

Finally, ACOs should be allowed to employ a variety of payment approaches, including blended fee-for-service/prospective payment, shared savings, episodic or case rate methodologies, and partial capitation.

Heim said that as quality improvement and cost savings to the system are realized, primary care practices that are at the heart of the ACO model must be recognized. "Primary care practices will need to make sure that they are receiving the benefits of the shared savings," said Heim.

Sheri Porter
AAFP News Now

For questions regarding the new iPhone app, Diplomates may contact the ABFM Support Center at 877-223-7437 or via e-mail at help@theabfm.org.

Michele Mason
American Board of Family Medicine



From the Society of Teachers
of Family Medicine

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From the American
Board of Family Medicine

Ann Fam Med 2011;9:88. doi:10.1370/afm.1216.

AMERICAN BOARD OF FAMILY MEDICINE LAUNCHES NEW EXAM PREP IPHONE APPLICATION

The ABFM is pleased to announce the launch of its new iPhone app, ABFM Exam Prep. This mobile application provides family physicians with useful information to assist with preparation for the ABFM Maintenance of Certification Exam. This module turns your iPhone into an invaluable tool for keeping you in touch with what you need to know as you enter your certification or recertification year. The app is available as a free download on iTunes.

Features include:

- Exam Prep documents and videos—including the detailed ABFM Guide for Exam Preparation document
- Upcoming Exam Dates—a quick view of future dates
- Links to the ABFM Web site and the Journal of the American Board of Family Medicine Web site
- Practice Quiz—Over 200 questions addressing problems commonly encountered by family physicians. Each practice quiz presents 10 questions followed by a clear rationale for the correct answer including the associated reference.

While not a substitute for a well-designed and executed study plan, the ABFM Exam Prep app is an additional tool to help prepare for the Maintenance of Certification Exam. This module is designed for family physicians, but the questions may be useful for medical students and other health care providers as well.

FAMILY MEDICINE CLERKSHIP CURRICULUM—NEXT STEPS

Family medicine is an essential component of the United States health care delivery system. A required family medicine experience is part of the curriculum of most medical schools. However, the content of the family medicine clerkship varies widely among medical schools. To develop consistency across family medicine clerkships, the Society of Teachers of Family Medicine convened a task force to define the core objectives and content for the family medicine clerkship. The task force included representatives from the Association of Departments of Family Medicine, the Association of Family Medicine Residency Directors, the American Academy of Family Physicians, the Society of Teachers of Family Medicine Group on Medical Student Education, the Family Medicine Curriculum Resources Project, and fmCASES, a set of virtual patient cases. This task force defined the Family Medicine Clerkship Core Content as a list of common and important presentations that students should experience during their clerkship experiences. The curriculum has 5 sections: principles of family medicine, acute presentations, chronic diseases, health maintenance and disease prevention, and the role of family medicine. Each section has general objectives and specific objectives for each core content condition, available in the curriculum document. This document was approved by Council of Academic Family Medicine (CAFM). This initiative was funded by the STFM Foundation.

The Family Medicine Clerkship Core Content document serves as the foundation for a national clerkship curriculum; however, it did not address many issues critical to curriculum design. In addition to content, a curriculum includes educational methods for students and faculty members; learner, faculty, and program assessment; and considers context such as the length of the rotation, types of experiences, and strengths

of students and faculty members. There is a need to develop more detailed information that outlines how to deliver the Family Medicine Core Curriculum and how to assess effectiveness. In August 2010, a second task force was formed to develop a document that outlines best practices for delivering and evaluating the core curriculum for third-year family medicine clerkships. This task force also includes broad stakeholder representation.

The task force met on October 7-8, 2010 in Kansas City with the purpose of creating a shared vision among task force members of what this type of document would be and the process by which it would be developed. The task force envisioned the first iteration to be a Web-based resource that would contain curricular content, resources for faculty members, information about educational methods, and assistance with assessment strategies.

The curriculum content developed by the first task force forms the first section of the clerkship curriculum. The content currently housed in a document ([http://www.stfm.org/documents/fmcurriculum\(v3\).pdf](http://www.stfm.org/documents/fmcurriculum(v3).pdf)) will be moved into a Web format and will allow easy navigation among the 5 sections. Section pages will include topic links dedicated to core principles, acute presentation, chronic disease, and health promotion and disease prevention, and the role of family medicine. These topic links will contain the objectives for that condition along with examples of educational and assessment strategies that can be used to address those objectives. We anticipate also creating links to search The STFM Resource Library (FMDRL), multiple resources, and to query the medical student educators' listserv (FM-PDN@FPEN.Org).

The resources for the faculty development page will serve to help clerkship directors and others find the resources they need to implement and evaluate curricula. We are considering a type of self-assessment that would help clerkship directors target their personal development towards the highest yield activities. We plan to provide links to several resources with quick descriptions of what those resources are, how to find them, and when they may be useful.

The educational methods section will provide a brief introduction to learning theory and links to various types of educational methods such as: small group discussions, experiential (participation in supervised clinical care), self-study, and others. Specific educational methods pages provide information about that method including key articles and best practices when available. We anticipate creating links to assessment tools commonly used with each specific method. As we believe that best practices may be lacking for many types of educational methods, we are considering how

to harness the expertise of our discipline into blogs or wikis that can inform the development of those best practices over time.

The assessment strategies section will have a brief introduction to assessment and links to various types of assessment methods such as: multiple choice questions, subjective clinical evaluations, OSCEs, and others. Specific assessment strategy pages provide background information, key principles, and basics of design and grading. We hope to house some national assessment tools, thereby providing a mechanism to facilitate use of a common assessment tool across multiple sites to enhance educational research. We anticipate creating links to send questions to the medical student educators' listserv and some type of blog or wiki for these pages as well.

The task force has held monthly phone conferences to flesh out the sections of the Family Medicine Clerkship Curriculum prior to the STFM Conference on Medical Student Education. This conference will provide opportunities for input from a large group of medical student educators. CAFM members will also be asked to provide their input and we plan to solicit feedback at the STFM Annual Spring Conference in April as well. We will incorporate this feedback as we continue to build the Family Medicine Core Curriculum over the next year. Our current timeline was designed to have a working Web site, approved by CAFM members in late fall of 2011 to allow medical student educators an opportunity to work with the Web site prior to the 2012 Conference on Medical Student Education. We will present an online model at the 2011 Conference on Medical Student Education to get early feedback in this process. An official launch at the 2012 meeting will give clerkship directors ample time to work with the Curriculum Web site in planning revisions for the coming academic year.

Members of the task force are looking forward to the critical input of family medicine educators to make this Curriculum Web site an outstanding resource. This initiative is being funded by the STFM Foundation and the Society of Teachers of Family Medicine.

Family Medicine Clerkship Curriculum Implement Task Force
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