CFAS Society Summit

Overview and Summary

June 3, 2019

AAMC
Washington, D.C.
Background

Academic society leaders and representatives gathered in Washington, D.C., in June for the first **CFAS Society Summit**, a daylong event that convened executives of AAMC-member societies with AAMC leaders to create and reinforce a stronger connection between the association and its member societies.

The summit provided society executives with a better understanding of the work of CFAS and the AAMC through detailed reports on AAMC advocacy and mission work, including updates from the following AAMC groups and initiatives:

- Scientific Affairs
- Health Care Affairs
- Medical Education
- Academic Affairs
- Diversity Policy and Programs
- The AAMC data and services teams
- CFAS volunteer leadership

The Society Summit provided opportunities throughout the day for society leaders to share details about their own efforts that align with, complement, or work in concert with the AAMC and CFAS.
Introduction to the AAMC and CFAS

AAMC staff provided an overview of the AAMC and the role of its Council of Faculty and Academic Societies (CFAS) plays in connecting society members and medical school faculty to a range of AAMC resources, products, and services.

Key points:
- CFAS is one of three governing councils of the AAMC
- Academic societies, along with medical schools and teaching hospitals, comprise AAMC membership
- The CFAS chair and chair-elect sit on the AAMC Board of Directors
- Through bi-directional communication, CFAS provides AAMC leadership with a critical view of the pressing issues facing a range of specialties and disciplines within academic medicine
Corporate Profile
The AAMC is a not-for-profit 501(c)(3) educational association whose purpose is to advance medical education.

Illinois corporation founded in 1876

Membership
- Medical Schools: 154 in US, 17 in Canada
- Teaching Hospitals: 422
- Academic Societies: 75

Major Services
- MCAT: Medical College Admissions Test
- AMCAS: American Medical College Application Service
- ERAS: Electronic Residency Application Service

Employment
- 669 Full-time employees
- Competitive benefits plans including 403(b) retirement plan

AAMC moved into 655 K Street on May 20, 2014

Fiscal year ends June 30
Our Strategy

Mission
The AAMC mission defines why we exist as an organization.

Areas of Impact
The AAMC works within and across medical education, care delivery, research, and diversity and inclusion to achieve impact with and for our members.

Impact Strategy
The AAMC has four strategic portfolios through which we prioritize our work and focus our attention.

Operational Strategy
To have impact and fulfill our mission, the AAMC must be a high-performing organization. We have four domains of focus for operational excellence.
“3 Organizations in 1”

We Are

Think Tank

Member Organization

Service Organization
Our Members

The members of the AAMC are institutions rather than individuals. They include:

Medical Schools
- 154 accredited U.S. medical schools
- 17 accredited Canadian medical schools

Teaching Hospitals
- 422 major teaching hospitals, including
- 98 affiliated health systems and
- 58 Veterans Affairs medical centers

Academic and Professional Societies
- 75 academic and professional societies
# How Our Constituents Engage

## Councils and Organizations

- Council of Deans
- Council of Teaching Hospitals and Health Systems
- Council of Faculty and Academic Societies
- Organization of Resident Representatives
- Organization of Student Representatives

## Professional Development Groups

- Chief Medical Officers Group
- Compliance Officers Forum
- Forum on Conflicts of Interest in Academe
- Government Relations Representatives
- Graduate Research, Education, and Training Group
- Group on Business Affairs
- Group on Diversity & Inclusion
- Group on Educational Affairs
- Group on Faculty Affairs
- Group on Faculty Practice
- Group on Information Resources
- Group on Institutional Advancement
- Group on Institutional Planning
- Group on Regional Medical Campuses
- Group on Research Advancement and Development
- Group on Resident Affairs
- Group on Student Affairs
- Group on Women in Medicine & Science
Overview of CFAS

• The Council of Faculty and Academic Societies (CFAS) represents U.S. medical school faculty and academic society member of the AAMC

• CFAS representatives number 350 from medical schools and academic societies

• CFAS is one of three AAMC councils that have direct representation on the AAMC's Board of Directors through our chair and chair-elect
What Does CFAS Do?

The Council of Faculty and Academic Societies provides a voice for academic faculty and specialty societies within the AAMC’s governance and leadership. The council is charged with:

- Identifying critical issues facing faculty and academic societies;
- Providing a voice about those issues to the AAMC as they relate to creation and implementation of the AAMC’s programs, services, and policies; and
- Serving as a bidirectional communications conduit regarding matters related to the core missions of academic medicine.
But What Does CFAS *Really* Do?

By convening faculty members of diverse backgrounds and expertise from across the country, CFAS taps into the brain trust of academic medicine to identify key issues and initiate processes and reforms that can, and often have, been taken back to improve institutions. CFAS also,

- Brings reps and societies together to join the AAMC’s influential voice on national advocacy issues
- Convenes committees to create reports and publications on critical topics in academic medicine
- Develops programming for AAMC events and meetings
- Develops our own annual spring meeting for CFAS reps
- Publishes and disseminates CFAS-led meeting sessions in *Academic Medicine* and elsewhere
- Has its reps invited to join national efforts, like the NAM Action Collaborative
- Creates a learning community for faculty nationwide where we share best practices and expertise
What Are the Big Issues?

Major advocacy priorities – GME and NIH funding, and others
Gender equity and harassment
Faculty identity and leadership
Faculty well-being and resilience (CFAS is an AAMC pioneer on this topic)
Clinical and basic science enterprise
Biomedical research advancement
The teaching and learning environment
Health equity and diversity
Faculty professional development and training
CFAS History and Goals

- CFAS transitioned from being the Council of Academic Societies (CAS) and reformed its governance to better represent a fuller set of issues and the diversity of faculty.
- Unique value of CFAS in convening representatives of different specialties and disciplines to discuss cross-cutting issues in academic medicine as a group.
- CFAS engages directly with AAMC’s Board of Directors, the AAMC’s advocacy team, and other AAMC mission areas.
- CFAS has been focused on improving how society reps can report back to their sponsoring organizations, providing tools and guidance to help them in that work.
- The AAMC wants to learn about societies’ issues, challenges, messaging, and accomplishments to add to its own messages about the value of academic medicine.
Advocacy Update and Collaborative Opportunities with Societies

AAMC’s advocacy issues:

- As a 501c3 organization, AAMC works on both sides of the aisles.
  - Surprise billing, drug pricing are bipartisan issues of great interest
  - Physician shortage is a popular issue in Congress and one that societies can jump on to advance mutually important issues around health care delivery.
- With every new presidential administration, AAMC sends a primer on its guiding principles to White House.
  - Among guiding principles: health insurance coverage for as many people as possible, diverse health care workforce.
- Some of biggest 2019 advocacy issues: lifting budget caps and increasing NIH funding
- AAMC-convened Ad Hoc Group for Medical Research includes many CFAS member society members.

Karen Fisher, JD, Chief Public Policy Officer, AAMC

Tannaz Rasouli, Senior Director, Government Relations, AAMC
Advocacy Update and Collaborative Opportunities with Societies

How AAMC and societies can work together:

• Societies are considered advocacy partners and their representatives hear everything AAMC has to say at its meetings about AAMC advocacy efforts.

• Societies could help with the push to reauthorize PCORI by joining sign on efforts and talking with Republican members they have relationships with and who would be supportive of reauthorization.

• AAMC and societies need to strategize on how to get “bottom up” information coming to AAMC from societies so everyone knows what pages we’re on with issues and where we have disagreements.

• AAMC can do more to make societies aware of its amicus briefs.
Advocacy Update and Collaborative Opportunities with Societies

- Some societies put out position papers, advocacy toolkits, other resources for physicians to use on issues that may not be in the AAMC’s wheelhouse, such as climate change.
- Societies bring in rich information that has been invaluable to the AAMC’s advocacy efforts.
- Societies who have relationship with influential members of Congress should notify the AAMC so the AAMC can engage them and encourage them to be champions for the causes of academic medicine.

Discussion:

- Attendees discussed whether the AAMC should address global education, research, and patient care issues as the world becomes more interconnected in those areas.
AAMC Mission Cluster Updates and Collaborative Opportunities

David Acosta, MD, Chief Diversity and Inclusion Officer, AAMC

Principles:

• AAMC diversity and inclusion efforts are seeking to enhance diversity and inclusion of all kinds at academic health centers, including cognitive diversity.
• AAMC is focusing on helping institutions integrate lived experiences into diversity and inclusion efforts and moving toward conscious inclusion. AAMC is also identifying exclusionary policies in institutions.

Initiatives:

• AAMC is a sponsor of the Societies Consortium on Sexual Harassment in STEMM, which is putting together advisory leadership group made of leaders of some societies.
• AAMC doing pilot program that trains people in restorative justice, also offering unconscious bias training, bystander training, and trying to train men how to become partners in acting against gender bias and harassment.
AAMC Mission Cluster Updates and Collaborative Opportunities

Request of AAMC:

• Best practices for bias and harassment intervention would be valuable in harmonizing all these diversity and inclusion efforts so each institution isn’t trying to reinvent the wheel.
AAMC Mission Cluster Updates and Collaborative Opportunities

John E. Prescott, MD, Chief Academic Officer, AAMC

- AAMC’s Academic Affairs cluster helps with medical school operations, member organizational development, student affairs, and anyone involved in the academic missions of an academic health center. It is also the organizational home of the AAMC’s Council of Deans (COD) and the LCME.

Offerings:
- Academic Affairs collects benchmarking data, measures how schools are doing in their missions, and recently completed a faculty salary equity project.
- Academic affairs manages Standardized Video Interview project, premed and application services like MSAR, holistic review efforts, and provides students with a lot of tools and resources including a medical school loan calculator.
AAMC Mission Cluster Updates and Collaborative Opportunities

Discussion:

- Administrators need policies that are dynamic, practical, and actionable so they can implement measures that protect reporters of harassment and inequity.
AAMC Mission Cluster Updates and Collaborative Opportunities

Ross McKinney Jr., MD, Chief Scientific Officer, AAMC

- CFAS resides within the AAMC’s Scientific Affairs cluster, so AAMC’s research arm gets regular feedback from CFAS.
- Scientific Affairs conducts focused communication and outreach around research issues through various newsletters, including the weekly *CFAS News* mailing.
- Scientific Affairs is strategizing ways to keep MDs in research given the heavy focus on RVUs.
- Scientific Affairs also addresses issues such as foreign influence in research, well-being, patent rules, and IP licensing.

Protecting time for research:
- AAMC is working with NIH and different working groups of institutional leaders who have been successful in finding ways to protect time for research.
- NIH is looking at K Awards and there’s a couple other emerging strategies that seem to be effective in protecting MD time for research. Scientific Affairs works with NIH on how grants should be balanced.
- Scientific Affairs supports two professional development groups for PhDs (GREAT and GRAND)
AAMC Mission Cluster Updates and Collaborative Opportunities

Alison J. Whelan, MD, Chief Medical Education Officer, AAMC

- The Medical Education cluster develops medical education products, resources, programs, and services that allows the AAMC to improve their institutional mission work in medical education.
- Academic medicine thrives when different stakeholders, such as the AAMC and member societies, find ways to collaborate or get the word out on best practices. Co-disseminating each other’s work is vital to the quality of medical education.

Opportunities for collaboration:
- The Medical Education cluster’s Group on Educational Affairs is the biggest of the AAMC’s affinity groups, providing great exposure to scholarship through meetings.
- MedEdPORTAL, now an indexed journal, is seeking contributors from across the medical education continuum. It would be a great outlet for medical education materials from CFAS-member societies.
Medical education activity at AAMC:

- Medical Education cluster offers high-quality certificate programs like Teaching for Quality.
- Developing broad-based white paper on emerging issues in core competencies across the continuum – important for UME curricular deans to know what the emerging issues are.
- Involved in NAM’s action collaborative on opioids; developing a paper on core role of arts and humanities in medical education; recently released quality improvement and patient safety competencies, and will soon release competencies around telehealth and health equity.

Suggestions for CFAS and the AAMC, with MedEd contributions:

- CFAS could represent interests of clerkship directors since they don’t have a group representing them broadly at the AAMC.
- CFAS could create projects that feature society expertise.
- When AAMC embarks on medical education projects, it could be more intentional about including society reps who could drive those projects.
Keith Horvath, MD, Senior Director, Clinical Transformation, AAMC

**Current and ongoing initiatives:**

- Health Care Affairs disseminates workforce projections, data on clinician burnout, and will disseminate a survey that examines how clinicians use artificial intelligence.
- Health Care Affairs is developing resources that help program director have crucial conversations and “manage up and down.”
- Health Care Affairs is working with CMMI on bundled payments and established an ACO round table to strategize on what data health systems need.
- Health Care Affairs put out a white paper on mergers and acquisitions that was very in-depth, also released a report on funds flow that has been very valuable to members.
- Health Care Affairs manages the Integrating Quality Forum, a multi-disciplinary, multi-specialty group.
AAMC Mission Cluster Updates and Collaborative Opportunities

Discussion:

• Societies are interested in getting data on telehealth usage.

• Discussion around artificial intelligence (AI) and how it will change medicine: “AI isn’t going replace doctors, but doctors who use AI will replace doctors who don’t.”

• Societies need to embrace and get out in front of AI.
AAMC Services and Data

Gabriel Campbell, MBA, LLM, Chief Services Officer, AAMC

- Manages MCAT, AMCAS, Visiting Servant Application System, ERAS, and Convey
- AAMC member societies can sign up for Convey and receive a 10% discount on their subscription
- More societies are joining Convey and institutions are also being onboarded
- AAMC is studying how to leverage ERAS to assist residency program directors navigate the high volume of applications they receive and help students make decisions
- AAMC is working with AMA and other organizations to develop a tool that helps students search through programs to see how they compare to other students in those programs
AAMC Services and Data

Hershel Alexander, PhD, Director, Data Operations and Services, AAMC

- AAMC collects a wealth of data about individuals and institutions and can analyze data about individuals as they move through the ranks of academic medicine, from MCAT registrant to dean, and everything in between.
- AAMC also tracks institutions through time, as well as their relationships to other institutions, to create a broad picture of academic medicine.
- AAMC’s StandPoint Surveys and the AAMC’s Analysis in Brief publication provide a lot of institutional data.
- Society representatives can request data they can’t find on AAMC.org: https://www.aamc.org/data/479586/requestaamcdata.html
AAMC Services and Data

- AAMC works with the AMA Master File to flesh out data it stores about individuals including data that show where a resident practices in her residency, where they practice after their residency, and the retention rate to see if residents stay where they initially practiced.

- The Faculty Roster tracks people throughout their careers as faculty members and has data going back to 1966.

- Faculty Salary reports are online and available to AAMC members for reduced subscription fee of $40.

- If requested, AAMC can provide data presented in custom ways.
Knowledge sharing, or open mic sessions, have become a stable of CFAS meetings, allowing open discussion on a range of issues.

Opportunities for collaboration:

- Societies should work with AAMC and academic health centers to advance professionalism of medical organizations where physicians are employed.
- AAMC and societies could collaborate and strategize on developing potential organizational competencies around professionalism.
- AAMC increasingly trying to find synergy and areas of collaboration between groups representing allied health professions such as pharmacists, dentists, etc. The primary focus is fleshing out what skills the different groups need to work together on.
- AAMC engages in discussions with stakeholders around issues of recertification and maintenance of certification, but does not have an official position on those issues.
Atul Grover, MD, called on attendees to survey their members and communicate their needs and interests back to the AAMC.

David Skorton, MD, will begin his new role as President and CEO of the AAMC on July 15.

Dr. Skorton and Dr. Grover welcome input and questions from society executives and reps on any and all topics.