



**American Academy  
of Family Physicians**

# *Linking Science, Education and Quality*

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Approved Recommendations of the Task Force on Linkages  
to Practice Improvement of the American Academy of Family Physicians

## *Vision Statement*

The American Academy of Family Physicians (AAFP) is committed to a New Model of practice that is founded on science and that supports education, changes physician practice behaviors and enhances the quality of care provided to patients.

## *Statements of Principles*

The AAFP is committed to a New Model of practice in which family physicians are continually measuring and improving their performance using evidence-based, patient-centered benchmarks.

Practice performance will be enhanced through educational interventions that change physician practice behaviors in ways that measurably improve patient outcomes.

Clinical practice guidelines and practice performance measures should be patient-centered, evidence-based, collaboratively developed and generally accepted throughout the health system.

The AAFP will encourage research that contributes to the development of clinical practice guidelines, facilitates physician practice behavior changes and effectively applies educational interventions to improve quality of care.

The AAFP is committed to creating and promoting educational interventions that have been shown to change physician practice behaviors. The AAFP will measure how such educational interventions change those behaviors.

The AAFP will develop continuing medical education (CME) that includes practice performance measures enabling family physicians to review their baseline data and progress toward integrating clinical practice guidelines into their practices.

The concept of practice performance enhancement should be taught throughout the lifelong learning continuum – from medical school through residency and into active practice.

The AAFP is committed to working toward the integration of science, education and quality improvement in medical education.

*Proposed  
Measurable  
Outcomes*

1. By 2006, the majority of CME clinical content produced by the AAFP will be based on best-available evidence.
2. By 2010, the majority of CME credits reported by members to the AAFP in each reelection cycle will reflect participation in practice-based quality improvement and/or point-of-care learning activities. (Practice-based quality improvement would include METRIC [Measuring, Evaluating and Translating Research Into Care], PEF [Practice Enhancement Forum], point-of-care, AAFP Home Study, and other activities as determined by the Commission on Continuing Professional Development.)
3. By 2007, the AAFP will pilot a clinical “tool” to facilitate use of an evidence-based clinical practice guideline and will examine how the guideline and tool are used.
4. By 2010, the AAFP will partner with practice-based research networks and clinical researchers to:
  - investigate and report on factors related to the successful diffusion of clinical practice guidelines into clinical practice, including physician knowledge and use of practice-enhancement tools, electronic health records (EHRs) and redesigned office systems;
  - identify methodologies to document that FPs provide quality clinical care founded on evidence-based clinical practice guidelines; and,
  - enhance research funding to support the examination of issues related to implementation of clinical practice guidelines in clinical practice.
5. The AAFP will work with other family medicine organizations so that by 2006, 90% of family medicine residencies will comply with the competency titled “Practice-Based Learning and Improvement” as measured by the Residency Review Committee on Family Medicine. *(Note: This process will be tied to implementation of the Future of Family Medicine report recommendations and to the AAFP strategic plan.)*
6. By 2007, the AAFP will develop and deploy the PEF in at least five states in cooperation with AAFP constituent chapters and other interested organizations. *(Note: This program’s business plan proposed working with five chapters, but was approved for two chapters.)*
7. The commissions involved in the Linkages Task Force (Commission on Science, Commission on Continuing Professional Development, Commission on Education, Commission on Practice Enhancement and Commission on Quality) should report on their progress toward these measurable goals and how they are working with each other and with other organizations to achieve them through their annual reports in 2005, 2007 and 2010.