD) was founded 20 years ago to address the unique needs of family medicine residency directors. The founding principles included providing a forum for program directors to mutually assist each other.

The organizational symbol of AFMRD has at its center the statement, "Leadership in Education". An equally suitable statement for the center of the symbol would be, "Quality in Residency Education."

The AFMRD Board has been engaged in developing a strategic plan for the organization for the next 3 years. The centerpiece of the plan is a renewed emphasis on improving the quality of all residency programs. Other major components of the plan will be to raise the quality of resources for program director development, strengthen our advocacy efforts, promote and disseminate innovation in education, and structure our governance so as to most effectively operationalize our strategic goals.

The Board vetted earlier versions of the strategic plan through thought leaders within family medicine education. We were challenged to be bold and to push our residency training programs and their directors to new levels of excellence. The Board was also challenged to consider if it could realistically improve medical student interest, improve the quality of those seeking to become family medicine residents, or tackle the level of medical student financial indebtedness without being part of a larger national effort. To that end, the Board has redirected its efforts in its strategic plan to those areas that we can most readily and directly influence, that is, to improving the quality of residency education.

We expect that there will always be major medical knowledge content areas of family medicine that all residents will be expected to learn, regardless of any anticipated changes in the program requirements by the Residency Committee for Family Medicine of the Accreditation Council on Graduate Medical Education (RC-FM). These include adult medicine; care of neonates, infants, children, and adolescents; maternity care; musculoskeletal medicine; community medicine; and management of health systems, just to name a

few. The AFMRD Board proposes that for each major content area, a series of robust and standardized goals, objectives, metrics, and competency-based evaluation tools be identified and developed. These tools would be made available to all residency programs. Individual programs could add additional tools to meet their local needs.

Whether the RC-FM develops requirements for programs to prove that a resident is competent with the next iteration of the program requirements for family medicine or at a future revision, AFMRD is committed to developing a learning community in which best practices for evaluation of competency can be identified and shared. This ambitious goal will require the development of a platform(s) for sharing this information. The development and sharing of these tools is consistent with the foundational principle of program directors providing mutual assistance to each other.

One of the cornerstones of improving the quality of residency programs is to raise the bar for all residency programs by increasing the transparency of residency program quality. To that end, the Board, and participating members, will develop a series of program quality metrics that can be incorporated into a quality dashboard. We envision a time when these measures will be publicly available. Although not a specific part of the plan, such an emphasis on developing best practices and increasing transparency may provide material for those engaged in educational research.

The Board recognizes that these strategic goals for our AFMRD members are ambitious and are likely to extend beyond the current resources of the organization. To that end, the AFMRD Board will seek to identify opportunities for partnership with the full membership, other organizations within the family of family medicine, as well as other potential groups. In an era of increased transparency and scrutiny, non-profit entities, such as AFMRD, must be structured appropriately to be in full compliance of the law. In order to best serve its members, the Board has been actively exploring its governance, including its articles of incorporation so we can be able to form the partnerships needed to realize our goals.

This article represents the first of a series of articles in the *Annals of Family Medicine* outlining components of the AFMRD strategic plan. Subsequent articles will be directed to expanding on some of the components of the plan. In addition, the plan will be presented to the full membership of the organization at the annual Program Directors Workshop in June 2010.

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