

Learn Serve Lead 2022: The AAMC Annual Meeting

Summary for CFAS Reps

An Intro to LSL

Learn Serve Lead: The AAMC Annual Meeting returned to an in-person format for the first time since 2019, drawing more than 4,000 academic medicine professionals to Nashville, Tennessee, from Nov. 10 – 15



Plenaries and Other Meeting Highlights

Opening Plenary: Resurrecting Civil Discourse: In Conversation With Robert George and Cornel West



Cornel West - Speaker

PhD

Dietrich Bonhoeffer Professor of Philosophy and Christian Practice, Union Theological Seminary
Professor Emeritus, Princeton University; Author and Activist



Robert George - Speaker

JD

Visiting Professor, Harvard Law School
Professor Jurisprudence, Princeton University



David J. Skorton - Facilitator

MD

President and CEO
AAMC

Resurrecting Civil Discourse: In Conversation With Robert George and Cornel West

- The opening plenary at LSL featured a conversation between Robert George and Cornel West. The two travel the country as a somewhat odd couple talking about how to revive the seemingly lost art of civil discourse
- They met as professors at Princeton and became fast friends despite significant differences in their backgrounds and worldviews.
- They bonded because they were “real” with each other. George told West, “Sincerity is my main credential.”



Resurrecting Civil Discourse: In Conversation With Robert George and Cornel West

A painfully divided America can return to civil discourse only if people on all sides of the civic divide:

- Make themselves vulnerable to being challenged on their convictions
- Adopt the humility that they might be wrong
- Respect the humanity of those who disagree with them

More advice on how to engage in civil discourse:

- Civil discourse is not simply listening to each other politely. It consists of talking and, above all, listening to another person with a different point of view in a truth-seeking spirit with a willingness to learn. To do that, you have to cultivate the capacity to be courageous enough to be vulnerable
- Only by making our convictions vulnerable to challenge and ourselves humble enough to realize we might be wrong can we have constructive, respectful conversations with those with whom we severely disagree. We have to have the courage to go into the future knowing we may change our minds

Resurrecting Civil Discourse: In Conversation With Robert George and Cornel West

More advice on how to engage in civil discourse:

- “Our convictions help to form our identities. That’s not bad in itself. Yet when we wrap our emotions too tightly around our convictions, we become dogmatists, ideologues. That happens on the right, that happens on the left, that happens across the political spectrum,” said George.
- Everyone has strong convictions but one of our convictions needs to be that we could be wrong. We know that great people, thoughtful people, intelligent people have been wrong about important issues
- “I begin with what it means to be a human being and what it means to love my crooked neighbor with my crooked heart. You’re trying to stay in contact with their humanity, all their contradictions and insecurities and incongruities. You’ve got contradictions and insecurities and incongruities, too,” said West
- When trying to have civil conversations with people who aren’t interested, start with finding common ground as people rather than starting the conversation with the issue that you disagree about

AAMC Leadership Plenary



David J. Skorton, MD

President & CEO
AAMC



Kirk Calhoun, MD

Chair, AAMC Board of Directors
President, The University of Texas at Tyler

AAMC Leadership Plenary

Presentation from AAMC Board of Directors Chair Kirk A. Calhoun, MD:

- How do we overcome the headwinds we encounter as educators, learners, scientists, physicians, and health leaders?
- You cannot be what you cannot see – Young people of color need to see physicians who look like them
- In the 1990s, the AAMC started trying to increase representation of Black people in medicine. The AAMC realized what was needed was earlier efforts to get communities of color involved in medicine
- A disastrous headwind came in the form of a series of court actions that had a chilling effect on what American medical schools felt they could do to address a lack of representation and maldistribution of physicians
- The “3,000 by 2,000” initiative fell short of its goal but wasn’t a failure because it sparked many pipeline programs



AAMC Leadership Plenary

Presentation from AAMC Board of Directors Chair Kirk A. Calhoun, MD:

- In spite of new headwinds, AAMC is still committed to creating a diverse, culturally competent workforce
- We should achieve our success while staying true to our values, being faithful to facts but respecting diverse views. Fostering our obligation to professionalism will help us succeed
- Academic medicine lies at the nexus of higher education and health care delivery. Both exist in very treacherous waters of rapidly changing expectations, misinformation, partisan debate, and economic pressure. We must never forget the immediate unmet needs of our patients and their families, our students, faculty, and community. This is how we remain steady against the headwinds

AAMC Leadership Plenary

Presentation from AAMC President and CEO David J. Skorton, MD:

- In the past three years, the country has dealt with a pandemic and racial reckonings long overdue, and academic medicine has risen to these challenges to make progress
- But today's status quo is still unacceptable. So many Americans have severe difficulties hearing and listening to each other and our health is not what it should be
- We need to face four issues with a sense of renewed urgency:
 1. Diversity, equity, inclusion, and anti racism: these are the most critical issues we face. Systemic racism is our responsibility to address whenever we have the opportunity because we have to as human beings. We need to leave the world better and more just than we found it. We need to optimize the cultures of our institutions so everyone feels included. We have to start with humility and listen to the disadvantaged groups. We cannot and must not accept candidate pools that are not diverse
 2. Wellbeing of our learners: Depression and suicide is more common for medical students compared to their age-matched peers. We must look to address problems around the curriculum and better support accessibility of behavioral health care for all who could benefit from it. Encourage students to push through any barriers to access mental health care. Come forward and share personal stories to encourage seeking help

AAMC Leadership Plenary

Presentation from AAMC President and CEO David J. Skorton, MD:

3. Ensuring all communities have equitable access to things needed to thrive, such as freedom from racism and discrimination, access to housing, good jobs, etc. We need to collaborate with communities to guide us toward solutions together. The relationship between physicians and patients must not be interrupted by judicial decisions or legislation. Nothing should interfere with clinicians acting on good clinical judgement in their care for pregnant women

4. Free speech. Some have concerns about the AAMC leaning too far to the left. We have to truly listen to other opinions we disagree with and not ban speakers who don't follow the current orthodoxy

Let's lead together in service of the public good

Why Climate Action Is the Future of Medicine and How Health Care Professionals Can Make a Difference



**Shaneeta Johnson -
Facilitator**
MD, MBA
Department Director,
Residency Program
Director, and Professor
Morehouse School of
Medicine



Renee N. Salas - Speaker
MD, MPH, MS
Harvard Global Health
Institute
Harvard Medical School
and Massachusetts
General Hospital



**Aaron Bernstein -
Facilitator**
MD, MPH
Interim Director, Pediatric
Hospitalist
Boston Children's Hospital

Why Climate Action Is the Future of Medicine and How Health Care Professionals Can Make a Difference

Facing the facts:

- As the burning of fossil fuels and the resulting acceleration of climate change make people more ill and complicate how to care for them, the medical field must confront the crisis more directly by integrating climate change factors into patient care and medical student education, reducing the carbon footprint of the health care industry, and advocating for public policies that protect the environment
- Climate change's impact on health can be seen in the effect of air pollution, rising temperatures, and increasingly severe weather events on human health, including more heat stroke, asthma, stress-based mental illness, preterm births, and premature deaths, and the increased spread of insect-borne disease



Why Climate Action Is the Future of Medicine and How Health Care Professionals Can Make a Difference

Finding the solutions:

- “As health care providers and physicians, we have the strongest argument about the climate change crisis we are facing. We are the game-changer in this,” said panelist Aaron Bernstein, MD, MPH, interim director of the Center for Climate, Health, and the Global Environment at Harvard T.H. Chan School of Public Health
- Hospitals and other health care facilities have been taking steps to reduce their carbon footprint but must do more. The strategies have included changing to alternate fuel sources, buying supplies from companies that have pledged to produce net-zero emissions through the creation and delivery of their products, and cutting down on the use of some supplies and increasing materials that can be recycled
- Climate conditions should inform such decisions as what medicines to prescribe and how to safely release a patient if they are returning to a home with extreme heat or poor air quality
- Climate change factors should also be integrated into medical school curricula. That can be as simple as inserting an instructional slide into a lesson plan or adding a climate-based learning module to class instruction

Facing the Truth that the South Defines America: A Conversation with Imani Perry



Imani Perry – Speaker

PhD, JD
Professor, African American Studies,
Princeton University
Author, “South to America: A
Journey Below the Mason Dixon to
Understand the Soul of a Nation”



Jon Meacham – Facilitator
Presidential Historian
Author, “The Soul of America”

Facing the Truth that the South Defines America: A Conversation with Imani Perry

When Imani Perry, JD, PhD, set out to write her book, *South to America: A Journey Below the Mason-Dixon to Understand the Soul of a Nation*, she felt the need to set the story straight on the region of the United States that was her home

- Throughout her life, Dr. Perry has had this feeling that there's an extraordinary mischaracterization of the South as somehow out-of-step and behind the rest of the country
- That perception is a way to make the South the scapegoat for the nation's sins or vulnerabilities, when in fact, a much better account is that the South is really where the country began, and the place where we are forced to confront in the most dramatic ways the tensions between the promises and the ideals of the nation and the reality of a history of cruelty and exploitation



Facing the Truth that the South Defines America: A Conversation with Imani Perry

Key lessons:

- Dr. Perry urged health care providers to resist the urge to stereotype and turn the South into the nation's scapegoat, reminding them that the region is home to one-third of the U.S. population and to most of the country's Black people, even after the Great Migration brought many to the North
- One of the great challenges for Americans in terms of developing a kind of political maturity is to begin to step away from mythologies and romantic stories of the nation and confront honestly how we became what we are, for better and worse
- The most important lesson is to listen carefully. "I know that so many physicians are under pressure to move quickly, to assess scientifically, but I think medicine is as much art as it is science. And art is dependent on attentiveness — pushing aside this shorthand set of assumptions, stereotypes, [and] judgments based upon the cadence of someone's voice, or their appearance. I think it's relevant for the practice of medicine to try to really be attentive to people at a human level," said Dr. Perry

AAMC Leadership Presentation to COD, COTH, and CFAS

Opening remarks from AAMC Board of Directors Chair Kirk A. Calhoun, MD

- After the Association of Academic Health Centers (AAHC) and its international component merged into the AAMC, Robert A. Barish, MD, MBA, vice chancellor for health affairs at the University of Illinois at Chicago and the chair of the Board of Directors of the AAHC, is now an at-large member of the AAMC's Board of Directors. The AAMC now has an international organization built into it
- 2023 AAMC Awards are now accepting nominations

2022 Distinguished Service Members:

- Peter Buckley, MD
- Scott Gitlin, MD (former CFAS chair and representative to CFAS from ASH)
- Paul Rothman, MD
- Richard Eckert, PhD (outgoing CFAS Administrative Board member and representative from University of Maryland and the AMGBD)

AAMC Leadership Presentation to COD, COTH, and CFAS

Presentation from AAMC President and CEO David J. Skorton, MD

- AAMC has welcomed two new chiefs: Danielle Turnipseed JD, MHSA, MPP, has been named AAMC Chief Public Policy Officer, and Jonathan Jaffery, MD, MS, MMM, FACP, has been named AAMC Chief Health Care Officer
- As part of the AAMC's strategic plan, the 10 Action Plans are now in the implementation phase
- The AAMC's mission statement was changed to say that the AAMC leads and serves academic medicine to put a greater emphasis on the AAMC's leadership role
- The AAMC has added community collaborations as part of the formerly tripartite mission of research, education, and patient care. True community collaborations requires that we learn from the community, not just tell them what they should know. The people who live with injustice are in a tremendous position to help solve that problem, so we take the wisdom of the community very seriously and have developed 10 Principles of Trustworthiness through our Center for Health Justice

AAMC Leadership Presentation to COD, COTH, and CFAS

Presentation from AAMC President and CEO David J. Skorton, MD

- So far, more than 100 institutions have signed up to participate in the AAMC's [Diversity, Inclusion, Culture, and Equity \(DICE\) Inventory](#)
- The AAMC, ACGME, and the American Association of Colleges of Osteopathic Medicine are developing foundational competencies for undergraduate medical education
- AAMC's efforts to promote vaccine confidence received 15 million radio broadcast impressions and 155 million digital impressions
- To increase diversity of applicants and matriculants, AAMC completed an in-depth needs assessment with learners from middle school through residency who identified as Black and American Indian or Alaskan Native to see what new tools and resources could improve the pipeline

AAMC Leadership Presentation to COD, COTH, and CFAS

Advocacy update from AAMC Senior Director of Government Relations Tannaz Rasouli:

- The NIH received its 7th consecutive multi-billion-dollar funding increase to \$15 billion, a 49% increase over the last 7 years
- There were extensions of some of the waivers that have allowed telehealth flexibilities
- Inflation Reduction Act was passed and was the scaled down version of the Build Back Better legislation. It included:
 - 3-year extension of the enhanced Affordable Care Act (ACA) premium tax credits
 - Some Medicare prescription drug pricing reforms
 - Tax incentives to support decarbonization
 - Unfortunately the 4,000 new Medicare-supported GME slots was not continued into the Inflation Reduction Act from the Build Back Better legislation, although there is still a lot of bipartisan momentum in that space
- Favorable student loan reforms have been promoted by the Biden administration
- There has also been some funding for mental and behavioral health programs and community violence programs and the first major legislation to include provisions to promote gun safety

AAMC Leadership Presentation to COD, COTH, and CFAS

Advocacy update from AAMC Senior Director of Government Relations Tannaz Rasouli:

- AAMC has filed or joined several amicus briefs on issues such as race conscious admissions and state abortion laws that AAMC believes are preempted by the Emergency Medical Treatment and Labor Act (EMTALA)
- Issues Congress may act on now that elections are over:
 - Momentum around GME hopefully will be included in year-end legislation
 - Bills or policies that aren't favorable such as legislation that regulates lab-developed tests
 - Funding the federal government – Congress is finalizing funding bills for NIH (\$2.5 billion increase being proposed in House, \$2 billion increase proposed in Senate)

AAMC Leadership Presentation to COD, COTH, and CFAS

Advocacy update from AAMC Senior Director of Government Relations Tannaz Rasouli:

- Issues Congress may act on now that elections are over:
 - Now that ARPA-H has a new director and is getting underway there may be activity coming out of Congress directing its work. House is proposing funding increase for ARPA-H separate from NIH's funding, but Senate is proposing to level fund ARPA-H for another year and keep it within NIH
 - Title 7 health workforce and diversity programs got a healthy increase in both chambers, although not as much as we were hoping for
 - Increased funding being proposed for the Centers for Disease Control and Prevention (CDC) and the Agency for Healthcare Research and Quality (AHRQ)
 - National Science Foundation (NSF) is getting a funding boost
 - The rate limiting step will be how much funding will actually be available overall for appropriators to work with as they make these final decisions

AAMC Leadership Presentation to COD, COTH, and CFAS

Advocacy update from AAMC Senior Director of Government Relations Tannaz Rasouli:

- The AAMC is working on the Viper Act, which would correct an issue with reinterpretation around conflict of interest related to salary support for Veterans Affairs (VA) researchers at private institutions
- AAMC is working with the Congressional Black Caucus to educate lawmakers on the need to invest in diversity in the health professions
- Spending bills are must-pass legislation so they may become vehicles for other policies, priorities, and provisions
- AAMC is working with congress to stop provider cuts that hospitals and physicians are facing by the end of the year in the form of 4% statutory pay-go cut

AAMC Leadership Presentation to COD, COTH, and CFAS

Advocacy update from AAMC Senior Director of Government Relations Tannaz Rasouli:

- AAMC is also urging lawmakers to avoid additional cuts providers are facing coming out of the Centers for Medicare and Medicaid Services (CMS)
- AAMC is trying to preserve the waivers that have been in place because of public health emergency and that have been helpful for institutions, including telehealth waivers
- There will probably be little legislative activity going into this next congress because of small majorities. This means there might be an increase in executive orders and “messaging” bills that are unlikely to pass but will try to create contrast between the two parties

AAMC Leadership Presentation to COD, COTH, and CFAS

Advocacy update from AAMC Senior Director of Government Relations Tannaz Rasouli:

- With Republican control of the House, there may be more of a focus on oversight of things such as NIH funding
- The AAMC continues to equip institutions with the information and tools to advocate for what they need. Institutions are incredibly powerful messages in their local communities to communicate the value of federal investment in the missions of academic medicine
- AAMC is rolling out a national ad campaign titled “Academic Medicine: what starts here saves lives”

New AAMC Board of Directors



LouAnn Woodward, MD
Chair
University of Mississippi
Medical Center



Lee Jones, MD
Chair-elect
Georgetown University



Kirk A. Calhoun, MD
Immediate Past Chair
The University of Texas at
Tyler



**Nita Ahuja,
MD, MBA**
Yale University
– CFAS Chair-
elect



**Robert A. Barish,
MD, MBA**
University of
Illinois Chicago



**Catherine L.
Coe, MD**
University of
North Carolina
– Junior faculty
member



**Henri R. Ford,
MD, MHA**
University of
Miami



**Julie A.
Freischlag, MD**
Atrium Health
Wake Forest
Baptist



**Martha E. (Meg)
Gaines, JD, LLM**
University of
Wisconsin



**Aviad "Adi"
Haramati, PhD**
Georgetown
University – CFAS
Chair



Jennifer Hayashi
Tulane University



**Danny Jacobs,
MD, MPH**
Oregon
Health &
Science
University



**Cara V.
James, PhD**
Grantmakers
In Health
(GIH)



**Charles P.
Mouton, MD,
MS, MBA**
The University
of Texas
Medical
Branch



**Dennis
Murphy,
MHA**
Indiana
University
Health



**Joan Y.
Reede, MD,
MPH**
Harvard
University



**Adam C.
Thompson-
Harvey, MD**
Medical
College of
Wisconsin



**Michael
Waldrum,
MD, MSc,
MBA**
ECU Health

AAMC Award Winners

2022 Robert J. Glaser Distinguished Teacher Award:

- Rachel Marie E. Salas, MD, sleep specialist and professor of neurology at the Johns Hopkins University School of Medicine
- Richard A. Hoppmann, MD, founder and past director of the Ultrasound Institute at the University of South Carolina School of Medicine Columbia
- Rajesh S. Mangrulkar, MD, director of the Michigan Center for Interprofessional Education at the University of Michigan (U-M) Medical School
- Kristina H. Petersen, PhD, assistant dean of academic support programs at New York Medical College (NYMC)

2022 Arnold P. Gold Foundation Humanism in Medicine Award:

- Maura George, MD, associate professor of medicine at Emory University School of Medicine

2022 Award for Distinguished Research in the Biomedical Sciences:

- Guillermina “Gigi” Lozano, PhD, professor and chair of the Department of Genetics at the University of Texas MD Anderson Cancer Center

2022 Herbert W. Nickens Award:

- Thomas A. LaVeist, PhD, dean and Weatherhead Presidential Chair in Health Equity at the School of Public Health and Tropical Medicine at Tulane University

2022 Spencer Foreman Award for Outstanding Community Engagement:

- The Ohio State University College of Medicine and Wexner Medical Center

2022 Excellence in Medical Education Award:

- Yvonne Steinert, PhD, professor in the Department of Family Medicine and Institute of Health Sciences Education at McGill Faculty of Medicine and Health Sciences in Canada

2022 Special Recognition Award:

- Lucinda L. Maine, PhD, RPh, executive vice president and CEO of the American Association of Colleges of Pharmacy
- Anthony “Tony” Mazzaschi, chief advocacy officer of the Association of Schools and Programs of Public Health
- Bonita “Bonnie” Stanton, MD (posthumous), founding dean of the Hackensack Meridian School of Medicine (Hackensack Meridian SOM) in New Jersey

2022 Robert Wood Johnson Foundation David E. Rogers Award:

- Flaura K. Winston, MD, PhD, distinguished chair in the Department of Pediatrics at Children’s Hospital of Philadelphia (CHOP) and a tenured professor of pediatrics at the Perelman School of Medicine at the University of Pennsylvania

**LEARN
SERVE
LEAD** ²⁰/₂₂

THE AAMC ANNUAL MEETING

CFAS Business Meeting Highlights

CFAS Reps by the Numbers

2022 CFAS MEMBER STATS

Society reps	110	Senior reps	162
School reps	205	Junior reps	153
		Chair or Vice Chairs	101 (24% women)
		CFAS Affiliates	42
		New Reps since spring 2021	44
<i>Total reps</i>	315 (54% women)		

Achievements and Activities in 2021-2022

CFAS Committees have continued to meet regularly and have produced several publications and reports or have launched new projects

- Focused on supporting ongoing connectivity with:
 - Monthly electronic ***CFAS Rep Bulletin***
 - Monthly online ***CFAS Connects*** live sessions, including multiple conversations with AAMC President and CEO David J. Skorton, MD
 - Annual ***CFAS Spring Meeting***
 - Biennial ***CFAS Society Summit*** for executives
- New junior faculty member, Catherine Coe, MD, seated on the AAMC Board of Directors
- Streamlining content on the CFAS website and revamping the Well-Being in Academic Medicine webpage <https://www.aamc.org/news-insights/wellbeing/faculty>

Achievements and Activities in 2021-2022

- CFAS Demographic Survey has been created and will be sent to all CFAS reps after this meeting to collect updated data on the council's diverse membership
- New CFAS webpage on the benefits of membership in CFAS:
<https://www.aamc.org/career-development/affinity-groups/cfas/membership-benefits>
- CFAS Ad Board held a retreat on Sept. 21 to chart the course of CFAS in the coming years and evaluate what has worked well so far and where CFAS could improve. A summary of the retreat is available on the CFAS Resources webpage at
<https://www.aamc.org/career-development/affinity-groups/cfas/resources>
- A significant number of breakout sessions during this meeting either originated from CFAS or were inspired by a familiar topic to CFAS

CFAS Video Project

CFAS is producing a video series that will feature interviews with current and former reps on the benefits of membership in CFAS for faculty members and academic societies. The first video has already been published:

<https://vimeo.com/764564257/8671beab42>

More videos will be filmed throughout next year

Learn more about CFAS at:
aamc.org/cfas

CFAS Connects

CFAS has continued to organize monthly **CFAS Connects** sessions, including:

- A Conversation with David Skorton, MD
- Keeping Women in Medicine: A Conversation about Retaining Talented Women Physicians
- Opportunities and Challenges in Building COVID-19 Vaccine Confidence: Seeking CFAS Feedback on an AAMC Strategic Planning Initiative
- Gender Parity – An Example of Aligning with the Mission of CFAS
- December Session – A presentation on the work of the CFAS Faculty Resilience Committee

The program, which has attracted between 50 – 75 reps per session, will continue through next year and be re-evaluated for its next “season.” All sessions are recorded and notes and summaries of sessions are available to reps on our website

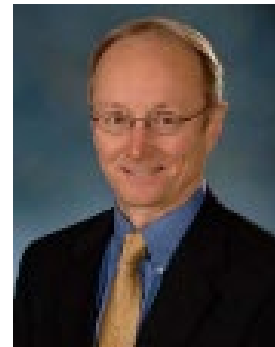
Nominating and Engagement Committee Update

CFAS Ad Board Members who rotated off in November 2022

Thank you!



Alan W. Dow, III, MD



Richard L. Eckert, PhD

Nominating and Engagement Committee Update

**New Ad Board members as of November 2022
Welcome!**



Valencia
Walker, MD



Lily Belfi,
MD

New CFAS Administrative Board



Aviad "Adi"
Haramati, PhD, Chair



Nita Ahuja, MD,
Chair-elect



Gabriela Popescu,
PhD, Immediate Past
Chair



Steven Angus,
MD



Valencia
Walker, MD



Arthur Derse, MD, JD



Shirley "Lee"
Eisner, PhD



Neil Osheroff,
PhD



Lily Belfi, MD



Stewart Babbott,
MD



Adam Franks,
MD



Monica Baskin,
PhD



Catherine Pipas,
MD



Deanna
Sasaki-Adams,
MD



Nicholas
Delamere, PhD



Lisa D. Cain
(Ex-Officio
GFA Chair)

CFAS Committees

Thematic Committees *are open to all CFAS reps and affiliates*

- **Advocacy Committee** - Arthur Derse, MD, JD, Chair
- **Biomedical Research and Education Committee (BREC)** - Rich Eckert, PhD, Chair
- **Communication Committee** - Alan Dow, MD, Chair
- **Diversity and Inclusion Committee** – Monica Baskin, PhD, Chair
- **Mission Alignment Committee** - Stewart Babbott, MD, Chair
- **Faculty Resilience Committee** – Catherine Pipas, MD, Chair

Structural Committees *open to appointed members*

- **Programming Committee** - Nita Ahuja, MD, Chair
- **Nominating Committee** - Gabriela Popescu, PhD, Chair

Details about all *CFAS Committees* here: www.aamc.org/cfas

LEARN
SERVE
LEAD²⁰²²

THE AAMC ANNUAL MEETING

CFAS Engagement at LSL

CFAS-Inspired Table Topics

On Saturday, November 12 from 11:45 AM-1:15 PM CST, there was a Table Topics Luncheon and several Table Topics this year were sponsored by CFAS reps

- The Earlier the Better: Benefits and Challenges of Incorporating Professional Competencies Into Pre-Clerkship Foundational Science Courses - Neil Osheroff, PhD
- Challenges Facing Clinical Educators - Lily Belfi, MD
- Understanding the Other Side: Creating Civil Dialogue Among Politically Diverse Groups to Find Common Values - Alex Bolt
- Issues in the Transition to Residency: ERAS[®] and the Supplemental Residency Application - Sidney Weissman, MD
- Harnessing the Impact of Clinician Educators for Promotion and Recognition: What Would a Clinician Educator Impact Factor Look Like? – Nandini (Dina) Calamur, MD

CFAS-Inspired Main Program Sessions

The Great Resignation in Health Care?

Session focused on ongoing concerns of a “great resignation.” Current data does not yet show a physician resignation, but rather exacerbation of ongoing physician shortages

Physicians’ shortages have been projected for many years and are expected to worsen significantly, especially in surgery and medical sub-specialties

Retention strategies were discussed including best practices related to compensation, work life balance, and minimizing administrative workload

As workforce issues will continue to worsen, all leaders and AAMC broadly should focus on retention of their workforce

Strategies on retention and promotion of women and other under-represented minorities discussed including on-site childcare benefits, hybrid work, and job sharing

CFAS-Inspired Main Program Sessions

Med Ed Strategies for Ensuring a Gender Affirming Learning Environment and Gender Inclusive Health Care

- A fast-growing number of medical students identify as LGBTQ and/or gender diverse
- LGBTQ content in medical school pre-clinical curriculum is expanding in some institutions, however, it's often not reinforced in the clinical learning environment where it needs to be applied
- There is a paucity of data on gender diverse student experience in the clinical learning environment
- Partnering with our learners through reciprocal mentorship is a successful model to develop and facilitate gender affirming curriculum and strategies for improving the clinical learning environment
- An inclusive learning environment contributes to graduating doctors with confidence and competence to care for LGBTQ+ patients and communities

CFAS-Inspired Main Program Sessions

Zoomed Out and Covid Fatigued: What to Keep and What to Change as We Move Forward, Post-Pandemic

- The past crisis and the continued uncertainty of the future will make it unlikely that our hybrid and Zoom worlds will ever go away completely, but live events are important as well
- There are pros and cons for both learners and faculty and some of them are not unique to Zoom but larger issues we had before, such as disengagement, too many meetings, content delivery, etc.
- Tips for improving your Zoom presentations are important and include: Avoid camera pitfalls, improve lighting, good clear sound, set up in advance, don't be your own distraction, prepare and rehearse, and MUTE YOURSELF

CFAS-Inspired Main Program Sessions

Equitable Competency Assessment: Implementing Recommendations of the UME-GME Review Committee

- There are many tensions between UME and GME that are heightened during the UME-GME transition for learners
- The Coalition for Physician Accountability's UGRC has outlined 34 recommendations across 9 themes to help move the UME-GME transition towards an ideal state
- Development of fair and equitable assessment methodologies that include a common framework is among those recommendations
- In complex ecosystems with multiple challenges or tensions, a systems-level approach, as through polarity thinking, can help us leverage the things that each side of the tension (UME and GME) do well to achieve better results for all

CFAS-Inspired Main Program Sessions

Leadership Education in Undergraduate Medical Education

- Leadership education should begin in the UME setting and should be grounded in leadership theory
- Longitudinal leadership curriculum allows introduction of concepts early in medical school with reinforcement and reflection as students progress into the clinical arena
- Leadership performance has been found to be independent of academic performance (as measured by MCAT/USMLE exams) and stable over GME training

CFAS-Inspired Main Program Sessions

Science, Credibility, and Strategies for Addressing Health Misinformation

- Vaccines could have prevented at least 318,000 Covid-19 deaths between January 2021 and April 2022
- Need credible, reliable sources
- Always give the basis as well as the interpretation
- Be consistent
- Address myths directly

CFAS-Inspired Main Program Sessions

Empowering Wellness by Implementing 10 "Well-being Champions" Recommendations

- The bad news is the Burnout Crisis continues to grow, the good news is that so do national recommendations and promising practices for leaders to advance organizational change
- The AAMC's Report, *The Rise of Wellness Initiatives in Health Care: Using National Survey Data to Support Effective Well-Being Champions and Wellness Programs* and its 10 recommendations can be utilized by institutions as a resource, a guide, and an assessment tool for promoting progress along the organizational wellbeing journey
- The process of transforming to a culture of wellbeing is complex and continuous. UVA, OHSU and Western University are examples of programs moving along with promising practices to share. We can all learn from each other - no matter how early or advanced we are in the process

CFAS-Inspired Main Program Sessions

A Transforming Landscape: What's Working & What's Changing in Academic Medicine Scholarly Publishing

- Preprints offer a channel for rapidly disseminating research that has not been peer reviewed, and depositing a preprint provides broad, unrestricted access to non-peer reviewed research and opens important opportunities for early scientific feedback
- Libraries are having a hard time funding open access publication while maintaining necessary subscriptions at a time when costs are rapidly increasing and library budgets remain flat
- Institutional leadership, faculty/researchers, and librarians should work together to determine their values so that libraries know how to best direct investments in purchase of articles and defraying costs of publishing
- Publishing is important for career advancement and article publication costs should not be a barrier to publication especially for junior and underrepresented faculty and trainees. Deans, chairs, and other leaders should make sure that high publication costs are not a barrier to success

CFAS-Inspired Main Program Sessions

Valuing Faculty in a Post-Pandemic World – Do Advancement Pathways Match the Needs?

- Faculty activities in the advancing the missions of education, research, and clinical delivery experienced significant challenges during the pandemic (Since March 2020) as faculty pivoted to continue to teach, discover, and care for patients in virtual and difficult environments
- Promotion in rank is one way – but not the only way – that institutions can demonstrate that faculty are valued and rewarded
- Promotion must be based on significant accomplishments in teaching, scholarship, and service, but the criteria need re-evaluation in terms of what constitutes impactful scholarship and institutional service
- The roles of department chairs and deans in nurturing and supporting faculty was highlighted, and leaders need to be held accountable for these aspects as part of their review

CFAS-Inspired Main Program Sessions

Linking Principal and Principle in Academic Health Centers: A Bridge How Far?

- With expanding academic health systems, growth of the clinical enterprise has emphasized the margin (principal) over the mission (principle) by increasing scale to maximize profits, deemphasizing the academic missions of education and research in many institutions
- In parallel to this organizational growth and emphasis, the governance structure in many institutions has evolved to move oversight of the clinical enterprise (including the traditional faculty practice) to the health system leadership and away from traditional academic leadership
- This increasingly leaves the Dean, Department Chairs, and Faculty Senate as the primary representatives of the academic mission and underscores their common role in promoting and advocating for support of education and research activities to the health system leadership, whose primary focus is the business of the clinical enterprise
- In order to preserve the value and vigor of faculty in the academic health system, Deans and Department Chairs must be involved in the initial conversations that give rise to academic health system mergers

Facilitating Effective Allyship: Creating Safe Spaces for Dialogue

- When in dialogue, it's important to assume the best intentions of people, listen genuinely to experience a different point of view, and be open to criticizing ideas, not individuals
- Faculty members of color, in addition to the usual workload, often have to learn how to manage all the very upsetting double standards, stereotypes, and microaggressions while also being mindful of coming across as “too angry” or “too threatening”
- White men and others who are not from underrepresented background must commit to becoming allies in their institutions and should get involved with identity-based groups such as:
 - National Medical Association
 - Society of Black Academic Surgeons
 - Latino Surgical Society
 - Society of Asian Academic Surgeons
- Some resources that can help people understand how to become better allies are the books *White Fragility*, *Overcoming Bias*, *How to Be An Anti Racist*, *We Were Eight Years in Power*, and the movie “13th”

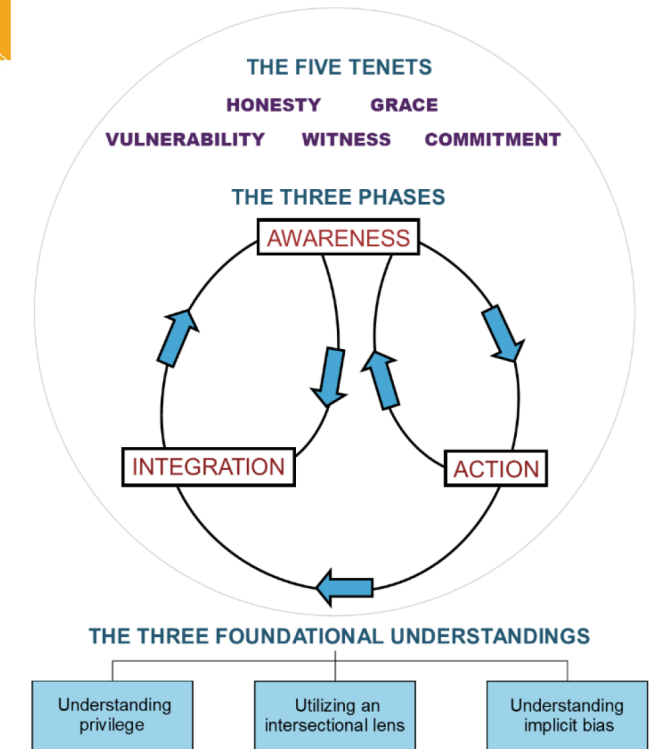


Self-Awareness: looks at how we engage with the world, ways we are perceived, and the ways in which those perceptions create a layer of privilege

Systemic Awareness: awareness that institutions privileges some people over others

Kyle Sawyer
Founder of Building Allies
<https://www.buildingallies.org/>

THE ACTIVE-ALLY MODEL



CFAS Knowledge Sharing Session

CFAS Knowledge Sharing Session

Reflecting on the meeting:

- There was broad recognition of CFAS' significant achievement of getting 11 sessions into the LSL program
- Being in person at a meeting again was a very meaningful experience for a lot of CFAS reps
- Faculty members are still going through the fallout of the last couple years and we need to keep providing safe space for conversations about peoples' experiences. Speaker selection for CFAS sessions was great and the speakers all seemed very authentic
- A 3- to 4-page mini program of future LSL meetings with all the events listed on paper would be helpful for older faculty members to have

CFAS Knowledge Sharing Session

Reflecting on the meeting:

- A lot of deans were panelists in CFAS sessions at this meeting. CFAS sessions were packed wall-to-wall and it was obvious there was a lot of interest
- There was discussion about the need for more guided table discussions during sessions at this meeting. If we want to do more of these guided table discussions, sessions may have to be closer to two hours
- There was a comment that a large-scale celebration of research seemed to be missing at LSL. This prompted discussion about how to integrate more of a focus on research into the meeting, but in the past, it's often been a challenge to draw many people into a research-focused session because of the diversity of meeting attendees and their interests. The challenge with scientific sessions is that they often get into the weeds
 - There's more opportunity to talk about how treatments moved from bench research to preclinical trials to clinical trials to patient care because those kinds of stories unite all of us working in academic medicine
 - To get better attendance at science focused sessions, we need to attract more scientists to LSL. Maybe there should be a basic science CFAS rep and a clinical CFAS rep from every institution

CFAS Knowledge Sharing Session

Looking forward to the future:

- The music was moving for a lot of people at this meeting and there was a desire to keep incorporating the humanities in future meetings. If CFAS can make its committee structure align with the major interests that were highlighted during the meeting, CFAS could potentially attract more people into its committees
- CFAS needs to continue to try to cultivate two-way communication with the AAMC's Council of Teaching Hospitals and Health Systems (COTH) because faculty members are their workforce and they need to hear about the realities of faculty members' lives and how they're caring for patients and driving the missions of academic medicine
 - In communicating with COTH, be mindful of how many issues are being brought to their attention, since CFAS represents 190,000 faculty members and can't inundate COTH with the full spectrum of issues represented in such a large population
 - CFAS needs to continue creating communication channels between the AAMC's Council of Deans (COD) in addition to COTH
- CFAS committee chairs were encouraged to identify the most important issues they want to focus on

CFAS Knowledge Sharing Session

The potential of CFAS...

- Faculty members are the AAMC's largest constituents, but to most faculty members, the AAMC isn't relevant and CFAS is trying to change that
- The diversity of ideas represented in the programming was appreciated and CFAS should keep trying to reach the 190,000 faculty members and bring different perspectives into the forum
- There was discussion on what the role of faculty members in academic medicine and the AAMC should be in supporting the pipelines for allied health workers such as nurses and social workers

CFAS Knowledge Sharing Session

A focus on chairs:

- CFAS should encourage more chairs to join to build on its representation of that group
- The workforce meeting at this meeting was really good and there was appreciation of a comment during that meeting that we shouldn't talk about "underrepresented minorities" but rather "historically/intentionally excluded" minorities. Those in leadership, such as chairs, need to take a more active role in reversing this underrepresentation and exclusion
- Two chairs in the room spoke about how valuable this meeting was for them and how much they learned. They also spoke about how much they could now offer their departments back at their home institutions because of this meeting
 - One of the chairs was a PhD and chair of basic science department and came to LSL skeptical of how much the meeting could offer her, but she found that many sessions actually had a lot to offer. There often feels like an unnecessary division between basic science and clinical sides of academic medicine but there are a lot of common interests and concerns and there's an opportunity for CFAS to offer more for basic scientists in meeting programming

CFAS Knowledge Sharing Session

Ideas and ways to improve:

- Conversations that started during CFAS sessions, such as how to facilitate effective allyship, need to be developed further in future meeting programming, since there is a lot of opportunity to advance the ideas and promote them to broader audiences
- It feels like CFAS is still disengaged from the larger AAMC with regard to DEI and other issues. It seems like CFAS needs to be more of a presence in some of the AAMC's cross-cutting work
- The model of research for faculty members has historically been to rely mostly on NIH grants, but that's no longer feasible and what institutions have to do now to pay for research is transfer money over from the health system. Is this model an appropriate one? Does this system need to be changed?

CFAS Knowledge Sharing Session

Ideas and ways to improve:

- There was a suggestion to create a demographic survey for new CFAS reps that will automatically tell them how and where they can get engaged based on the interests they enter into the form
- Institutions need to make clear whether scholarly activity is expected from their faculty. This question becomes especially important for academic health systems that have relationships with a lot of hospitals, making productivity more important and funding from state governments and other places scarcer

The CFAS Spring Meeting will be held March 26 – 29 and will continue many of the conversations that bubbled up during LSL. New CFAS reps are encouraged to contribute to the programming and make their voices heard

For More Info About CFAS

CFAS homepage:

<https://www.aamc.org/professional-development/affinity-groups/cfas>

CFAS Resources webpage:

<https://www.aamc.org/professional-development/affinity-groups/cfas/resources>

The AAMC CFAS Team



Eric Weissman, Senior Director, Society and Faculty Engagement
eweissman@aamc.org



Stephen Barry, CFAS Engagement Specialist
sbarry@aamc.org



Anne Berry, Lead Specialist, Implementation Research and Policy
aberry@aamc.org



Alex Bolt, CFAS Communications Specialist
abolt@aamc.org