ADFM Report to Working Party  
December 2018

Strategic Directions Workplan 2018-19

The ADFM leadership and Board, informed by a survey of our member Department Chairs and Administrators, is executing the attached Strategic Directions Workplan for 2018-19. Two overarching directions are: 1) Leadership; and 2) Diversity, Inclusion and Health Equity.

Key to strategic implementation is articulation of how ADFM is meeting these goals by a combined inward emphasis on supporting member DFMs while enhancing the power of collective impact with other mission-aligned organizations.

Highlights from current work underway in this Workplan:

- Explicit focus on Diversity, Inclusion and Health Equity in ADFM led by work of a new ADFM taskforce articulated in a commentary to be published Jan 22, 2019 in the Annals of Family Medicine on “Advancing Diversity, Inclusion and Health Equity to the Next Level” (attached is NOT FOR DISTRIBUTION commentary).

- Newly revamped ADFM Fellowship, now called the ADFM Leadership Education for Academic Development and Success (LEADS) Fellowship, is getting underway with review of applicants for the 2019-2020 year. The LEADS fellowship is designed for those who are interested in learning more about whether senior leadership positions in academic family medicine might be a good career fit and for those who aspire to become a Family Medicine Department Chair or other senior academic leader. This new fellowship is aimed at addressing (in part) a leadership priority in our current Workplan which is to increase the pool of individuals interested in and prepared to become department chairs, particularly those who are from groups traditionally underrepresented in medicine and/or leadership positions.

- A pilot of the Physician Scientist Pathway (PSP), in collaboration with the American Board of Family Medicine, is underway to address the pipeline of family physician researchers. This program offers an opportunity for medical students interested in a research career in family medicine a structured pathway for board certification and research leadership with integrated clinical and research training during an extended residency experience - see attached DRAFT brochure.

- “Best Practice Guide for Increasing Student Choice of Family Medicine” for DFMs is under development as one part of our contribution to the “25 x 2030” student choice of family medicine collaborative. We are looking forward to engaging STFM President, Beat Steiner, in a plenary session at our Winter meeting which
will examine key issues in the “best practice guide” as they are applied to addressing the goal of attracting 25% of US Seniors into choosing family medicine.

- Continuing our popular “joy in practice” webinar series, we have focused recent educational webinars on topics of health care delivery transformation prioritized by the ADFM membership in our recent survey of DFM Chairs and Administrators. Recordings of these webinars can be found on our website at: www.adfm.org/resources/webinars
  
  o Topics of webinars this year have included Compensation and Clinical Funds Flow, Applied Informatics: Visit Frequency and Predictive Risk, and Alternative Payment Models.
  o Most recent webinar (Dec 13th) on topic of Alternative Payment models coincided with publication of commentary in Ann Fam Med (http://www.annfammed.org/content/16/6/568.2.full.pdf+html) on “Alternative Payment Models in Departments of Family Medicine: Our Journey toward the Quadruple Aim”
  o Integrated Behavioral Health to be focus of March 2019 webinar

- Consideration of a new consultation service within ADFM. Much Board thought is being given to developing a new consultation service with some important lessons learned through the research consultations conducted through the Building Research Capacity (BRC) initiative (joint ADFM/NAPCRG initiative (http://www.napcrg.org/Programs/BuildingResearchCapacity(BRC). More to come on this in 2019.

**Pilot of Public Board Member Underway**

We are nearing the end of our first year of adding a Public Board member as a two-year pilot with funding from the FMAHealth. We are very pleased to have had funding for this expansion in 2018 from FMAHealth and are pleased to be continuing this into 2019 with funding from ADFM. Our plan is for a more in-depth evaluation by our Board and reporting on our experience by late 2019.

**2019 ADFM Winter Meeting**

The 2019 ADFM Winter Meeting is being held February 13-16, 2019 in Houston, Texas. The theme for the meeting, a nod to our Houston location, is “Rebuilding After the Flood: Designing Our Departments' Move Toward Value-Based Health Care.” Given our location, we are planning a panel on natural disaster preparedness and risk mitigation, featuring David Persse, MD, the Emergency Services Director for Houston/Harris County, among others.

We are also very excited to feature a local (previously from Galveston) author, Rachel Pearson, MD, for our first ever “One Book, One ADFM” book club session featuring her book “No Apparent Distress: A Doctor’s Coming-of-Age on the Front Lines of American Medicine”. Other outside speakers we are thrilled to include are Denise Rodgers, MD, FAAFP, Vice Chancellor for Inter-professional Programs at Rutgers, who will be addressing how departments of family medicine can be more proactive in understanding
and addressing health disparities in our communities, and Erika Johnson, MHSA, VP for Strategic Research at Vizient, who will be sharing about new research around the cost trajectory for healthcare in the U.S.

All members of the Working Party are invited to attend our Winter meeting. Registration materials can be accessed at http://www.adfm.org/Meetings.

NEW CHAIRS LISTING
Last update: December 10, 2018

Since August 2018 update

<table>
<thead>
<tr>
<th>Name</th>
<th>Institution</th>
<th>Email</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Matthew Press</td>
<td>University of Pennsylvania</td>
<td><a href="mailto:matthew.press@uphs.upenn.edu">matthew.press@uphs.upenn.edu</a></td>
<td>Interim as of August 1, 2018</td>
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<tr>
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<td>Interim as of October 2018</td>
</tr>
<tr>
<td>Nancy Bono</td>
<td>New York Institute of Technology College of Osteopathic Medicine</td>
<td><a href="mailto:nbono@nyit.edu">nbono@nyit.edu</a></td>
<td>Not new chair but new ADFM member, Nov 2018</td>
</tr>
<tr>
<td>Jeffrey Wolfrey</td>
<td>University of Arizona – Phoenix</td>
<td><a href="mailto:jeff.wolfrey@bannerhealth.com">jeff.wolfrey@bannerhealth.com</a></td>
<td>New to ADFM, Nov 2018</td>
</tr>
<tr>
<td>Steven Rothschild</td>
<td>Rush University</td>
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<td>Permanent as of September 2018</td>
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Recently Announced DFM Chair Transitions
Medical College of Wisconsin – open search
**Strategic Direction 2018-19:**
*Advancing Academic Family Medicine through Inward focus on DFMs and Power of Collective Impact*

**Two Overarching Priorities:**
1) Leadership and 2) Diversity, Inclusion and Health Equity

<table>
<thead>
<tr>
<th>Specific Priorities for 2018-19*</th>
<th>ADFM GROUP RESPONSIBLE</th>
<th>SMART Goal(s)</th>
<th>COLLECTIVE IMPACT PARTNERS (to also include FMAHealth where applicable)</th>
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<tbody>
<tr>
<td>1. Increase the number of women, racial and ethnic minorities, and individuals from other groups underrepresented in medicine serving as FM department chairs and department leaders.</td>
<td>Leadership Development Committee</td>
<td>Develop plan for evolution and expansion of ADFM Fellowship with a formal 2-5-year plan approved by the Board and in place by November 2018 (when 2019-20 Fellowship class is recruited)</td>
<td>CAFM, AAFPs Center for Diversity and Health Equity</td>
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<td>2. Increase the pool of individuals interested in and prepared to become department chairs and administrators</td>
<td></td>
<td>Work over Fall of 2018 within CAFM to proactively communicate about the CAFM Leadership initiative’s goals and enhanced efforts to proactively reach out to individuals within our organizations</td>
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<td>1. Improve the performance of family medicine departments and their academic health centers in advancing the Quadruple Aim.</td>
<td>Healthcare Delivery Transformation Committee</td>
<td>Deliver content corresponding to (at least) the top 3-5 membership priorities for healthcare delivery innovations within the 2018-2019 program year</td>
<td>AAFP, ABFM, AAMC</td>
</tr>
<tr>
<td>2. Support the ability of family medicine departments to successfully navigate and lead in a dynamically changing health care delivery and payment environment.</td>
<td></td>
<td>Submit a report to Board of Directors on feasibility of ADFM consultation service for healthcare delivery areas by Feb 2019</td>
<td>AAMC (as interest area)</td>
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1. Increase the number of US medical school graduates selecting family medicine as a career.
2. Collaborate with AFMRD and other organizations to re-design GME to meet the needs of the healthcare system of the future

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<tr>
<th>Education Transformation</th>
<th>Produce Best Practices Guide, a resource for chairs describing what can be done to increase student choice locally by June 30, 2019</th>
<th>AAFP/STFM through SCLAN</th>
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<td></td>
<td>Participate in the 25x2030 initiative, starting with launch in August 2018</td>
<td>AAFP/STFM through SCLAN</td>
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<td>Disseminate strategies to increase student choice of family medicine and bolster family medicine GME via mechanisms such as a session at the 2019 Winter Meeting and/or webinars</td>
<td>AAFP/STFM through SCLAN</td>
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1. Strengthen research and scholarship capacity in DFMs
2. Attract more research-oriented medical students into family medicine and support their research development during residency

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<tr>
<th>Research Development Committee</th>
<th>Outline a plan in the 2018 BRC Annual Report to bolster the engagement of the ADFM Research Development Committee (RDC) and the Building Research Capacity (BRC) initiative to directly impact DFMs’ capacity for research and scholarship</th>
<th>BRC, STFM, AFMRD, ABFM</th>
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<td></td>
<td>Form Advisory Board for Physician Scientist Pathway and develop marketing materials for the program</td>
<td>ABFM, AAFP, NAPCRG, AFMRD, others</td>
</tr>
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1. Strengthening our Advocacy Voice to influence Policies which impact academic family medicine and the health of our communities

| Executive Committee and ADFM AFMAC representatives | Articulate top advocacy priorities for academic DFMs and develop advocacy skills of members | AFMAC, CAFM Govt Relations Office, AAFP Advocacy arm, Primary Care IM, Peds |

**New Diversity, Inclusion and Health Equity Taskforce to ensure integration of diversity across specific priorities.**

**Key to executing on all Priorities is robust Information/data/resource Sharing along a continuum:**

| Electronic---------Distance Learning—Easily retrievable--------- | In-Person---------Onsite Consultations (drawing on “human resource/experts” within AFDM) |
| Info sharing (eg. Webinars) | Information/data tied to strategic Goals (via NEW enhanced Website**) |
| (eg List-serv, Newsletter tied to priority areas) | Learning Group (eg Winter mtg Admin Preconf Other preconfs) |
| | Articulate top advocacy priorities for academic DFMs and develop advocacy skills of members |

**= Work of a Taskforce**
Advancing Diversity, Inclusion and Health Equity to the Next Level

Task force Co-Author: Mark Johnson (Chair), Monty Douglas, Kevin Grumbach, Myra Muramoto, Anna Ramanathan, Beth Wilson, Philip Zazove, Ardis Davis (Staff)

12/5/18 - NOT FOR DISTRIBUTION - IN PRESS FOR JAN/FEB 2019 Ann Fam Med

ADFM as part of its mission has made Diversity, Inclusion and Health Equity a priority. This mission is being carried out with adherence to the core values that are crucial to our member departments’ teaching, research and provision of comprehensive care to the nation’s population.

The ADFM Board of Directors has taken a strong stance that we need to address diversity and inclusion in an authentic and deeper way if we are to be true to our values and mission of promoting health and health equity. In assessing this newest priority, the ADFM Board of Directors recognizes that as chairs and senior administrators we are, by definition, leaders in advancing these values and this priority in the academy. It is incumbent that we offer our membership the means to examine our departments and, when possible, our institutions with respect to diversity, inclusion and health equity. Furthermore, we recognize the need to share these concepts and how we operationally apply them with the entire Family of Family Medicine and medicine in general.

A new ADFM Diversity, Inclusion and Health Equity (DIHE) Task force has been formed to carry out these functions. Among specific tasks identified by the Task force are:

- To promote a shared understanding among ADFM members of concepts and terms. Drawing on established work, we will provide definitions to clarify the three concepts (Diversity, Inclusion and Health Equity) of this initiative.

- To incorporate DIHE concepts into the work of all ADFM committees and governance, holding ourselves accountable in all aspects of our work as an organization. We will accomplish these tasks in a manner that includes transparency and adherence to our guiding principles.

- To develop a template of implementation plans for use by individual departments as appropriate and consistent with their home institution plans.

- To advance these concepts in our inter-organizational work, such as through the Council of Academic Family Medicine (CAFM) and the American Academy of Family Physician’s Center for Diversity and Health Equity (CDHE) (external)

The Task force alone cannot do the work. This is a CALL TO ACTION! We need every Chair and Administrator in our member Departments to own this work with us. We will:

- Educate.
  - What is the connection between the three concepts - Diversity, Inclusion and Health Equity? How they are related, yet different?
  - Connect these concepts to higher organizational performance and to achieving better health and health equity outcomes for patients and communities
- Inspire and Develop a vision
  - Consider methodologies which bring these concepts/themes into the heart of ADFM and the broader Family of Family Medicine

- Develop a framework which helps an institution conduct a gap-analysis with consideration of solutions to improve Diversity, Inclusion and Equity. Potential modalities for dissemination are:
  - Webinars: Similar to our highly popular “joy in practice” webinar series, conduct webinars to educate chairs and administrators about this framework
  - 1:1 Consultations
  - Identify and disseminate best practices for implementation of strategies to address gaps

We have reviewed working definitions for diversity, inclusion and health equity as we set out to do the “what and how” of our work. These definitions, drawn from AAMC Group on Diversity and Inclusion (https://www.aamc.org/members/gdi/), Healthy People 2020 (www.healthypeople.gov), and AAFP (https://www.aafp.org/about/policies/all/health-equity.html), offer a compendium of others’ efforts and a starting point in our own assessment. These will be included on our website. However, the unique nature of our work - being responsible for teaching, research and clinical care - requires further inquiry into how we will operationalize these definitions and thus we need input from the membership. The end result will be a product that is useful to the membership and its various constituencies.

We invite all members of the Family of Family Medicine to join us in this endeavor. We will only achieve our goals with the maximal participation of all of you. And we can only fulfill our roles as leaders when we achieve these goals.
INTRODUCING
THE FAMILY MEDICINE
PHYSICIAN SCIENTIST
PATHWAY

Developed under the auspices of the ADFM Research Development Committee, this ABFM-approved program offers up to five years of integrated clinical and research training during residency, including rigorous methodological training in quantitative and qualitative research, and scientific writing ideally leading to high quality peer-reviewed publications and competitive NIH-type grant applications. Trainees will be prepared for an independent research career and academic leadership through mentored research, formal research training, and structured leadership development.

For more information on becoming part of FMPSP
CONTACT
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FAMILY MEDICINE
PHYSICIAN SCIENTIST PATHWAY

American Board of Family Medicine
MCMLXIX

ADFM
Association of Departments of Family Medicine
Vision, Voice, Leadership

DRAFT
Building A Research Career

In the specialty of Family Medicine, a consensus is emerging nationally on the need for a greater focus on increasing research capacity to match a well-established culture of clinical and educational excellence. The goal of the Family Medicine Physician Scientist Pathway (FMPSP) is to expand opportunities for medical students interested in pursuing a family medicine research career beyond current fellowship programs and help accelerate the growth of research capacity. The FMPSP provides medical students interested in a family medicine research career with a structured training pathway for board-certification and research leadership. The clinical learning environment for all residents will also be enriched by enhancing the infrastructure and culture of research.

Several departments* with demonstrated access to mentors and methodological experts are participating in the FMPSP pilot program. Residents will be offered two tracks in the NRMP or, alternatively, during the first two years of residency.

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<tr>
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<th>Planned average number of hours per 40-hour week, PGY by Track</th>
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<td></td>
<td>Track 1</td>
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<td></td>
<td>PGY1</td>
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<tr>
<td>Clinical training</td>
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<tr>
<td>PGY1</td>
<td>28</td>
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<tr>
<td>Mentored research</td>
<td>12</td>
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FMPSP Benefits

- Maintains passion for research during clinical training
- Integrated research and clinical training offers a more natural union of research with clinical practice
- Provides a seamless experience in one setting. No looking for a fellowship and dealing with the stress of recruitment, travel, interviewing, etc
- More competitive for research-focused faculty programs

Family Physician Scientists integrate primary care clinical insights into research and can help bridge clinical care and scientific discoveries.

*Pilot FMPSP Departments

Case Western Reserve University
Pennsylvania State University
University of California, Davis
University of Florida
University of Kansas
University of Pennsylvania
University of Utah
Virginia Commonwealth University