



Medical Student Section Goals and Deliverables 2008-2009 Academic Year

Tier 1 MSS Goals and Deliverables

I. Better organize and facilitate the membership transition from the Medical Student Section to the Resident and Fellow Section

- A. Retention of members
- B. Retention of meeting-goers
- C. Tracking of graduates
 - 1. Determine how to use the MasterFile for this purpose
- D. Provide value to membership that starts even before signing up and continues seamlessly during the transition experience
 - 1. Affinity product development
 - 2. Community/cultural development
- E. Utilization of MSS Chapters as geographical organizational tools to aid the RFS in their retention and involvement efforts.

II. Improve the MSS Web Experience

- A. Immediate content improvements
 - 1. Demonstrate concept of MSS “Community of Hope” on our landing page
 - 2. Add personalized content from all MSS upper level leaders
 - 3. Add more pictorial and video content
 - 4. Flatten link structure to a maximum of three clicks for all MSS content
 - 5. Install a portal page as a second tier link from landing page
 - 6. Find old and broken pages and remove
 - 7. Highlight value-to-membership items on landing page
 - 8. Establish process for Regions and States to update their pages
- B. Develop coherent plan for Web site upgrade
 - 1. Solicit ideas for multi-tier interoperability from Region, State and Chapter levels
 - 2. Aggressively advocate for these improvements within the AMA management structure

III. Increase chapter involvement with State and County medical societies

- A. Funding
- B. Create mechanisms for Chapters to utilize existing State-level advocacy resources
- C. Staff relations/maintenance of institutional memory
- D. Recovery/reboot plan for chapters that have bad leadership years
- E. Partnerships for material resource use (physical space etc.)
- F. Partnerships for mentoring for future non-academic practitioners
- G. Partnerships for charitable fundraising and indigent care (i.e. free clinics)
- H. Local political education and facilitation of networking with local politicians

IV. Build chapter resources to a self-sustaining level

- A. Focus on Chapter as being primary source of immediate value to membership
 - 1. Examine strategies for enhancing this value/service
- B. Gather information on successful chapters':
 - 1. Fund raising strategies
 - 2. Recruitment strategies
 - 3. Effective partnerships
 - 4. Media and political contacts
 - 5. Service activities
 - 6. Internal structure
 - 7. Web site
- C. Compile this information into a best-practices database of both SOPs and strategic guidance points
- D. Set attainable benchmarks for chapter success and actively teach and mentor chapters until they meet them. Examples include:
 - 1. \$30k per annum per chapter fund-raising goal (initial numbers)
 - 2. 80% recruitment
 - 3. 20 student meeting attendance
 - 4. \$10k of charitable fundraising.
 - 5. 100 hours of community contact time (media, service, townhall, etc.)
 - 6. One letter + phone call to Congress per student member per year
- E. Focus resource development on advocacy mission
 - 1. Identify needs of Chapters required for them to increase advocacy efforts
 - 2. Develop benchmarks for measuring advocacy efforts
 - 3. Teach best practices and measure outcomes
 - 4. Chapter self-advocacy mission: Advocating for med students in the context of their academic environment
 - a. Identifying "malignant" med schools and student-friendly ones and listing them publicly
 - b. Compile a database of student grievances
- F. Increase peer-to-peer Chapter mentoring and collaboration
 - 1. Use CIC and/or MCD to identifying Chapters that have mutually beneficial resources/needs of skills

V. Develop and implement a national, unifying, charitable project for the uninsured

- A. Must be coordinated among all Chapters, nationwide
- B. Must occur at least in each major city
- C. Must provide a high degree of positive media visibility
- D. Must raise substantial money for local indigent care
- E. Must provide a good learning experience for Chapters to develop new fundraising tools
- F. Must establish at least 50 chapter buy in by December
- G. Must be promoted aggressively by Region leadership
- H. Should be promoted at Interim

- I. Should occur during CTUW
- J. Should involve RFS
- K. Should answer other AMA missions, e.g. wellness
- L. Should have very high level national AMA buy in
- M. Suggest a charitable 5K as meeting all these criteria and being a tested method by numerous chapters.

VI. Improve MSS media relations and create an effective PR machine

- A. Leverage our image of youth
- B. Utilize more media outlets: Web, local/alternative newspapers, radio, satellite radio
- C. Publicize our good service works
- D. Publicize our policy/advocacy achievements, e.g.: No Smoking on Planes; Realignment of the AMA Mission via Res. 613
- E. Make sure that we and our Chapters are addressing the public and not just “talking to ourselves” in our PR/media activities
- F. Increase availability of media training to med students

VII. Solidify MSS infrastructure for grassroots activism

- A. Regions to serve as “hubs”
- B. Mobilize the rank-and-file to be ready for aggressive advocacy when it is needed
 - 1. Use the present interest in politics and health system reform that centers on the presidential elections to capture and maintain student/resident interest
 - 2. Organize local events such as THMs and press briefings to keep the “troops” motivated and prepared
- C. CIC as central clearinghouse for calls to mobilization both top down and bottom up
- D. Devote substantial GC resources to furthering CIC’s mission
 - 1. CIC to be focus of TQM/CQI efforts with the stated goal of making its workproduct outstanding and exemplary to all levels of MSS organization
 - 2. “AMAZing!!”
- E. MCD to actively coach and mentor Chapters and ensure adequacy of resources and training to conduct grassroots activities (c.f. best practices database)

VIII. Increase student Political Action Committee (PAC) involvement

- A. Lobby Day for all States this year
- B. 25% Student Membership in AMPAC or State PAC
- C. 100% MSS Leadership AMPAC Membership at Capital Club or above
- D. This membership to be tied directly to the AMPAC student board member’s personal fundraising mission
- E. 100% MSS Committee Member and Chapter Officer AMPAC Membership at the base level
- F. Improve mission coordination and tasking for SAB
 - 1. Define deliverables and establish accountability as for committees

IX. Develop a core competency in medical education

- A. Establish the MSS and RFS as thought-leaders in Med Ed
- B. Establish and publicize our advocacy-for-students mission in the Med Ed environment
- C. Establish formalized programs for professional development within the med-school-to-residency combined curriculum (including finance and debt management resources)
- D. Establish MSS-RFS expertise as a trusted information resource for physician trainees (and premeds) and as SMEs for external organizations and other AMA organs
- E. Reflect this expertise in our Web presence
- F. Use membership benefit structure to reinforce the culture of the AMA MSS-RFS being the benevolent guide through the physician training experience

X. Make the AMA greener

- A. Immediate focus on MSS meetings
- B. Paperlessness
- C. Secondary focus on examining Chapter activities
- D. Possible environmental mission for local service activities as touches public health (stream and air monitoring, educational events, etc.)
- E. Lead the larger AMA by example and policy

XI. Integrate the MSS's community service and policy/advocacy efforts

- A. This goal is answered by many of the previous items
- B. Are there other specific deliverables that answer this goal?

XII. Focus on Global Health

- A. Re-energize the GHPC with well-defined deliverable work products and a heavy initial task loading
- B. Have a GHP themed meeting (probably in June)
- C. Aggressively publicize the GHP GRIP
 - 1. Identify more placement locations
- D. Draft resolutions to fill gaps in MSS and AMA GHP
- E. Develop issue briefs and other information resources to bring our corporate knowledge fund to a par with other student orgs
- F. Send MSS leaders to GHP Conference and be generally more visible in that community
- G. Establish collaborations with other student groups on global health projects and advocacy efforts

Tier 2 Goals and Deliverables

I. Better utilize past leaders to achieve goals

- A. Brainstrusts/Thinktanks
 - 1. Med Ed
 - 2. MRR/MCD
 - 3. Media/Web presence
- B. Formalize “Immediate Past” mentoring for all major posts
- C. All leaders trained to aggressively identify likely candidates to replace themselves and begin mentoring them early

II. Increase opportunities for medical student fellowships/internships

- A. GRIP and GRAF as possible models
- B. Produce some, market/broker others
- C. Disaster preparedness internship as another model
- D. Should provide valuable/marketable skill training outside of standard medical/research opportunities.
 - 1. Disaster preparedness
 - 2. Political consulting
 - 3. Lobbying
 - 4. Medico-legal
 - 5. Practice design/management
 - 6. Hospital administration
 - 7. Non-profit administration

III. Improve staff-member relations

- A. Seat members on staff working groups
- B. Improve formalized communications channels
- C. Better define roles, responsibilities, and authorities
- D. Break through the silo structure to engage in more lateral collaboration

IV. Improve external relations

- A. APSA
- B. NMAs
- C. AMSA
- D. Specialty Societies
 - 1. Place GRIPs with their offices, in lieu of Members of Congress

V. Increase chapter mentorship

- A. Peer-to-peer
- B. Hierarchical
- C. Utilize MCD and GC

VI. Continue to lead AMA policy

- A. Find the next big controversy and take it by the horns
- B. Push the Green Agenda
- C. Expand the visibility and scope of our discussion groups
- D. Educate students and develop MSS policy about “physician” issues
 - 1. Antitrust
 - 2. EMR/HIT
 - 3. Practice management and payment reform
 - 4. Physician workforce
- E. Increase collaboration with other AMA or specialty entities on policy issues

VII. Improve the organizational structure and functioning of the MSS

- A. Increase Region funding
 - 1. Chapter contributions
 - 2. State Society contributions
 - 3. Then go back and ask for matching funds from AMA
- B. Develop and implement Orientation Program for first time meeting attendees
 - 1. To include....?
- C. Campaign Rules Revision and encoding in IOPS
 - 1. Have COLRP revisit the One-per-State Rule
- D. Improve Meeting Planning
 - 1. Themes
 - 2. Less is more
 - 3. Raise funds from wealthy Chapter to have celebrity speakers
 - 4. Convention committee TQM/CQI and best practices development (PDCA/Deming cycle)
- E. Review Leadership Infrastructure
 - 1. Rewrite Committee guides and review committee structure and function at mid-year and year’s end
 - 2. Rewrite GC guide by self-defining our positions in a realistic manner
 - 3. Review, formalize and above all standardize briefing docs for all levels of leadership
 - a. Region Officers
 - b. Councilors/Liaisons
 - c. Committee Chairs
 - d. Chapter Presidents
 - e. Should be written by the officers in question and then polished by the GC/Staff
 - 4. Review IOPs and GC standing rules
 - a. Pass changes as IOPs
 - 5. Review HR policies and practices