

Role of an FMIG Faculty Advisor

In this section you will find information on:

- The Role of an FMIG Faculty Advisor
- Frequently Asked Questions for FMIG Faculty Advisors
- Data: What we know about FMIGs from a national perspective

Role of the FMIG Faculty Advisor

There are many ways in which an advisor can help student FMIG leaders. It may be useful to think about this proactively and look for opportunities that serve specific functions. This represents important ways in which FMIG faculty advisors can be particularly effective:

1. Help the student leaders frame the primary mission of the FMIG: Review the mission statement that exists, develop one, or change the goals as it relates to the needs of the students for that particular year.
2. Suggest new and topical ideas based on your individual exposure to clinical practice and to regional and national trends in family medicine.
3. Offer suggestions on the structure of the FMIG as it relates to the function: this may take the form of changing the officer structure or terms.
4. Help the student leaders understand that different methods of operation may affect success. Do they try to integrate their programs with a semester long schedule that is distributed? Do they promote future activities at current meetings? Do they offer opportunities for additional member sign-up at each meeting?
5. Suggest funding sources for students, including local, state and national resources.
6. Suggest speakers with a unique background and expertise in topics the students might wish to cover.
7. Look for opportunities to provide feedback. Tell the leaders when they are doing an excellent job. Tell the leaders diplomatically if they are making a mistake and do it in a manner that incorporates positive and negative feedback.
8. Offer suggestions for a different approach to a goal or an alternate goal if the student leaders are reaching a dead end in planning.
9. Serve as the liaison to the Department of Family Medicine.
10. Encourage the leaders to reach out to partners in organizing the FMIG activities. Partnering can result in a larger impact and can sometimes expand resources for the activity.
11. Help the student leaders develop more successful leadership skills.
12. Remain accessible to the students. You may not need to be present at every event, but you ought to know what the students are planning and also debrief with them on the outcomes of the event. It is important for students to know that

they can call, e-mail or visit with you if they need advice or want to share a success story.

13. Remember that FMIGs are student-run. There is a balance in letting students run the meetings, choose topics and implement programming.
14. Make sure that there is leadership continuity between years. Make sure that leaders are thinking about who will be leading the group the following year, and that there is a clear process for selecting new leaders.
15. Help the leaders think outside the medical school. Encourage students to attend conferences outside the medical school and run for national leadership positions.

FAQ's about FMIG Faculty Advisors

Who are FMIG Advisors?

- Family physician full-time or volunteer faculty members of Departments of Family Medicine
- Non-physician members of Departments of Family Medicine
- Family Medicine residency program faculty members

What are the primary roles of FMIG Advisors?

- To be the liaison between their department of family medicine and the students interested in family medicine
- To support students interested in family medicine

How can FMIG Advisors support students?

- Being informed about current issues in family medicine
- Being available to attend FMIG meetings, state academy meetings and the AAFP national FMIG advisor meetings
- Listening to and giving feedback about student ideas for informational programs about family medicine
- Assisting in finding family physician speakers for local school programs
- Informing students about state and national meetings
- Encouraging students to apply for family medicine enrichment opportunities
- Assisting in finding financial resources to support programming

What “best practices” with their schools/departments have been cited by FMIG advisors as most effective for their success in this role?

- Initial agreement with the department chair on the expectations and resources available for this position – e.g., funding to attend state Academy and AAFP national FMIG advisor meetings
- Protected time to attend student FMIG meetings
- Open communication with the Executive Director of the state Academy about FMIG needs and activities
- Open communication with the Dean's office so that family medicine students will be chosen to participate on panels concerning specialty/residency choice
- Awareness of school calendar and exam schedule to maximize attendance at FMIG events

What “best practices” concerning interaction with FMIG student leaders have been cited by FMIG advisors as most effective for their success in this role?

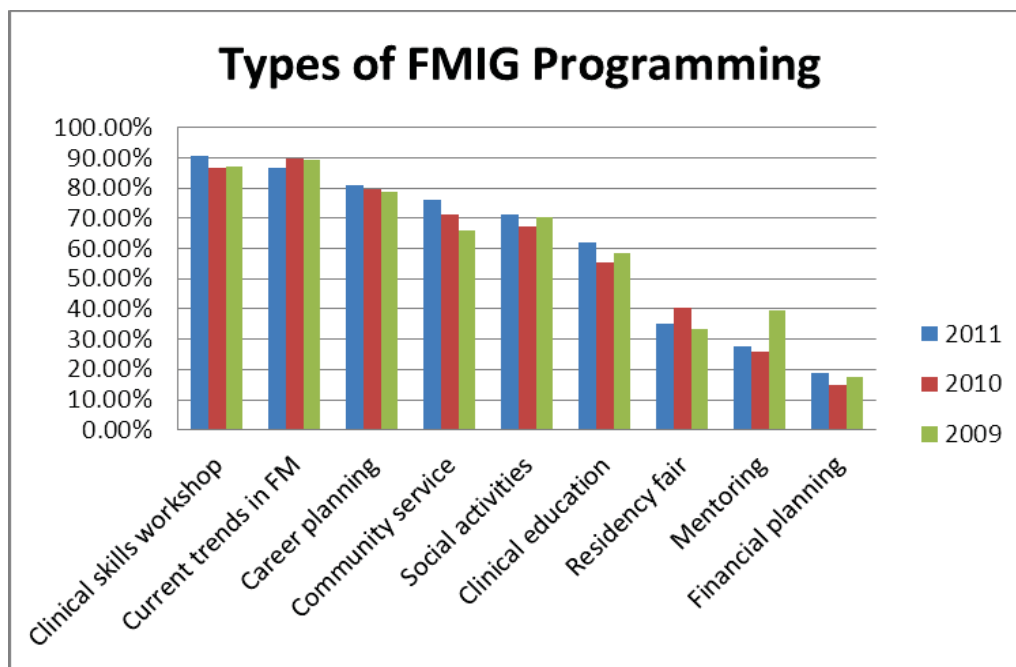
- Listening and giving constructive feedback

- Offering ideas that can work to implement student ideas
- Encouraging peer mentoring among the students to assure future leadership

What We Know About FMIGs (2011 data)

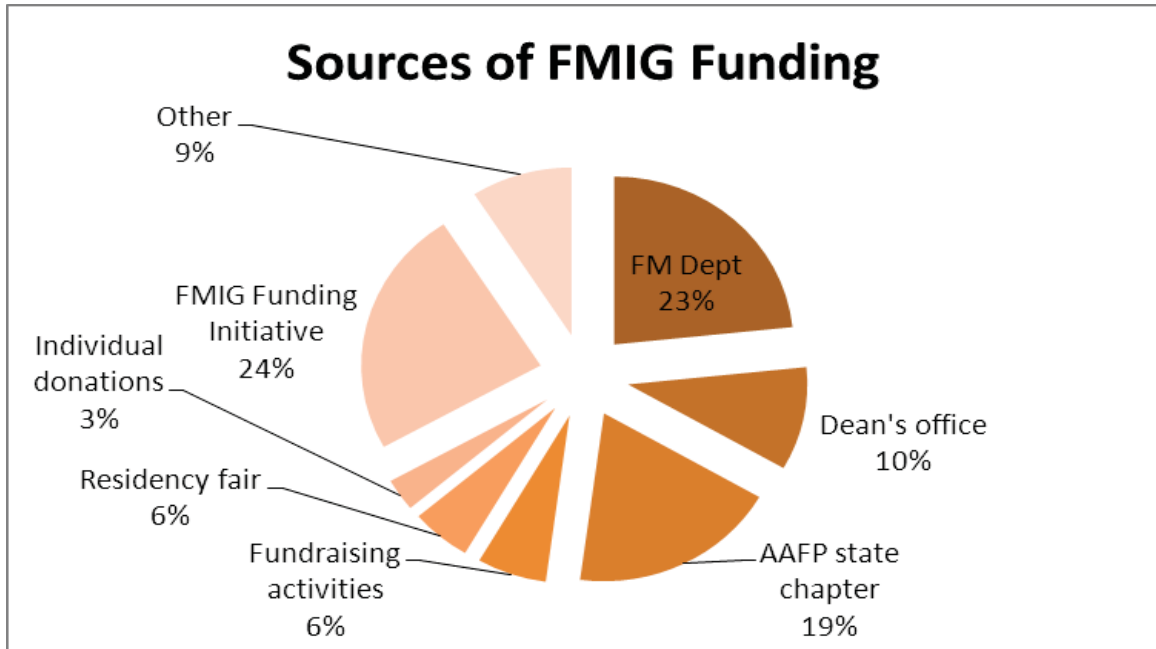
FMIG Meetings/Events

- FMIGs have an average of 7.9 meetings each year (8.1 in 2010).
- FMIGs plan to have an average of 9.3 meetings next year (no change from 2010).
- 46% of FMIGs report that events have more than 25 attendees.
- 80% of groups plan to address one or more elements of the Patient-Centered Medical Home in 2011-2012 (+2% over '10-'11).
- 45% of FMIGs address health policy or advocacy.



Funding

- Spending each year
 - 29% of FMIGs spend less than \$1,000 each year (+1% from '10).
 - 25% spend between \$1,001-1,500 (-7% over '10).
 - 22% spend between \$1,501-2,500 (-1% over '10).
 - 20% spend more than \$2,500 (+4% from '10).



Level of Interest

- 38% of FMIGs reported an increase in interest among students.
- 47% reported about the same level of interest, and only 4% reported decreasing interest.

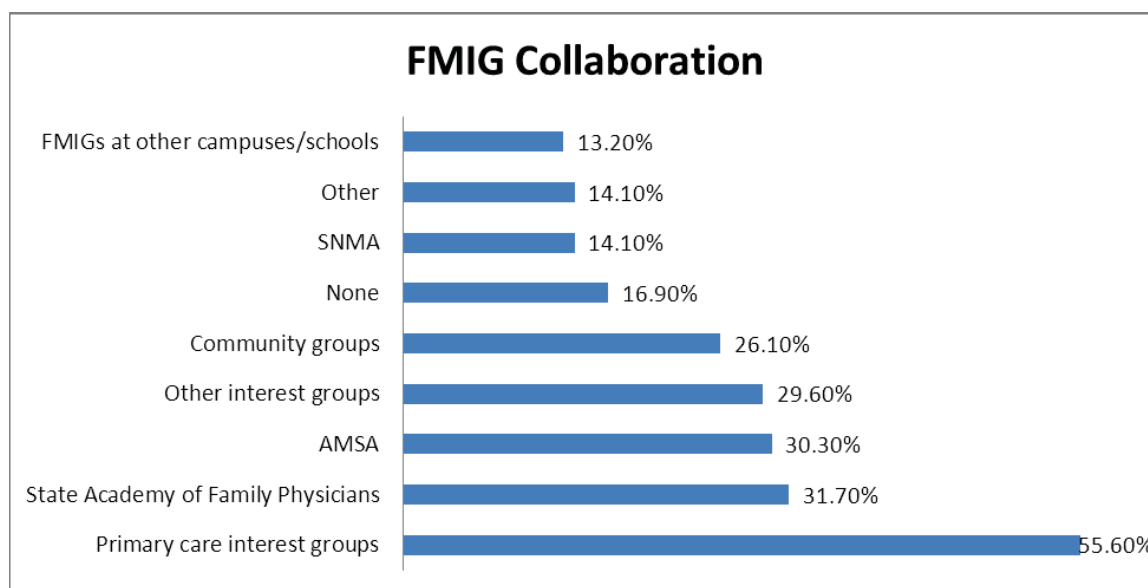
FMIG Funding Initiative

- In 2011, 142 FMIGs filled out the Faculty Advisor survey (+14 from '10).
- More branch campuses are starting FMIGs.

Target Schools (schools without a department of family medicine)

- Six of 11 target schools completed FMIG Faculty Advisor Survey.
- Target Schools include:
 - Yale University
 - George Washington University
 - Stanford University
 - Johns Hopkins University
 - Harvard Medical School
 - Washington University (in St. Louis)
 - Columbia University
 - Weill Medical College of Medicine at Cornell University
 - New York University
 - Mount Sinai School of Medicine
 - Vanderbilt University

Collaboration



Where FMIGs Need Help

69.7%	Keeping M3s and M4s involved
52.8%	Increasing membership/recruitment
46.5%	Dispelling myths about family medicine
42.3%	Finances
38.7%	Incorporating community service
35.9%	Information on health care reform and public policy
33.1%	Current statistics on the specialty
28.9%	National conferences and leadership
26.1%	Mentorship programs
22.5%	Presentation/speaker materials
19.7%	AAFP membership
17.6%	Advocacy
11.3%	Health IT

FMIGs and Regional Coordinators

- 78% of FMIGs know the name of their Regional Coordinator (+7% over '10, +10% over '09).
- 72% receive communication through their Regional Coordinator.