

Call for Candidates for AMA Nomination for the American Board of Family Medicine, Inc.

The AMA is soliciting AMA member candidates for nomination by the AMA Board of Trustees to serve as an At-Large member of the Board of Directors of the American Board of Family Medicine, Inc. (ABFM).

TERM

The term of this position is 5 years, from April 2021 to April 2026. The ABFM will elect the new director at its ABFM Annual Board Meeting, and the newly elected director will take office immediately following adjournment of the meeting.

TIME REQUIREMENT

The ABFM Board of Directors holds three official meetings per year: a Winter Meeting in the beginning of each year; an Annual Meeting in the spring; and an Interim Meeting in the fall. Board members are appointed by the ABFM Chair to serve on specific committees. Meetings of these committees are conducted in conjunction with each Board meeting. Additional meetings will be called as needed, utilizing webinars and conference calls when possible.

CRITERIA FOR NOMINATIONS TO ABFM

ABFM Requirements

1. Candidate must be a family physician certified by the American Board of Family Medicine, Inc.
2. Directors must be certified by the ABFM for the duration of their term of office.
3. In addition to a track record of leadership and ability to work with a group, the ABFM welcomes candidates who are women, minorities underrepresented in medicine, early in career, or work within rural communities.
4. With respect to skills, the work of ABFM is multifaceted. To provide context to candidates, the ABFM has provided the attached executive summary of its strategic plan.

AMA Requirements

Each nominee recommended by the AMA must be a member of the AMA at the time of nomination. If appointed, he/she must maintain AMA member status throughout the term of appointment. AMA membership does not guarantee a position. Non-members may activate their membership online at www.ama-assn.org/go/join or call AMA Member Relations at 800.262.3211.

TO APPLY FOR NOMINATION

To apply for nomination, complete and email the following documents to Mary Grandau at mary.grandau@ama-assn.org. The documentation must be received no later than **Wednesday, December 16, 2020**.

1. Completed electronic **Application for AMA Nomination for External Leadership Position – ABFM** (MS Word document preferred). This document is included on the [AMA Medical Education Leadership Opportunities](#) Web page as part of the position posting.
2. Current **abbreviated curriculum vitae** [not to exceed three (3) pages].
3. Current **full curriculum vitae**.
4. **Statement** from the applicant (not to exceed 2 pages) addressing his/her interest in serving on the ABFM Board and his/her philosophy of family medicine.
5. *Optional*: Up to two letters of recommendation, addressed to the AMA.

Note that, if nominated, letters of recommendation may be included as part of the nominee materials sent to the requesting organization.

Please direct questions to:

Mary Grandau
Program Administrator
AMA Council on Medical Education
Ph: 312-464-4515
mary.grandau@ama-assn.org



American Board of Family Medicine

Strategic Plan 2019–2025



Health care is in the midst of dramatic transformation, with the amplitude and pace of change unlike any in the history of our specialty. The process is still in its beginning, as health system consolidation accelerates, more and more physicians become employed, advances in AI and genomics reshape care, and new business combinations such as CVS/Aetna and Amazon/Berkshire Hathaway try to claim their part of the health care market.



Against this backdrop of dramatic change and uncertainty, the American Board of Family Medicine anchored its recent strategic planning process on four core principles:

1. As family physicians, our most fundamental responsibility is to improve health and health care. This is an expression of the professionalism that is the foundation of our role as family physicians.
2. We are committed to the reform of American health care and improvement of health. No matter how we adapt to local challenges and opportunities, our long-term goal is constant: implementing the triple aim. We work to improve health, achieve better patient experience and reduce cost. We also believe that this goal cannot be accomplished without improving the wellbeing of all who deliver care.
3. Family physicians are essential for meaningful improvement in health and health care. Family physicians are the most widely distributed personal physicians and are leaders in developing the wrap-around systems critical to robust primary care. We are aware of challenges faced by personal physicians and those who try to improve population health, but we are optimistic that new technology and new organizational structures will provide great opportunities to support family physicians and improve the care they deliver.
4. In an age of bitter partisanship, long term progress will only be made with the development of common ground, across specialties, across professions and within communities and geographies. ABFM will pursue a course of engagement and collaboration.

We are dedicated to improving Family Medicine Certification by engaging our Diplomates and serving our specialty, the profession, and the public. As we realize the components of this strategic plan, we commit to being a learning organization that is focused on continuous evaluation and improvement to support a certificate that is valued and trusted by all stakeholders.

As you review our new Strategic Plan for ABFM: 2019–2025, I encourage you to find what you are most passionate about. And I ask you to engage—with your time, talent and collaborative spirit—with ABFM as we seek to strengthen the discipline of Family Medicine and improve the health of those who seek a trusting relationship with a personal physician for their care.

Sincerely,

Warren P. Newton, MD, MPH
President and CEO, ABFM



Mission

To serve the public and the profession through certification, research, educational standards and support for the improvement of health care.



Our goal is to help achieve better care, better patient experience and lower cost for all. To accomplish this goal:

- We certify family physicians who demonstrate professionalism, lifelong learning and self-assessment, cognitive expertise, and commitment to improving the care they provide.
- We engage, support, and partner with our Diplomates over their entire professional careers in the varied communities and capacities in which they serve.
- We collaborate with organizations, specialties and other partners who share our commitment to high standards and improvement in health and health care.
- We set rigorous standards for residency training and continuing professional development and support ongoing innovation in education.
- We conduct research that advances the science of certification, monitors how family physicians and their practices change over time, and advances the scientific basis of family medicine.
- We support development of future leaders for the specialty, the profession and health care.

Vision

Optimal health and health care for all people and communities family physicians serve.



GOAL 1: **ENHANCE** **CONTINUOUS** **CERTIFICATION**

Strategic Need:

As practice models change, as physician roles grow more complex, and as new technical means for measuring the quality of care and competence evolve, ABFM will adopt a dynamic, forward-looking approach for evaluating the knowledge, attitudes and skills essential for family physicians. Our goal is to adapt continuously the methods of continuous certification to improve the health of the public, to meet the needs of family physicians and their varied practices, and to anticipate the demands imposed by changes in patients' needs and in the health care environment.

ABFM will:

1. Prioritize continual improvement of the certification portfolio with regular input from Diplomates, our partners, and the public.
2. Implement and evaluate Family Medicine Certification Longitudinal Assessment with intention to spread to all Diplomates. We will explore development of further options for assessment of cognitive expertise.
3. Launch a major update of our Lifelong Learning and Self-Assessment portfolio including new KSAs, access to selected external products, and a journal article-based activity.
4. Update our quality improvement portfolio through review and revising our change packages and by enhancing the opportunity for Diplomates to select options that are most relevant and useful to their practice setting.
5. Explore the development of a limited number of additional certificates to support Diplomates' unique practice needs and focus.
6. Develop and begin to implement a "next generation" approach for the assessment of professionalism including more robust measures, better transparency, and identification of positive components of professionalism.
7. Continually monitor the effectiveness of the overall certification program and its individual components utilizing Diplomate engagement and feedback, data analytics and qualitative input from Board Members and staff.



GOAL 2: **SUPPORT DIPLOMATES AND THEIR PRACTICES ACROSS THEIR CAREERS**

Strategic Need:

The need for ABFM to work more collaboratively with Diplomates is critical to all other strategic initiatives. This requires fundamentally changing the nature of our relationship with Diplomates to one defined by partnership and support for lifelong professional development relevant to their practice and career while continuing to assess the competence necessary for all board-certified family physicians.

ABFM will:

1. Establish the role of an ABFM Ombudsperson for Diplomate experience.
2. Reorganize its communications strategy and operations. The value of board certification, as well as ABFM's unique contributions and programs, needs to be easily identified and universally known. We will ascertain the needs of key audiences and stakeholders and will use consistent and clear communication to create recognized value across stakeholders and the profession of medicine.
3. Implement a new website and Physician Portfolio. We will simplify our message, change our voice, and put more emphasis on engagement through social media and other communications channels.
4. Develop a virtual network of Diplomates who will provide ongoing input on current activities and future initiatives as we evolve certification.
5. Improve service provided by the ABFM Support Center through a comprehensive strategy aimed at providing greater responsiveness and a better experience for Diplomates.
6. Continue to monitor changes in family physicians, their practices, and the organization of care. We will develop close linkages between what we learn and what we communicate with Diplomates and other stakeholders who impact the future of the discipline.



GOAL 3:

SERVE FAMILY MEDICINE, THE PROFESSION AND PUBLIC

Strategic Need:

A fast changing, dynamic health care environment requires rapid and ongoing adaptation of the specialty in order to maintain relevance. This will require closer working relationships and better coordination with other family medicine organizations. ABFM will advance the specialty of family medicine, the profession of medicine, and the health of the public through leadership and broad-based collaboration within family medicine organizations and other relevant partners.

ABFM will:

1. Improve our working relationship with the AAFP and its state chapters through multi-level communication and partnership strategies with executive leadership, specific commissions and collaboration on projects designed to complement ABFM efforts to evolve certification activities. We will work with state chapters, the Robert Graham Center, and The Center for Health Equity and will support specific initiatives such as 25 x 2030.
2. Seek the involvement of family medicine academic organizations in our strategic initiatives. We will support selected collaborative projects that advance the discipline with each of these organizations through the ABFM Foundation.
3. Help the specialty act strategically in response to a rapidly changing environment. This will necessitate a new level of collaboration among the family medicine organizations to better identify and address emerging strategic issues, plan for broader impact, and sustain action over years.
4. Help ABMS develop into a stronger voice for transforming health care. We will support the ABMS governance change and implementation of the Vision Commission recommendations while pushing the profession to address the Quadruple Aim and championing the vital contribution of generalist physicians in improving the health of the public.
5. Engage new partners in helping to transform health care and health professions education. We will identify and prioritize new partners interested in working together to transform care and improve population health in a manner that optimizes the function of primary care and the role of family physicians.
6. Use data to drive dialogue among the family medicine organizations and across the ABMS Member Boards.
7. Help re-establish the social contract and the role of professional self-regulation. Through the Center for Professionalism & Value in Health Care, ABFM will partner with patients, employers, and the ABMS community to better understand the public's expectations for professionalism and how physician organizations and employers can meet those expectations.




GOAL 4: **LEVERAGE CHANGE IN MEDICAL EDUCATION**

Strategic Need:

The importance of ongoing and rapid evolution of the education of physicians throughout their careers is critical given the changes in health care. Working with traditional and new partners and building on our research of the ecology of family medicine, we will define standards for knowledge and scope of practice for achievement of clinical mastery by family physicians. In doing so, we will help drive innovation, evaluation, and evolution in education for physicians in residencies and across their careers.

ABFM will:

1. Ground its work in supporting the development of clinical mastery and comprehensive care across the lifetime of a family physician, from residency to retirement.
2. Support the maintenance and expansion of a broad scope of practice and comprehensive care. Family physicians will expand the populations they care for and lead care transformation in many ways. Working with partners, we will support competency and mastery in these areas among Diplomates by building these topics into ongoing certification activities.
3. Drive continued evolution of family medicine residency training. We will provide outcome data to support residency program improvement, influence changes in training requirements necessary to meet the health needs of the public, and support an increase in the numbers, quality, and distribution of Family Medicine residency programs.
4. Support the development of a more robust pipeline of US medical students interested in family medicine. Working with partners, we will focus on improving precepting quality and retention as well as support the 25 x 2030 Initiative and the importance of generalist physicians.
5. Continue to invest in the future leaders of the discipline through the Pisacano Scholars, the Puffer Fellows, and ABFM's Scholars program. With partners, we will explore ways to support the ascension of family physicians to leadership roles in health systems.
6. Use robust data resources and evolving access to external data options to support Diplomate efforts to improve care and to create feedback loops for training programs. We will pursue funding to support this research and partner with other specialties to maximize the potential.



GOAL 5: **INVEST IN DATA, RESEARCH AND TECHNOLOGY THAT WILL SUPPORT DIPLOMATES, CHART THE COURSE OF THE DISCIPLINE AND HELP THE PROFESSION IMPROVE THE HEALTH OF THE PUBLIC**

Strategic Need:

With the dramatic changes taking place in health care, new data and tools will transform the practice of Diplomates. ABFM's research will be necessary to anticipate, detect, and respond to new trends and will provide opportunities to improve the ABFM's operations and approach to assessment. We will invest in research and embrace new technology and artificial intelligence tools.

ABFM will:

1. Hire a new Senior Vice President for Research and Policy who will identify themes and priorities for the next phase of our research enterprise, develop new data resources and methods for outcomes studies, and develop a nationally distributed research network to answer questions that matter for the specialty, the profession, and the public. We will continue to build research relationships with key academic partners and agencies that extend our capacities and the value of our data platform.
2. Use the PRIME Registry as a platform for developing and advocating for Measures that Matter and for studying relationships between family medicine and meaningful outcomes. We will continue to develop partnerships with researchers and organizations with similar interests to transform the measures used to assess and pay for primary care.
3. Use the Population Health Assessment Engine (PHATE), underpinning research, and evolving relationships to improve clinic, community, and policy responses to social determinants of health.
4. Continue to invest in technology and expansion of data resources and capabilities in order to deliver and assess knowledge.
5. Continue to develop research collaborations aimed at defining what professionalism and value mean in 21st century medicine by enhancing the metrics and accountability of professionalism, realigning how clinicians are valued and paid, supporting the intrinsic values of providing care, and reducing the risk of burnout.
6. Support the development of research within the discipline of family medicine. We will continue to provide students, residents, fellows, and faculty hands-on research experience and policy exposure while providing appropriate access of our data to partners supportive of our overall agenda.



GOAL 6: **PROMOTE PROFESSIONALISM AND THE SOCIAL CONTRACT**

Strategic Need:

Commercial pressures, depersonalization through technology, commoditization of health care, and widening social inequities will erode the public's trust in health care. In an environment in which health care is increasingly seen as a business, and professionalism is called into question, our commitment to patients' needs, to the doctor-patient relationship, and to health equity needs to be a part of all we do. ABFM will promote professionalism and the social contract in all its activities, functions, and programs.

ABFM will:

1. Develop the Center for Professionalism & Value in Health Care with a goal of changing the public dialogue about the role of professionalism in health care. We will conduct research that will explore the meaning of professionalism for patients, employers, and the public through partnerships with them and all other interested parties.
2. Incorporate professionalism, the social contract, and health equity into all plans for evolving certification and communications.
3. Include health equity into its program of lifelong learning and quality improvement. We will support organizations and people developing innovative curricula in professionalism, the social contract, advocacy, health equity, and social drivers of health at all levels of education.
4. Develop new approaches to the assessment of professionalism that support greater transparency and robustness while simultaneously exploring the measurement of positive aspects of professionalism.
5. Support the development and evaluation of new approaches to teach professionalism, the social contract, and health equity.

Values

Strategic Action

In a complex and rapidly changing health care environment, we act strategically on behalf of the public to shape the future of health care. Our decisions will be open, evidence-based or informed, and we will be publicly accountable for them.

Collaboration

We work with Diplomates and all who share our commitment to improve health and health care.

Continuous Improvement

We are committed to ongoing quality improvement in all that we do. We regularly review the effectiveness of our programs and policies and work to improve our performance.

Learning as an Organization

We will learn from Diplomates, other specialties and professions and the public, and change what we do as the result of what we learn.

Equity

We will recognize the voice of the public, the plight of those most vulnerable, and the complex demands of the careers of Diplomates. We strive for justice and fairness in all that we do.

Diversity

In order to optimize the directions and decisions we make, we are committed to diversity in our organization and our specialty.

*Our core values will guide our actions and behaviors
for delivering on our mission and vision.*



*We will create an environment where people can use their passion
to reach the goals of our new strategic plan.*



**American Board
of Family Medicine**

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