Clinic First

In response to discussions at Working Party meetings, AFMRD formed a collaborative ("Clinic First") with the UCSF Center for Excellence in Primary Care (CEPC). The 12-month collaborative kicked off in February 2018 with a one and a half day long face-to-face meeting followed by six interactive Webinars through January 2019. Strategies and implementation principles for the Building Blocks for High Performing Teaching Clinics have been presented throughout the year. Eighteen volunteer family medicine residency programs participated. Details of this collaborative will be presented at the AAFP Program Director’s Workshop in April 2019.

Some participants have reported being able to implement changes throughout the year. Changes reported include the following:

- Patient empanelment
- Measuring continuity
- 2 X 2 blocks
- Converting some blocks to longitudinal experiences
- Institutional continuity reporting
- Active management of continuity
- Tracking access rate (3rd next available)
- Transitions of care clinic (pts. Discharged from inpatient service)
- Implemented or adjusted teams
- Implemented all day resident clinic days

A second cohort in the Clinic First collaborative will convene on February 11 and 12, 2019 and will consist of 15 volunteer programs following the same paradigm as the 2018 collaborative.

Continuity Waiver Pilot: Family Medicine National Innovations in Continuity Clinic Experience (FM0NICCE)

Family Medicine National Innovations in Continuity Clinic Experience (FM-NICCE): In 2018 AFMRD facilitated a group waiver request to the ABFM on behalf of 25 family
medicine residency programs. The approval request allows for continuity clinic scheduling innovation that may impact residents being in the family medicine office for less than the required 40 weeks during each year of training. A five-year pilot was approved with required reporting to the ABFM at year three and five. Twelve of the 25 approved programs are also participating in the 2018 Clinic First Collaborative.

A Task Force, made up of seven of the 25 program directors involved with this initiative, met initially to develop criteria and standards for metrics collection and reporting. The Task Force continues to meet periodically to monitor progress of the pilot. The following metrics will be reported by each program throughout the pilot. 1) FMP visits per resident per year, 2) FMP sessions per resident per year, 3) continuity of care 4) resident satisfaction, and 5) patient satisfaction. FM-NICCE will cover a total of five years with reporting required to the ABFM after three years and at its conclusion.

This pilot began on July 1, 2018. Currently, there is no data to report.