AAMC Leadership Presentation

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Boston, MA
November 3, 2017
Chair of the Board of Directors Update
2016-2017 AAMC Board of Directors

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2017-2018 AAMC Board of Directors

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Board Nominations

Submit self- or other nominations at any time of the year to:

BoardNominations@aamc.org

Provide a brief description of your interest and experience within the AAMC and with other governing boards.
Distinguished Service Member

M. Dewayne Andrews, MD
Distinguished Service Member

Rosemarie Fisher, MD
Distinguished Service Member

Steven G. Gabbe, MD
President’s Update
Community Response in Times of Crisis
Six Great Challenges

An Era of Uncertainty in Health Care

Science in a "Post-Truth" Era

The New Realities of Medical Education

Burnout among Health Professionals

Inequity, Division and Injustice

A Leadership Deficit
Improving the Transition to Residency
Advancing Competency-Based Medical Education

EPA 11: Obtain Informed Consent for Tests and/or Procedures

- **Key Functions with Related Competencies**
  - Describe the key elements of informed consent: indications, contraindications, risks, benefits, alternatives, and potential complications of the intervention.
  - Communicate with the patient and family to ensure they understand the intervention.
  - Display an appropriate balance of confidence and skill to put the patient and family at ease, seeking help when needed.

- **Behaviors Requiring Corrective Response**
  - Learner is at multiple levels within a row.
  - Learner may be at different levels within a row.
  - Learner specifies when providing key elements of informed consent.

- **Expected Behaviors for an Entering Learner**
  - Understands and explains the key elements of informed consent.
  - Provides complete and accurate information.
  - Recognizes when informed consent is not obtained and describes it as a matter of good practice rather than as an externally imposed condition.

- **Underlying Competency**
  - Professionalism and responsibilities of medical practice.
  - Communication: patient-doctor relationship.

This schematic displays the development of proficiency over time. Core EPA 11 is re确实是 the core measure for use in an academic environment. Performance standards should be used to evaluate EPA 11 in multiple settings with varying contexts, staff, and complexity and with varying patient characteristics.

[Further information available at:](https://www.aamc.org/download/482214/data/epa13toolkit.pdf)
New Data for Residency Applicants

Point of Diminishing Returns for Entering an Internal Medicine Residency Program for U.S. MD Applicants

1. Number of Applicants = 27,219; this analysis included U.S. MD applicants only.
2. The point of diminishing returns is the point at which the value added by submitting one additional application is reduced relative to the value added by each application before reaching the point of diminishing returns. The addition of one application beyond this point results in a lower rate of return on an applicant's likelihood of entering a residency program.
3. The point of diminishing returns is an estimate and is not perfectly precise. Therefore, confidence bands around the point of diminishing returns are provided. The lower and upper bounds of each confidence band are shown (a) below the point of diminishing returns in the circle and (b) by the shading around the vertical lines. The width of the confidence band describes the precision of the estimate, with wider bands indicating less precision.


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AAMC Standardized Video Interview
Encouraging Innovation in Medical Education
The Arts and Humanities in Medicine

Focusing on Arts, Humanities to Develop Well-Rounded Physicians

Learning about history, visual and performing arts, and literature can help physicians develop empathy and professionalism—skills that will lead to deeper connections with patients.

Penn State College of Medicine student Scott Paradise creates a copy of a Van Gogh painting based on a partner’s description. The class emphasizes the importance of open-ended communication in medicine. Credit: Patrick Mansell.
Improving Well-Being for Clinicians, Faculty, and Learners
AAMC Commitment Statement

AAMC Statement on Commitment to Clinician Well-Being and Resilience

The AAMC supports a culture in academic medicine that values the well-being of faculty, staff, and learners. An environment that prioritizes health professionals’ well-being aligns with the AAMC mission of improving the health of all.

Substantial evidence indicates that physicians and other clinicians are at risk of elevated rates of burnout, depression, and suicide. Clinician burnout has been associated with increased medical error, significant morbidity, and increased patient mortality.

There is growing momentum to improve well-being for health professionals, and action is needed to advance evidence-based solutions to promote clinicians’ well-being and combat burnout, depression, and suicide among U.S. health care workers.

To facilitate collaborative action, the AAMC is an inaugural sponsor of the National Academy of Medicine’s Action Collaborative on Clinician Well-Being and Resilience. AAMC councils, organizations, and professional development groups are engaged in efforts to address the issue. These groups contribute to learning opportunities and resources sharing on clinician well-being and resilience at Learn Serve Lead: The AAMC Annual Meeting and at other AAMC-sponsored meetings. In addition, the AAMC has an online resource focused on resilience in academic medicine.

Our Commitment

The AAMC is committed to enhancing patient care and welfare, and to the belief that the optimal delivery of care requires an environment where all health care providers can thrive; where faculty, staff and learners feel supported and well treated, where diversity, inclusion and health equity are promoted; and where patients are empowered to make informed health care decisions.

The AAMC supports efforts by our member institutions to enhance clinician well-being and resilience, particularly in the following areas:

Clinician and learner mental health and well-being pathways. As clinicians may be reluctant to seek treatment due to stigma or licensing concerns, it is important to establish and refine prevention and treatment pathways for clinicians and learners to achieve their optimal mental health.

Improving health systems. Focus on health system factors such as organizational culture, information systems, shared decision-making, performance measurement, and other areas may reveal important avenues to enhance clinician and learner well-being and resilience.

Enhancing clinician teams. Effective team functions, which enable all providers to optimize performance of their respective roles, is essential to managing factors that cause burnout.
Promising Practices
for Promoting Faculty Engagement and Retention at U.S. Medical Schools
2017
Association of American Medical Colleges

Learn
Serve
Lead
Growing Our Leaders
Navigating Negotiations in Academic Medicine and Science

Leadership Week: Jan 29 - Feb 2, 2018
Washington, DC

www.aamc.org/members/leadership
Diversity and Inclusion – “Tone at the Top”
The most tragic proof that racial and ethnic injustice is alive and well is the phenomenon we politely call ‘health disparities.’

Dayna Bowen Matthew
Responding in an Era of Uncertainty
Articulating the Value of Academic Medicine and Biomedical Research
Public Policy Update
2017: Not A Typical Year in DC
Our Principles:

A health care system that provides high quality, cost effective care for all.

Medical science to prevent disease, alleviate suffering, and improve quality of life.

A well-trained, culturally competent, diverse health care workforce improving health for all.
Political Landscape: Republican White House, Hill Majority

2016

President Obama

House

186

Senate

46**

246

54

3*

2017

President Trump

House

194

Senate

48**

240

52

1*

But being in the majority does not always = being in control

*Vacancies  **VT. ME Senators = Indep., vote with Ds
## 2017: A Big Year for Big Issues

### Coverage:

- Multiple attempts to “repeal and replace” ACA failed

### Research:

- Sustainable, predictable NIH $ growth; rejection of F&A cuts

### Workforce:

- Titles VII & VIII; DACA, immigration EOs; GME cap bill
2017: Advocacy on Multiple Fronts

Over 40 AAMC press statements

AAMC Action
274,00 members;
59,000+ taken actions;
21,000+ actions just on ACA repeal/replace.

100+ op-eds
2017: Advocacy on Multiple Fronts

- WSJ ad advocates boost in NIH $
- 300+ orgs co-sign ad
- AAMC ad on ACA repeal
2017: Advocacy on Multiple Fronts – Personal Communications

- Phone calls
- Meetings at home and in DC
- Personal letters
- Emails
- Social media
2017: Next 2 Months = Home Stretch

- FY 2018 $ for NIH, Titles VII & VIII
- CHIP renewal, Medicaid DSH delay
- Insurance market stabilization
- Other extenders
- “Pay-fors”
- VA Choice bill
- 340B program
- Tax reform
2018: Likely Issues as of Now

- **FY 2019 budget**
  - President’s budget request
  - Appropriations bills
  - Congressional budget resolution

- **Higher Ed Act reauthorization**
  - PSLF and other student aid programs

- **ACA repeal & replace attempts again?**

- **Entitlement “reform?”**

- **Continued regulatory and EO activity**
2018: Election Year Politics Could Affect Hill Agenda

All 435 House seats up for election
- 241 Republican-held seats
- 194 Democratic-held seats

33 U.S. Senate seats up for election
- 23 Democratic + 2 Independent-held seats
- 8 Republican-held seats

36 Governorships up for election
- 26 Republican-held seats
- 9 Democratic-held seats + 1 Independent-held seat
2018: Every Year There’s a Host of Issues that Could Come Up

ACA + NIH + Medicare + Medicaid + Immigration + Physician payment + 340B + DACA + Medicaid safety net issues + VA research funding + MACRA + DSH payments + Quality measurement + DGME and IME + Value-based payment Research regulatory burden + Risk adjustment + Inpatient payment + Outpatient payment + Drug pricing + Titles VII, VIII funding + AHRQ funding + CMMI funding + PCORI funding + NHSC + J-1 visas and H-1B visas + VA contracting + FDA regulation + CDC response to public health crises + Narrow networks + Health inequities + Mental health coverage + LDTs + Fetal tissue research…
2018: “Expect the Unexpected”

“In unpredictable times, it is better to be prepared than to predict”
Thank You!