Highlights from the Council of Faculty and Academic Societies Spring Meeting

Nashville, Tenn. March 6-8, 2014

Through its new structure, CFAS provides an exciting venue for the AAMC to learn from and engage early and mid-career faculty and faculty leaders. With 241 attendees, the first ever CFAS spring meeting sent a huge signal about this constituency’s hunger for engagement and input into the forces transforming academic medicine. Attendees alternated between hearing from inspiring thought leaders and working sessions to help shape CFAS priorities. AAMC had a record 17 staff on hand to hear from these new voices and lay the foundation for bi-directional communication.

—THMES AND KEYNOTES—

Challenges and Opportunities Facing Higher Education and Its Future

Mark G. Yudof, J.D.
Professor of Law, Berkeley Law School // President Emeritus, University of California

Dr. Yudof made a strong case for higher education and medicine as public goods:

Takeaways: We’re in a period where the support for public goods is eroding while the price sensitivity of consumers of higher education is growing. Sustainability can’t be built on ever increasing tuition. State and federal funds, even as they decline in inflation-adjusted dollars, are attached to increasing expectations for accountability. Meanwhile, productivity improvements are evident in so many industries, while they are hard to achieve in higher education and medicine. This has been called the “cost disease.” As a result, the limbs that support the research enterprise are sagging. Those who support research need to recognize its interdependency with undergraduate and graduate education, research trainees and the clinical enterprise. We need to explain how universities make a difference in people’s lives, even as we continue to look for efficiencies and re-examine our sacred cows.

RESIDENT PERSPECTIVE

“Residents are not letting a good crisis go to waste: many are making strides not only to survive and thrive in this tumultuous environment, but helping to shape it by offering potential solutions. As both learners and teachers, residents are uniquely positioned to be agents of change.”

Brenessa Lindeman, MD,
Past Chair, AAMC
Organization of Resident Representatives

CLINICAL FACULTY PERSPECTIVE

“As people move towards having to foot more of their private bills for health care, will they also be willing to subsidize medical research and education? Likewise, is the public prepared to sustain a fulltime academic faculty in the way we’ve become used to?”

Vincent Pellegrini, Jr, MD
Chair Elect, CFAS

RESEARCH FACULTY PERSPECTIVE

“As part of telling the story of the value of the university, we need to tell the story of how fundamental science impacts human health. And collectively, we have to intervene earlier in the education pathway to develop enduring interest in science.”

Tika Benveniste, PhD
Member, CFAS
Administrative Board

MEDICAL EDUCATORS PERSPECTIVE

“Most of us learned teaching from mimicking great teachers. We have to break that mold and develop the skills to convey knowledge, communication, empathy and problem solving in a learner-centered way…and we need to work closer with educational experts.”

Steven Block, MBBCh
Chair, AAMC Group on
Faculty Affairs
The ACA and Health System Transformation: The Impact on Faculty and Learners

Janis Orlowski, M.D. // Sr. Director, Clinical Transformation, AAMC

Dr. Orlowski shared how some teaching hospitals are making significant changes in focus and behavior in the transition towards value-based payment and new approaches to care delivery.

She also announced a new AAMC report, Advancing the Health System of the Future which reveals eight common themes among institutions that are taking proactive steps to the future:

1. The AMC of the future will be system based
2. These AMC systems require strong and aligned governance, organization, and management systems
3. University relationships will be challenged to change as AMC systems grow and develop
4. Growth and complexity of an AMC requires enhanced profile for Department Chairs, new roles for physician leaders, and evolution of the practice structures
5. Transparency in quality, performance, and financial information at all levels of the organizations central to achieving high achievement
6. National imperative to bend the cost curve will require a more efficient AMC operating model
7. Time for AMC Leadership to develop skills in Population Health
8. Candid assessment of strengths and weaknesses essential to achieve change

Her full presentation is available for participants to download.

Jeffrey R. Balser, MD, PhD
Vice Chancellor for Health Affairs and Dean, School of Medicine // Vanderbilt University

Takeaways: Academic medical centers play an indispensable role in the nation's health care. We perform key services that no other sector of the healthcare service industry can effectively provide, as centers that continuously invest in training the unique professionals capable of performing these services and innovating healthcare delivery for the nation.

At the same time, it is our responsibility to reengineer our own systems to better align our investments and costs with our unique role in the healthcare ecosystem. This can require big changes in the organization, with major shifts that fundamentally impact faculty, staff, students and trainees. Institutional culture is at stake during periods of radical change, and transparency and honesty are key to preserving culture in such times.

It is essential that leadership articulate plans that assure fairness across the organization. The importance of clarity and frequency of communication cannot be understated - all members of the institution must understand what is happening and how it affects them.
Audience questions for Dr. Balser

How do you weigh investments in personalized medicine vs. investments in population health management?

The backbone of population health management is a major commitment and investment in informatics, which also aligns with the needs of personalized medicine. Embedded in this investment is the infrastructure to measure and report quality in subpopulations, and because AMCs are investing in this we will be well positioned to be attractive partners to other providers in the healthcare ecosystem.

As part of personalized medicine, increasingly we are using genomics not just for research, but in clinical decision making. While the data are not yet conclusive on the cost effectiveness of genome-guided medicine, early evidence suggests a savings with genome-guided drug therapy in cases that reduce expenditure on ineffective drugs, or those with fewer side effects. More research is needed to demonstrate the economic case to gain universal acceptance of genomic testing by payers.

What are the impacts on faculty of administrative consolidation?

Creating administrative cores is an effective way to reduce duplication and save cost, but the cores should be designed with care, in a manner that takes advantage of scale and the ability to hire senior, experienced individuals, and therefore improve workflow and overall service to faculty. At the same time, some faculty are challenged to adjust to a more centralized resource, differing in many aspects from the tailored resources historically residing in local units. Overall, the goal of administrative redesign should be to provide better tools and support, reducing the ever-growing faculty burden of administrative activity.

Communicating Medicine and Research in a Rapidly Changing World

Robert Bazell
Adjunct Professor, Molecular Cellular & Developmental Biology // Yale University School of Medicine
Former Chief Science and Medicine Correspondent // NBC-TV

Bazell provided illuminating thoughts from his experience as a reporter and scientist on how to make the value statement for academic medicine.

“If you want to communicate to the public, it doesn’t have to be in 140 characters. There are people who want to know what’s behind the headlines, as there has always been. One of the good things about the information age is that you can provide a diagnosis and direct patients to vetted internet resources where they can learn more.”

~Bazell

“You have more sway and influence than you think. The profession has earned public respect and admiration...When you have the authority in a society that is so fragmented, don’t forget the importance of honoring that through service.”

~Bazell
AAMC CEO and President Darrell G. Kirch, MD shared how AAMC will be aligning internally and externally to focus on two primary advocacy and policy priorities: NIH and GME.

The impending Match and Supplementary Offer & Acceptance Program (SOAP) hung in the air over the conference, because of the excitement it holds for graduating medical students, but also because of what it might reveal about the mismatch between the number of medical students and residency slots. See AAMC’s statement from March 21 on continuing concerns about the shortage of residency positions.

How can faculty support the AAMC’s advocacy agenda?

- Faculty understand the impacts of policies to voters that members of congress and their staff will listen to. Explain what happens to your lab or your research; you’re close to patients and trainees, explain the impacts to them.
- If you have a personal relationship with a member of congress, tell us so we can try to leverage that relationship!
- Inform your representatives about what you do. Learn about how you can host AAMC’s Project Medical Education, which helps to educate Congress and other policymakers about academic medical centers, the benefits they provide, their complex funding mechanisms and the essential role of government support.

Join us for a webinar on April 28, 3-4pmET to learn:

- How to communicate with AAMC and what we want to hear from faculty.
- How AAMC and CFAS are working to foster two-way communication between group representatives and faculty.
- How to identify and partner with your institution’s AAMC Group on Faculty Affairs, Government Relations Representative, Group on Diversity & Inclusion and other key representatives to AAMC

More information and registration information to follow.

SAVE the DATE
Next year’s CFAS Spring Meeting
Thursday, March 5 – Saturday, March 7, 2015
The Westin San Diego Gaslamp Quarter