

FMIG Program of Excellence (PoE) Application

CATEGORICAL OR SPECIAL CONSIDERATION 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:

1. Medical School Name: California University of Science and Medicine
2. FMIG Name: Family Medicine Interest Group
3. ☒ Main Campus or ☐ Regionally Separated (branch) campus
a: If regionally separated (branch) campus, name: _____
4. Number of students in your medical school: 162
a: If your campus is a regionally separated (branch) campus, number of students on your campus: _____
5. Number of active FMIG members: 46
6. Number of students serving in FMIG leadership positions: 4
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: ☐ YES ☒ NO
9. Has your FMIG won this award in the past: ☐ YES ☒ NO

Contact information:

10. Primary Student Leader Name: Cynthis Wong
11. Primary Student Leader Email Address: cynthis.wong@gmail.com
12. Primary Student Leader Phone: _____
13. FMIG Faculty Advisor Name(s): Dr. Renu Bhupathy
14. FMIG Faculty Advisor Email Address: bhupathyr@cusm.org
15. FMIG Faculty Advisor Phone: _____
16. Institutional Mailing Address: 217 E. Club Center Dr., Ste A, San Bernardino, CA 92408

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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?

California University of Science and Medicine's FMIG is structured to have four executive board positions including president, vice president, secretary, treasurer. The president is in charge of conducting our meetings and obtaining contacts for future events. Our vice president's role is to fill in for the president when they are unable to be present as well as create the monthly newsletter. The secretary is in charge of maintaining an active members list, tracking the meeting minutes, and communicating information to the members of the interest group. The treasurer is in charge of tracking the interests groups budget and ensuring there is sufficient funds to complete the yearly goals.

18. Describe your FMIG's mission and goals.

The mission of CUSM's family medicine interest group is to foster interest and educate students about the field of Family Medicine. We hope to create a safe and informative environment for students to interact with current Family Medicine physicians and residents in order to become more knowledgeable about Family Medicine.

Goals:

Educate: One of our major goals is to spread awareness to medical students regarding the field of family medicine. We are conscious of the stigma of the family medicine specialty among medical students and we hope to foster a positive environment in regards to family medicine. We aim to do this through personalized experiences and events that allow our students to interact with current physicians in the field.

Interact and Connect: Previously, our school has no way for students to be matched up with residents to discuss medical school. The students at our school are interested in talking with upperclassmen about family medicine and all other topics in medical school. Therefore, we hope to offer events to talk with residents and possibly mentors for our medical students.

Community: Create opportunities for medical students to shadow family medicine physicians. Offer volunteering opportunities to allow students to become more involved with the individuals of the community.

19. Describe the role of your FMIG Faculty Advisor.

Our faculty advisor, Dr. Renu Bhupathy, plays a vital role as a point of contact for any and all topics, such as helping us coordinate speaking with the director of the mobile clinic. Dr. Bhupathy attends most of our events to interact with students, and is also the keynote speaker for a couple of our yearly events. She has helped conduct multiple clinical training sessions as well helped us contact different organizations in our area for events.

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 three programs, initiatives, or projects, meaning that you may fill out the block of questions up to three times total to reflect up to three individual programs, initiatives, or projects.

While there is a three 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.

- In what category is your FMIG applying for a categorical or special consideration award?
 - ☐ Community service: What your FMIG does for the community.
 - ☐ Professional development: What your FMIG does to promote professional and/or leadership development among your members.
 - ☐ Exposure to family medicine and family physicians: What 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: What 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.
 - ☐ First-time applicant.
 - ☐ Most improved FMIG.
 - ☐ Collaboration with another campus group.

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

☐ Other: _____

PROGRAM/PROJECT/INITIATIVE 1

- Title of FMIG event, project, or initiative: Resident Connection
- Date(s) and time(s) held: Multiple (May, August, Sept, Nov 2019, February, March 2020); About one hour each month
- Number of students/student work hours it took to organize: 4 students; 1-5 hours per event
- Number of students who participated: 10-25 per event
- 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.

One of the initiatives that we are most proud of is the implementation of resident connections with our medical students. We hosted a Resident Roundtable event on May 15, 2019 at 5:00PM where 25% of our total student body was seated for dinner with family medicine residents. The event took 4 students to organize and about 5 hours of preparation including communicating with the residents, fellow medical students, and setting up the venue. The residents rotated to different tables every 20 minutes to ensure they were able to speak with each table at least once. It emulated the idea of speed dating and it was an immense success. Even to this day, students are raving about how much fun they experienced and how much knowledge and wisdom they were able to take away from the residents.

We capitalized off this momentum and decided to incorporate a Mentoring Program where each family medicine resident was paired with a medical student who had similar interests. We were able to connect dozens of residents and students and now the pairs are communicating back and forth. It is one of our goals and objectives to create an avenue by which medical students can ask residents about the family medicine residency, profession, and lifestyle. In addition, we have continued to host resident socials throughout this year, where students can talk to residents in a casual, relaxed setting in order to foster stronger bonds between medical students and family medicine residents.

Finally, under our initiative of Resident Connection, we began hosting Mystery Cases. Our family medicine residents bring in medical cases from their past experiences and walk us through the patient history and the workup. These Mystery Cases provide us a more academic bonding experience with the residents and help us to think clinically in preparation for rotations.

PROGRAM/PROJECT/INITIATIVE 2

- Title of FMIG event, project, or initiative: Community outreach/Clinical experience
- Date(s) and time(s) held: Various (weekly dates and times; Monday's and weekends)
- Number of students/student work hours it took to organize: 4 students; 6 hours
- Number of students who participated: >20
- 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.

Our second initiative for our FMIG was establishing shadowing with the Family Medicine Department at our school's teaching hospital, Arrowhead Regional Medical Center. Our goals with this were twofold: to have students learn about family medicine outside of the classroom, and to have students get to know the patient population we would be seeing in our third year. We knew that shadowing in the family medicine department was a crucial way to get students to be interested in and learn more about family medicine outside of conversations and the classroom. The residents students would work with would be the best informers of family medicine. Importantly, we wanted students to learn about family medicine in a variety of settings as well and worked with administration to organize shadowing in a variety of locations including both inpatient and outpatient clinics.

In addition to this, we took the extra step of working with administration to allow students to shadow in the mobile clinic at ARMC. We spoke one on one with the family medicine residency program director in order to extrapolate the guidelines for allowing students to shadow in the mobile clinic, as they had never had students shadow there before. With their and other faculty's support, we were able to initiate a shadowing program at the mobile clinic as well. The mobile clinic is unique in that it provides a variety of services for patients who do not have regular access to transportation and can't make it to the hospital to see a provider. Most patients do not speak English, and only speak Spanish. Students who shadowed there were able to witness another side to family medicine, those that work with underserved populations and how they navigated language and socioeconomic barriers. This extra shadowing opportunity was especially important in highlighting the different practices that family medicine physicians can have, as well as the extreme need in our area for such physicians.

Now that we have had logistics established, and the first few participants, we are looking to expand the program. Currently, our class sizes are small and we have had over 25% of our second year class participate. However, as class sizes grow, we hope to integrate our public outreach efforts (described in the next session) and promote these shadowing programs at the beginning of each new year to increase participation in shadowing, especially among first years.

PROGRAM/PROJECT/INITIATIVE 3

- Title of FMIG event, project, or initiative: Public Outreach/Social Media
- Date(s) and time(s) held: Monthly newsletters
- Number of students/student work hours it took to organize: 4; 2 hours per newsletter
- Number of students who participated: Newsletters were sent to the entire listserv.
- 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.

Our final initiative has been establishing a FMIG presence in our school. Understanding that the initial interest in family medicine was low, our FMIG executive board wanted to promote awareness of the value of family medicine and create a FMIG culture. In order to reach this goal, we brainstormed three modes of communication: monthly newsletters, a form of PR for culture building, and social media presence, to cultivate and continue interest throughout the year.

In September 2019, we started a monthly newsletter to serve as a means of regular correspondence with our members. Each written and designed by interest group members, the newsletter consists of relevant upcoming events, announcements, and reminders regarding our interest group. Also, we included a "Case of the Month", from credible resources, of primary care cases along with a series of questions and answers for students to learn and see the diversity of patient cases in family medicine. Every member in our email list had a chance to read this newsletter every month and participate in case solving.

Additionally, we created FMIG culture by establishing a vision to spread awareness of family medicine. We designed a corresponding original logo to be a mark of who we are. By distributing stickers and various paraphernalia with our name and logo, we have helped build a sense of ownership in our members and have garnered attention among students previously disinterested in family medicine. Finally, using Instagram, we have maintained a presence on social media. This has been important in continuing enthusiasm and activity outside of school. Bringing our interest group into the social media sphere has allowed us to connect to a wider pool of students outside of our email list and sustain our relationship with our members.

These three approaches to carrying out our initiative to create a FMIG presence and increase awareness of the scope of family medicine has been successful. We plan to continue to build a culture of interest and ownership in family medicine through monthly newsletters, social media, and promotion of the image of FMIG. As our school grows and adds new students year by year, we hope to only grow in furthering passion for family medicine.