

# FMIG Program of Excellence (PoE) Application

**OVERALL AWARD** 

# APPLICATIONS ARE DUE APRIL 1, AND CAN BE SUBMITTED ELECTRONICALLY VIA EMAIL TO

**POE@AAFP.ORG. YOU MUST USE THIS TEMPLATE FOR YOUR APPLICATION.** It is highly recommended that all writing and editing be completed in a shared document (like a Google Document) or in Word, especially if multiple people are contributing to or reviewing the application material. When ready to submit the application, transfer the information into this PDF. *Please fill in the following:* 

	Medical School Name: The Warren Alpert Medical School of Brown University		
2.	FMIG Name: AMS FMIG		
3.	Main Campus or    Regionally Separated (branch) campus		
	a: If regionally separated (branch) campus, name:		
4.	Number of students in your medical school: 590		
	a: If your campus is a regionally separated (branch) campus, number of students on your campus:		
5.	Number of active FMIG members: 63		
6.	Number of students serving in FMIG leadership positions: 7		
7.	Check all that apply:		
	☐ Our school does not have a department of family medicine.		
	☐ Our FMIG has minimal support from our state chapter.		
	☐ Our school has minimal faculty support (i.e. from Dean, Dept. Chair, etc.).		
8.	Has your FMIG applied for this award in the past: O YES   NO		
9.	Has your FMIG won this award in the past: O YES O NO		
Contact information:			
10.	10. Primary Student Leader Name: Dorothy Buening		
11.	Primary Student Leader Email Address: dorothy_buening@brown.edu		
12.	Primary Student Leader Phone:		
13.	FMIG Faculty Advisor Name(s): Dr. Andrea Arena		
	FMIG Faculty Advisor Email Address: andrea_arena@brown.edu		
15.	FMIG Faculty Advisor Phone:		
16	Institutional Mailing Address: 222 Richmond St, Providence, RI 02903		



CONTINUED

#### **FMIG OPERATION**

Please answer the following three questions to describe your FMIG's structure and approach to operation. These questions will help describe the environment and provide the background for the programming/initiatives/projects section of the application.

17. How is your FMIG structured? What roles do student leaders play?

Our chapter is led by a group of seven students who begin their terms as M1s in the spring and continue to lead the interest group through the fall of their M2 year. Each leadership cohort is selected by application at the end of the fall semester and serves for a year-long term. Within the leadership board, we work collaboratively to plan a schedule of activities during the spring and fall semesters. On average we host a minimum of five events per year — all of which are fully student-organized and run. Board members work individually or in pairs to plan and organize events based on their personal interests. We meet as a board on a monthly basis to plan upcoming, discuss future events, and support each other as any difficulties arise. When an event is approaching, the specific leaders of the event meet more frequently in order to be fully prepared for the event.

Though we all share the responsibilities of organizing events, specific members of our executive board have designated roles to ensure that the interest group is run smoothly and that we are able to host the events we have planned. One student leader is the treasurer, communicating with our school's Student Senate to apply and receive funding as well as monitoring our budget throughout the year. Another student leader functions as our secretary, taking minutes throughout our monthly meetings to make certain that we cover the agenda as well as document any details of our discussion that may be of importance later. Finally, we have a student leader who oversees the scheduling our events and meetings to prevent conflict with student classes, small groups, and exams or with our faculty advisor's clinic schedule. The remaining executive board members fill in the gaps and assist the student leaders with assigned roles.

## 18. Describe your FMIG's mission and goals.

The mission of Brown's Family Medicine Interest Group is to raise awareness of the different paths, practices, and possibilities of Family Medicine as well as the growing need for more Family Medicine (FM) practitioners.

As part of our mission we have four goals: educate students about the scope of FM, build connections between pre-clinical and clinical years for those interested in FM, develop student-provider relationships, and develop hands-on skills.

To educate students about the scope of FM, we host an annual Primary Care Week featuring a series of events, visual exhibits, and discussions. Events planned for Primary Care Week Fall 2020 include panels on serving underserved populations, Maternal-Child Health in FM, and models of primary care practices. Our intended outcome is to raise awareness about FM across the student body and highlight lesser known aspects of practice.

To build connections between pre-clinical and clinical years, we will host small group sessions as well as a post-match panel with M3/M4s to provide guidance to M1/M2s on this path. Our intended outcome is to create a sense of shared mission and community for those wishing to pursue FM.

To develop student-provider relationships, we will host small group dinners with students, residents and attendings, in more intimate settings, to discuss their medical aspirations. Our intended outcome is to link students with mentors and guidance should they choose to continue exploring this path.

To develop hands-on skills, we will co-host a reproductive skills workshop with other student groups. During the workshop, FM residents will take part in teaching skills on models including fruits and prosthetics, allowing students a window into the procedural aspects of FM and also a safe space to ask questions to residents.

## 19. Describe the role of your FMIG Faculty Advisor.

The role of our FMIG Faculty Advisor, Dr. Andrea Arena, is to serve as a liaison in terms of connections she believes will be viable and valuable for our chapter to pursue in onboarding physicians who share our mission and goals. Dr. Arena oversees all events and collaborates on the planning and execution of events that are planned months ahead. Dr. Arena is essentially a homebase to brainstorm event ideas, understand the logistics behind pursuing a career in FM, and guide our leadership team to accommodate the needs and demands of our student body related to learning about and pursuing FM.

# FMIG PROGRAMMING, INITIATIVES, AND PROJECTS

In this section of the application, please describe your FMIG programming. Each block of questions should reflect one program, initiative, or project. In total, you may submit eight programs, initiatives, or projects, meaning that you may fill out the block of questions up to eight times total to reflect up to eight individual programs, initiatives, or projects.

While there is an eight program/initiative/project maximum, there is NO MINIMUM. You are not required to fill out eight separate entries. Certain programs can be combined into one entry. For example, National Primary Care Week Celebration can be one programming entry, and you can describe the week's activities and how they fit into that initiative.

Questions during the application process can be directed to Marselle Bredemeyer at poe@aafp.org or (913) 906-6368.

- Title of FMIG event, project, or initiative: National Primary Care Week
- Date(s) and time(s) held: October 3-10, 2019
- Number of students/student work hours it took to organize: 7 students / 30 hours
- Number of students who participated:  $\overline{71}$
- Choose the categories that apply. Please choose all that apply, but be discerning with your selections. Chosen categories should strongly apply to your program/initiative/project.
  - Community service: This is something your FMIG does for the community.
  - Professional development: This is something your FMIG does to promote professional and/or leadership development among your members.
  - Exposure to family medicine and family physicians: This is something your FMIG does to expose its members to family physicians in your medical school or the community.
  - Promoting the value of family medicine as primary care: This is something your FMIG does to tell members about the role of family medicine in enhancing primary care. This could include the patient-centered medical home, primary care workforce, National Primary Care Week Activities, or other collaborations with primary care interest groups.
- Promoting the scope and diversity of family medicine: What your FMIG does to educate students and increase their understanding of and appreciation for the broad range of opportunities in family medicine.
- ☐ Current issues or innovations in family medicine.
- New event for this FMIG.
- ☐ Significant changes/improvement made on an existing FMIG program.
- Collaboration with another campus group.

  Please indicate which group (SNMA, another primary care interest group, etc.):

  Brown Agriculture, Nutrition, and Com
- Please describe the event, project, or initiative. Your answers should reflect the program, its goals and objectives, details about how the idea was generated, how the program was set up, collaboration or community participation, FMIG leader roles, FMIG Faculty Advisor roles, how family medicine was communicated through the initiative, program execution and student participation, and how your FMIG evaluated success of the program to plan for the future. If this was an existing program, what changes and improvements did your FMIG make this year? You will have a 750 word count limit for this section.

This past fall, the AMS FMIG held its first annual National Primary Care Week. Our primary goal was to educate students about the scope of FM. We kicked off the week of programming on Thursday, October 3 with a keynote address by Dr. Michael Fine, a FM physician, activist, and community organizer. Dr. Fine talked about his work launching the Neighborhood Health Station in his community, which integrates primary care with various social services, including connections with housing and educational officials, community outreach workers, and physical activity programs. He also discussed the importance of physician advocacy and how students could make a difference through primary care. Continuing on with the theme of student engagement, the following day, we hosted a small group breakfast discussion with M3 and M4 students who shared their experiences with FM thus far in their medical education and how M1 and M2s could explore the field throughout medical school.

The following Monday, we joined forces with Brown Agriculture, Nutrition, and Community Health (BrANCH) student group and resumed Primary Care Week with a morning of gardening at a local elementary school. BrANCH works with a local community garden and leads nutrition courses at local schools, emphasizing the importance of healthy and sustainable eating. This community service event was intended to emphasize how health is not solely limited to the provision of medical care—various individual and community factors, such as access to nutritious foods, influence health. In the evening, we held a panel on the different models of primary care, such as integrated behavioral health, direct primary care, micropractices, and pediatrics. We hoped that the panel would enlighten students to the wide range of possibilities that FM offers, and based on student feedback, the message was well-received!

The next day, we continued with the theme of promoting the scope of FM practice with a panel on Maternal Child Health in primary care. Students learned more about FM's scope of practice, how obstetrics and pediatrics can be integrated within FM, and how they could build a broad spectrum of practice and procedures into their future careers. This discussion was furthered in our last event: a lunchtime talk on medication abortion, which was co-sponsored by Medical Students for Choice. Our invited community physician shared how medication abortion could be incorporated into a primary care practice and illuminated the challenges to doing so.

Overall, we felt that our first annual National Primary Care Week was a success due to the high student turn out and with a lot of students returning for events throughout the week, and we plan to continue this programming in the future. Through an engaging series of events, visual exhibits, discussions, and panels, we were able to raise awareness about FM across the student body and highlight lesser known aspects of the field. We aim to continue our engagement with our peers, encouraging them to consider what FM can offer to patients as well as to themselves.

- Title of FMIG event, project, or initiative: Rural Health Panel
- Date(s) and time(s) held: May 10, 2019 11:30a-12:30p
- Number of students/student work hours it took to organize: 2 students / 8 hours
- Number of students who participated: 51
- Choose the categories that apply. Please choose all that apply, but be discerning with your selections. Chosen categories should strongly apply to your program/initiative/project.
- ☐ Community service: This is something your FMIG does for the community.
- ☐ Professional development: This is something your FMIG does to promote professional and/or leadership development among your members.
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group, etc.): \_\_\_

Other:\_

This past fall, AMS FMIG hosted two panelists, Dr. Alvord and Dr. Kazal, to fulfill a need and student interest that we felt our Health System Science course overlooked: practicing rural medicine. The panel served to help attendees understand the concept of rural medicine and the extent of rural disparities, address misconceptions about it being 'simple medicine', highlight the importance of interdisciplinary teams (PA, NP, SW, etc.), recognize how it relates to FM, and offer opportunities to engage with the field as students.

The FMIG leaders and our faculty advisor, Dr. Arena, emailed known medical providers who had experiences in rural medicine and a desire to share these experiences with our student body. The format was an hour-long discussion with prepared, open-ended questions that explored the purpose of rural medicine and how it relates to FM. After introductions, panelists shared their experiences and collaborated to refine and expand upon each other's responses. Before the panelists shared ideas on how to get involved and closing remarks, we gave the audience an opportunity to thank the panelists and ask any lingering questions.

They explained in depth how rural medicine is a practice that strives to to teach, serve, and advocate for people and communities, in a person-centered way, through innovative and exceptional service, particularly to rural, elderly, minority and underserved populations. Our panelists described their paths to practicing medicine on the Navajo Nation, a particularly underserved population. Sage Memorial Hospital, where Dr. Kazal was medical director, was the first Native-managed private comprehensive health care system in the country and has been managed since 1978 by an independent, entirely Navajo Board of Directors. We had them discuss the impact colonization continues to have on Navajo health, how one would build a sustainable and culturally competent rural health workforce, and how it feels to practice medicine in a remote community where your family members are also community members. Their responses intricately detailed what life in a rural setting actually looks like including the opportunities and the challenges, how the history of colonization and the associated traumas affects their patient population (especially given the problematic history of allopathic medicine itself), the need to recruit and retain rural physicians (both primary care and specialists, like surgeons), medical and professional opportunities that come with practicing in a rural setting, where each specialty fits into this system, and what it's personally like to practice healthcare in a remote setting while being attentive to all of the unique needs of their family members.

The FMIG leaders were responsible for promoting and coordinating the event. Emails were sent in advance and on the day of the event to interest group members through the listserv as well as the general student body through classwide emails. On the day of the event, FMIG leadership acquired food for guests, proctored the questions to the panel during the event, and set up/tore down the necessary equipment.

The panel was a success with over 45 participants recorded in attendance and participant engagement throughout the event. they amnteproctoring the questions to the panel during the event

group, etc.): OB/GYN Interest Group, Urology Interest

# PROGRAM/PROJECT/INITIATIVE 3

thing your FMIG does to tell members about the role of family medicine

in enhancing primary care. This could include the patient-centered medical home, primary care workforce, National Primary Care Week

Activities, or other collaborations with primary care interest groups.

- Title of FMIG event, project, or initiative: Reproductive Procedural Skills Workshop Date(s) and time(s) held: November 13, 2019 5:30p-7:30p Number of students/student work hours it took to organize: 2 FMIG leaders, 4 leaders from other groups / 15 hours Number of students who participated: 50 Choose the categories that apply. Please choose all that apply, but be discerning with your selections. Chosen categories should strongly apply to your program/initiative/project. ☐ Community service: This is something your FMIG does for the community. Promoting the scope and diversity of family medicine: What your FMIG does to educate students and increase their understanding of and ☐ Professional development: This is something your FMIG does to appreciation for the broad range of opportunities in family medicine. promote professional and/or leadership development among your members. ☐ Current issues or innovations in family medicine. ☐ New event for this FMIG. ☐ Exposure to family medicine and family physicians: This is something your FMIG does to expose its members to family physicians in your ☐ Significant changes/improvement made on an existing FMIG program. medical school or the community. Collaboration with another campus group. ☐ Promoting the value of family medicine as primary care: This is some-Please indicate which group (SNMA, another primary care interest
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Other:

In order to expose preclinical students to some of the procedural aspects of FM, we partnered with three student groups to organize and co-host a reproductive skills workshop held at the medical school for first and second year medical students. The program was conducted as rotating stations in 5 different rooms led by FM, OB/GYN, and Urology residents teaching various procedural skills on models and fruits. Stations included standard gynecologic and genitourinary examinations, no scalpel vasectomy, endometrial biopsy, manual vacuum aspiration, and IUD insertion.

When reviewing the 2018 workshop and planning the event for the fall of 2019, it was important to us to highlight the role that FM physicians play in incorporating their patients' reproductive health as part of their overall health in addition to the reproductive procedures FM physicians perform. To do this, we aimed to have FM represented at multiple stations, particularly at the stations beyond the standard examinations. Throughout collaboration with the co-leaders of the event, FMIG leaders were a driving force behind having residents from a mix of specialties at each station when appropriate.

With FM residents positioned at multiple stations teaching side-by-side with residents of the other two specialties, medical students were able to see FM represented in a teaching role of these skills, emphasizing a procedural aspect of primary care. Because the event was hosted at the medical school, it created a laid back environment allowing medical students to ask FM residents questions about their overall training and in particular their procedural training. This secondary goal of networking also provided students with the opportunity to set up shadowing with FM residents.

The FMIG leaders co-coordinating the event on behalf of our FMIG were responsible for obtaining and setting up the necessary equipment, ensuring FM residents were contacted and present for the workshop, and proctoring the timing and rotation of the stations during the event. In addition, FMIG leaders were responsible for promoting the event to the active FMIG members. Dr. Arena, our faculty advisor, primarily functioned as a liaison between the FMIG leaders and the FM residents.

The workshop was successfully filled within the first week of promoting the event. Many of our FMIG members and members of the OB/GYN Interest Group, Urology Interest Group, Medical Students for Choice as well as students not part of any of these groups were in attendance. We were excited by the diversity of attendees because we had the opportunity to expose them to FM in a new lens, providing a window into the procedural aspects of FM.

in enhancing primary care. This could include the patient-centered medical home, primary care workforce, National Primary Care Week

Activities, or other collaborations with primary care interest groups.

- Title of FMIG event, project, or initiative: Post-Match Day Panel • Date(s) and time(s) held: April 20, 2020 5p-6p Number of students/student work hours it took to organize:  $\underline{1}$  student / 4 hours Number of students who participated: 45 Choose the categories that apply. Please choose all that apply, but be discerning with your selections. Chosen categories should strongly apply to your program/initiative/project. ☐ Community service: This is something your FMIG does for the community. Promoting the scope and diversity of family medicine: What your FMIG does to educate students and increase their understanding of and Professional development: This is something your FMIG does to appreciation for the broad range of opportunities in family medicine. promote professional and/or leadership development among your members. ☐ Current issues or innovations in family medicine. Exposure to family medicine and family physicians: This is something ■ New event for this FMIG. your FMIG does to expose its members to family physicians in your ☐ Significant changes/improvement made on an existing FMIG program. medical school or the community. ☐ Collaboration with another campus group. ☐ Promoting the value of family medicine as primary care: This is some-Please indicate which group (SNMA, another primary care interest thing your FMIG does to tell members about the role of family medicine
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group, etc.): \_\_\_

Other:

With the anxiety that surrounds Match Day and the residency application process, the FMIG leaders found it necessary to host a panel with M4s who matched into some of the most renowned FM residencies this academic year. Panelists matched into programs such as UCSF, University of Pennsylvania, University of Vermont, Kaiser Permanente—Woodlands Hill, and Sutter Medical Center of Santa Rosa. The planning that went into this event included reaching out to M4s who matched into FM residencies, figuring out a time that worked for all panelists, and executing a virtual event in light of COVID-19 restrictions.

We began the event with introductions: panelists introduced themselves with their names, where they applied, and where they will be completing their residency. After introductions, we then asked pre-formed questions that touched on the thought process that was involved in ultimately choosing a career in FM and the actual process of applying to the various FM residency programs. We also allocated time for students to ask any questions at the end of the panel through the chat feature in Zoom. There was an incredible amount of student participation, and students found the time spent in the virtual panel very rewarding and stress-alleviating.

Our goal for hosting this panel was to address some of the underlying stress students face when applying to residency programs and making the ultimate decision to choose FM. We found this panel extremely helpful in providing insight into the process and tips for future success for attendees interested in pursuing a career in FM. In addition, our panel helped form lasting professional relationships, as many of the panelists made themselves available outside of the event to answer any questions students may have about the application process, certain residency programs, and experiences that they can pursue to develop connections with FM practitioners.

medical home, primary care workforce, National Primary Care Week

Activities, or other collaborations with primary care interest groups.

Title of FMIG event, project, or initiative: Sustainable Menstrual Health Workshop Date(s) and time(s) held: May 15, 2019 5p-6p Number of students/student work hours it took to organize: 5 students / 8 hours Number of students who participated: 20 Choose the categories that apply. Please choose all that apply, but be discerning with your selections. Chosen categories should strongly apply to your program/initiative/project. ☐ Community service: This is something your FMIG does for the community. ☐ Promoting the scope and diversity of family medicine: What your FMIG does to educate students and increase their understanding of and ☐ Professional development: This is something your FMIG does to appreciation for the broad range of opportunities in family medicine. promote professional and/or leadership development among your members. ☐ Current issues or innovations in family medicine. Exposure to family medicine and family physicians: This is something New event for this FMIG. your FMIG does to expose its members to family physicians in your ☐ Significant changes/improvement made on an existing FMIG program. medical school or the community. Collaboration with another campus group. ☐ Promoting the value of family medicine as primary care: This is some-Please indicate which group (SNMA, another primary care interest thing your FMIG does to tell members about the role of family medicine group, etc.): AMS Environmental Coalition (ECo) in enhancing primary care. This could include the patient-centered

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Other:

This event held last spring, the first of its kind, was a collaboration with the newly formed AMS Environmental Coalition (ECo) as a way to educate medical students on environmentally sustainable alternatives to menstrual pads and tampons. The event consisted of a 15-minute educational PowerPoint presentation prepared and given by student leaders from both interest groups. The PowerPoint had information about the beneficial impacts of switching to more environmentally friendly alternative period products, ones that are reusable, use less packaging, etc.

This was followed by a 20-minute panel discussion allowing for peer-to-peer conversation about using alternative menstrual products, such as menstrual cups, applicator-free tampons, and period underwear. After the panel during which attendees asked fellow students about their experiences with alternative period products, they were given the chance to have a Q&A with a FM physician at Brown, Dr. Gillian Morris. This portion of the event focused on demystifying products such as menstrual cups and bringing about a discussion on how to talk to patients about menstruation and choices for period products. Having a FM physician at the event allowed students to learn about how women's health intersects with FM. It also allowed students to have their medical questions about alternative menstrual products answered so they would feel more comfortable speaking to future patients about menstruation and sustainability.

in enhancing primary care. This could include the patient-centered medical home, primary care workforce, National Primary Care Week

Activities, or other collaborations with primary care interest groups.

- Title of FMIG event, project, or initiative: FM Networking Dinner • Date(s) and time(s) held: May 17, 2019 6p-7:30p Number of students/student work hours it took to organize:  $\frac{3 \ students}{/ 6 \ hours}$ Number of students who participated: 20 Choose the categories that apply. Please choose all that apply, but be discerning with your selections. Chosen categories should strongly apply to your program/initiative/project. ☐ Community service: This is something your FMIG does for the community. Promoting the scope and diversity of family medicine: What your FMIG does to educate students and increase their understanding of and ☐ Professional development: This is something your FMIG does to appreciation for the broad range of opportunities in family medicine. promote professional and/or leadership development among your members. ☐ Current issues or innovations in family medicine. Exposure to family medicine and family physicians: This is something ■ New event for this FMIG. your FMIG does to expose its members to family physicians in your ☐ Significant changes/improvement made on an existing FMIG program. medical school or the community. ☐ Collaboration with another campus group. ☐ Promoting the value of family medicine as primary care: This is some-Please indicate which group (SNMA, another primary care interest thing your FMIG does to tell members about the role of family medicine
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group, etc.): \_\_\_

Other:

Last spring, AMS FMIG hosted a networking dinner to connect students interested in pursuing FM with active FM physicians in our community. The event was capped at 20 students to promote deeper conversations between physicians and students. The event was graciously hosted at our faculty advisor's home as it was important to us to have a relaxed environment to facilitate more natural conversations and to diminish the inherent hierarchy that exists between medical students and physicians.

Our faculty advisor provided us with the names and contact information of her colleagues who she thought could provide valuable mentorship to students as well as be available outside of the event for future shadowing or conversations. FMIG leaders promoted the event to our members through the listserv, reached out to the FM physicians recommended by our faculty advisor, and organized food pick-up and clean-up.

FM physicians chosen for the event represented a variety of paths one can take within the field of FM. Physicians focuses included medical education, LGBTQ+ health, and underserved medicine among other interests. Student attendees were chosen on a first come-first serve basis in response to the event notification and RSVP email sent out by the FMIG leadership. There were lively discussions throughout the events covering topics such as how FM physicians' found their niches within the vast specialty, what FM opportunities are available as medical students, and business cards were passed out for shadowing in the near future. With the full student attendance and the program lasting longer than the scheduled time due to engaging conversations, it was clear to us that we met our goal of promoting student meaningful connections with FM physicians in our community.

# FMIG Program of Excellence (PoE) Application, page 10

#### PROGRAM/PROJECT/INITIATIVE 7 • Title of FMIG event, project, or initiative: \_\_\_ Date(s) and time(s) held: Number of students/student work hours it took to organize: Number of students who participated: Choose the categories that apply. Please choose all that apply, but be discerning with your selections. Chosen categories should strongly apply to your program/initiative/project. ☐ Community service: This is something your FMIG does for the community. ☐ Promoting the scope and diversity of family medicine: What your FMIG does to educate students and increase their understanding of and ☐ Professional development: This is something your FMIG does to appreciation for the broad range of opportunities in family medicine. promote professional and/or leadership development among your members. ☐ Current issues or innovations in family medicine. ☐ Exposure to family medicine and family physicians: This is something ■ New event for this FMIG. your FMIG does to expose its members to family physicians in your ☐ Significant changes/improvement made on an existing FMIG program. medical school or the community. ☐ Collaboration with another campus group. ☐ Promoting the value of family medicine as primary care: This is some-Please indicate which group (SNMA, another primary care interest

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group, etc.): \_\_\_\_\_

Other:\_\_\_

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# FMIG Program of Excellence (PoE) Application, page 11

PROGRAM/PROJECT/INITIATIVE 8		
Title of FMIG event, project, or initiative:		
Date(s) and time(s) held:		
Number of students/student work hours it took to organize:		
Number of students who participated:		
Choose the categories that apply. Please choose all that apply, but be discerning with your selections. Chosen categories should strongly apply to your program/initiative/project.		
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Exposure to family medicine and family physicians: This is something your FMIG does to expose its members to family physicians in your medical school or the community.	<ul> <li>□ New event for this FMIG.</li> <li>□ Significant changes/improvement made on an existing FMIG program.</li> </ul>	
☐ Promoting the value of family medicine as primary care: This is something your FMIG does to tell members about the role of family medicine in enhancing primary care. This could include the patient-centered	☐ Collaboration with another campus group.  Please indicate which group (SNMA, another primary care interest group, etc.):	

• Please describe the event, project, or initiative. Your answers should reflect the program, its goals and objectives, details about how the idea was generated, how the program was set up, collaboration or community participation, FMIG leader roles, FMIG Faculty Advisor roles, how family medicine was communicated through the initiative, program execution and student participation, and how your FMIG evaluated success of the program to plan for the future. If this was an existing program, what changes and improvements did your FMIG make this year? You will have a 750 word count limit for this section.

Other:\_\_\_

medical home, primary care workforce, National Primary Care Week

Activities, or other collaborations with primary care interest groups.