4. Collaboration and Coordination with Other Major AAMC Components

Collaboration with leaders at medical schools and teaching hospitals nationwide is a critical component to advancing the overarching goals of academic medicine. CFAS provides an important faculty and society voice to the collective work of the AAMC’s councils, along with that of the association’s affinity groups, representing thousands of professionals in academic medicine across the country.

5. Facilitation of Input from Medical Students and Residents

Because faculty members, particularly at the junior level, work closely with medical students and residents, CFAS can facilitate dialogue among these three groups. CFAS is additionally the “parent” council for the Organization of Resident Representatives, another of the association’s governing bodies. These relationships allow the AAMC to engage on a range of issues with students and residents at all levels.

For More Information

To learn more about CFAS and the AAMC, please visit www.aamc.org/cfas, or contact Eric Weissman, senior director, CFAS Engagement (eweissman@aamc.org; 202-828-0044).
The Association of American Medical Colleges (AAMC) established the Council of Faculty and Academic Societies (CFAS) in 2013 to serve as a bidirectional conduit of engagement between medical school faculty and the association. CFAS offers an unparalleled opportunity to bring the voice of medical school faculty (150,000 nationwide) to the conversation, helping to shape the direction and activities of the AAMC and its member institutions.

Through its work, CFAS is committed to engaging and bringing value to the following stakeholders:

- Medical schools and faculty
- Academic societies
- The AAMC

### Medical Schools and Faculty

CFAS provides a conduit for bidirectional engagement between medical school faculty and the AAMC, including venues for faculty to communicate their day-to-day concerns to association leadership.

CFAS representatives have an unprecedented opportunity to add a faculty voice to the activities and platforms of one of the premier medical organizations. Half of these representatives are in their early to mid-career trajectories and can benefit immensely from involvement in broad faculty activities, refinement of biomedical policy, and leadership development. Additionally, CFAS representatives have the opportunity to interact with peers from other medical school faculties and specialties, as well as key leaders at the AAMC.

### Academic Societies

Through their CFAS representatives, academic societies can collaborate with other disciplines on issues near and dear to their missions, such as teaching, research funding, and clinical reimbursement. CFAS helps to facilitate common ground among a broad spectrum of professional academic organizations by gathering diverse perspectives and setting aside turf issues, and speaking with the unified voice necessary to address regulatory bodies at a national level. CFAS participation also affords societies direct access to AAMC resources and activities, providing opportunities to collaborate and leverage comparative benchmark data to address issues with deans and local officials.

### The AAMC

CFAS offers a faculty and society perspective on the issues the AAMC confronts on a daily basis, such as national policies on graduate medical education, governance and regulation of academic medicine, and oversight of activities related to medical education, research, and care delivery.

CFAS representatives are responsible not only for bringing issues to the table, but also for informing other medical school faculty and society representatives of the AAMC’s activities. This ensures that the AAMC remains vibrant and relevant for all faculty and societies.

Given the deliberate inclusion of junior faculty, CFAS helps the AAMC truly represent the 150,000 voices of medical school faculty nationwide. And together with the Council of Deans (COD) and the Council of Teaching Hospitals and Health Systems (COTH), CFAS contributes to the unique three-way communication among the major stakeholders in biomedical education, research, and patient care.

### Five Core Areas of CFAS Value

1. **Bidirectional Communication with Senior and Junior Faculty**

   The AAMC routinely shares insight, fosters innovation, and enables peer-to-peer networking with many constituencies in academic medicine, including deans and other medical school administrators, academic hospital leaders, residents, and academic societies. Regular bidirectional communication with senior faculty members, including department chairs, division leaders, and program and center directors, has been lacking over the years.

2. **Development of Strategies and Policies in Education, Research, and Patient Care**

   As the AAMC develops strategies and policy positions important to the multiple missions of academic medicine, input from senior and junior faculty members is invaluable. The faculty represent the brain trust in academic medical centers, and access to this constituency can be of great value to the AAMC as it formulates positions and develops initiatives in support of health care delivery, medical education, and biomedical research. CFAS helps the AAMC directly receive this input.

3. **Leadership Development**

   The AAMC recently has accelerated its commitment to leadership development with a new chief learning officer to meet the growth needs of future leaders from the academic medicine community. In addition to providing direct leadership training to faculty members, and academic society representatives, CFAS can facilitate exposure of faculty members to important issues, challenges, and opportunities relevant to academic medicine.