



AFMRD Board of Directors Resident 2020 Annual Report

ASSOCIATION OF FAMILY MEDICINE RESIDENCY DIRECTORS (AFMRD) BOARD OF DIRECTORS – RESIDENT MEMBER

Michael P. Flynn, MD
UMass Worcester FMR
Worcester, MA
Class of 2021

Over the past year, I have had the pleasure of serving as the resident representative to the AFMRD Board of Directors. This organization serves to support program directors in their pursuit of excellence in family medicine residency training. The vision of our organization is to cultivate a robust community of residency directors engaged in excellence, mutual assistance, and innovation to meet the health care needs of the public. My role in this group is to serve as a resident voice and offer perspective on a range of issues pertinent to family medicine education and training. I was fortunate enough to be elected by the board to serve another year's term and look forward to the many exciting projects on which we are currently and will be working!

COVID-19 Pandemic Response

As with many other family medicine organizations, the AFMRD has been very active in terms of our response to the COVID-19 pandemic and have undertaken many initiatives to help residencies and program directors cope with the resulting changes it has caused. In particular, I would like to highlight the following accomplishments as part of our pandemic response:

- Partnered with STFM to provide the Residency Curriculum Resource to residency programs free for the months of April and May 2020 to help support remote didactics
- Developed a COVID-19 resource page within the Program Director Toolbox
- Collaborated with AAFP to host COVID-19-related webinars for program directors and coordinators
- Led the development of a joint family medicine statement related to the Coalition for Physician Accountability's recommendations related to COVID-19 impacts to the 2020-21 interview season (<https://students-residents.aamc.org/applying-residency/article/specialty-response-covid-19/>)

As a rising chief resident and someone very active in residency recruitment, I was particularly interested in providing input to the board about the last point. This input included how this will likely affect both the residency applicant and recruiting resident in the absence of in-person interview days and resident dinners that are not recommended this upcoming interview season. Applicants will be faced with ranking programs based on a virtual experience, and residents will have to adapt to the lack of in-person interactions that contribute so much to determining if an applicant will be a good fit. It will be a fascinating process to experience this fall and one that may have a significant impact, much like telehealth on patient care, on the way we approach residency recruitment going forward.

Scholarship Selection for the 2020 Family Medicine Advocacy Summit

The AFMRD provided scholarships for 12 residents, 3 AFMRD members, and 1 current NIPDD fellow to attend the 2019 AAFP Family Medicine Advocacy Summit and selected award recipients for the 2020 summit that was unfortunately postponed by the COVID-19 pandemic. Our purpose in providing

these scholarships is to open the door to advocacy in a supported way that can be shared by participants back in their home institutions. We had numerous submissions from qualified applicants all with an obvious passion for advocating on behalf of our specialty. I was fortunate enough to co-chair the selection committee with Dr. Wendy Barr and was so impressed by the level of advocacy already demonstrated by the applicants. Our hope is that this summit occurs in some format next year that allows these individuals and any additional recipients we may select to participate in a highly impactful activity. I look forward to being able to participate in this summit as well.

AFMRD Program Closure Task Force

The AFMRD drafted a Program Closure Resource Guide that includes tips and key considerations for programs threatened by closure or experiencing a closure. This guide also includes tips for developing ongoing activities related to demonstrating the value a FMRP brings to the system and to the community. The guide was made available to members during the first quarter of 2020. I was tasked to reach out to residents that experienced a program closure to get their advice for residents who may have to navigate this process in the future. I was able to speak with 2 residents from the Rose Family Medicine Residency that closed in Denver, CO, about this experience. Both were able to enter other local residencies and spoke about how connecting with local, statewide, and national organizations aided in this process. They also discussed securing funding to support onboarding elsewhere, transparency from residency leadership to its residents about potential or confirmed closure and having some choice in where you can go next despite the difficult transition.

ABFM Family Leave Policy

The ABFM Board of Directors approved a revised Family Leave Policy for trainees that will go into effect on July 1, 2020. The new policy was developed with the intention of providing similar family leave circumstances specified in the federal Family and Medical Family Leave Act, including birth and care of a newborn, adopted, or foster child, care of family member with a serious health condition or end of life care, and a resident's own serious health condition requiring prolonged evaluation and treatment. The AFMRD worked in conjunction with the ABFM to provide feedback on these guidelines with the needs of both residents and program directors in mind. It is interesting to note that family medicine has traditionally had more restrictive policies and culture around parental family leave. Previous policy limited residents to 1 month of leave per academic year for any reason, among the least amount of time cited across specialty boards' policies and described by residents as being the "least family friendly." I had my own experience with this policy when my second son was born in January 2020. I was thankfully able to arrange a parenting elective to allow me 4 weeks of time to help my wife and be with my sons, which was done to avoid any extension of my training. I expressed my gratitude to the board for being involved in the revision of this policy and would encourage residents to utilize it when the need comes to put the family in family medicine, especially when options such as parenting electives are not available. While I am appreciative of this policy including fathers and other non-birth parents, I am most appreciative of this policy focusing the recent female majority of medical school graduates and the added responsibilities of motherhood that I have witnessed at home and can imagine would be eased by female residents having more time with family prior to residency return.

This is just a small sample of the many projects, task forces, and initiatives with which the AFMRD has been involved over the past year. The experience of working with everyone involved with the AFMRD and the board has been one of the most rewarding of my personal and professional career, and I am absolutely thrilled to serve another term as their resident representative and continue to have a desire to be involved in residency and national leadership after residency. I have really come to appreciate just how much you can accomplish when you are paired with individuals who are fun to work with, and I am looking forward to many more opportunities for axe throwing, live band karaoke, cornhole, and whatever new endeavors we take on for the benefit of the AFMRD, family medicine, and our own enjoyment.

Note: This report was prepared by the resident or student representative(s) listed and includes their account(s) of the business conducted during their term. This is not an official record of business proceedings from the AAFP or

any other entity. To find out more about the business of the AAFP, its congresses, commissions, and current policies visit aafp.org.