

Resident and Student Representatives on AAFP Commissions

Resident and student members serve a one-year term on commissions, beginning January 1. Commissions meet once a year. Throughout the year, other commission work is accomplished electronically or through conference calls. The commissions will meet during these dates and at these locations:

Winter Cluster – Kansas City, MO
January 14 – 17, 2010

Resident and student applicants for AAFP commissions must submit their completed application forms and support materials to their chapters. In turn, the chapters will forward the applicant packets to the AAFP with letters of nomination.

Deadline: for Chapters to submit resident/student commission applications and support materials to AAFP is **August 28, 2009**. If you have any questions, please call Angela Wasson at 800-274-2237 Ext. 6740 or e-mail at awasson@aafp.org.

If you plan to apply for a commission appointment, contact your chapter immediately to confirm the deadline for submitting your materials to the chapter. Then complete the special intent-to-apply form in the application section and fax it to both the AAFP and your chapter.

Commission on Continuing Professional Development

- ❑ The scope of work of the commission includes CME accreditation, CME production, CME aspects of Maintenance of Certification - Family Medicine, lifelong (adult) learning, clinical application technology and point-of-care learning.
- ❑ The commission is composed of a chair, 16 active members, one resident member, one student member and one chapter executive.

Commission on Education

- ❑ The scope of work of the commission includes workforce, curriculum, work hours, student interest, educational awards and the planning of the National Conference of Family Medicine Residents and Medical Students.
- ❑ The commission is composed of a chair, 12 active members, three resident members (National Conference Resident Chair, two Resident Delegates), four student members (National Conference Student Chair, two Student Delegates, National FMIG Coordinator) and one chapter executive.

Commission on Governmental Advocacy

- ❑ The scope of work of the commission includes HCCFA/health system reform, state/federal legislation, public policy, governmental regulations and grassroots efforts.
- ❑ The commission is composed of a chair, 12 active members, one resident member, one student member and one chapter executive.

Commission on Health of the Public and Science

- ❑ The scope of work of the commission includes public health issues and policies, development, endorsement and review of clinical practice guidelines, clinical preventative services recommendations, including immunizations and genomics. Dissemination and implementation of knowledge to practice, health disparities, cultural proficiencies and rural health issues.
- ❑ The commission is composed of a chair, 18 active members, one resident member, one student member and one chapter executive.

Commission on Membership and Member Services

- ❑ The scope of work of the commission includes member recruitment, member retention, value of membership, member services, life-stage career issues, special needs, awards, international membership, urban/rural membership issues, fellowship, professional identity products and planning of the National Conference of Special Constituencies and Annual Leadership Forum.
- ❑ The commission is composed of a chair, 16 active members, two resident members (Resident Member of the Board of Directors and one appointed resident member), two student members (Student Member of the Board of Directors, and one appointed student member) and three chapter executives.

Commission on Quality and Practice

- ❑ The scope of work of the commission includes medical home activities, performance measurement, practice redesign/quality improvement, privileging, health information technology, practice management, private sector advocacy, physician payment.
- ❑ The commission is composed of a chair, 18 active members, one resident member, and one chapter executive.

Resident and student representatives on commissions are responsible for: (1) communicating the viewpoint of their constituencies; (2) submitting a brief written report to COE (immediately following a commission meeting) summarizing discussions and actions of the commission pertaining to resident/student issues; (3) stimulating interest in family medicine; (4) enlisting other resident and student members to run or apply for AAFP positions; and (5) presenting an annual report on commission activities to the resident and student congresses.

Beginning January 2008, all commission chairs were asked to identify an active member of their commission to serve as a commission mentor to incoming resident and student members. These mentors provide valuable information about the scope, projects and priorities of the commission.