

For Immediate Release January 21, 2022

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## FMEC Offers Support to Elements of ACGME's Proposed Family Medicine Requirements

DAYTON, OHIO – Today, the Family Medicine Education Consortium (FMEC) submitted feedback to the Accreditation Council for Graduate Medical Education (ACGME) on proposed revisions to the <u>Family Medicine</u> <u>Program Requirements</u>.

The FMEC's 14-state region includes over 190 family medicine residency programs. A primary focus of FMEC is encouraging quality medical education and residency training, which the FMEC accomplishes by connecting faculty to share and learn from each other and promoting innovations and best practices at our Annual Meeting. "Our long-term support of residents and faculty across a large region gives us unique perspectives, which we are happy to share with the ACGME as it revises its guidelines" said Donald Raj Woolever, MD, FAAFP, President of the FMEC. "Not only do we believe certain elements of the new requirements will result in a stronger resident experience, but they will also offer opportunities for FMEC to support residency programs through our current and emerging initiatives."

The FMEC believes that elements of the new requirements, once in effect, will benefit FMEC's work to improve care throughout the region and the country by connecting institutions. They will make FMEC's efforts to encourage medical students and pre-healthcare students to choose family medicine more successful by improving the training experience and better describing the potential and excitement of family medicine.

Specifically, the FMEC provided supportive comments in relation to the following elements.

- Revisions to the definition of the specialty now introduce concepts such as **compassion, equity, social justice, and "whole person" care**. The FMEC commends recognition of these concepts, which capture the relationship-based nature of family medicine, and the unique ability family physicians have to provide care within the context of the family and community.
- The FMEC commends the ACGME for proposed requirements on using **regional learning collaboratives** to create and share scholarly activity, improve learning, and encourage collaboration between residency programs. For decades, as a multi-state organization engaging diverse health care institutions, the FMEC has promoted collaboration between training programs to share expertise and advance innovation. Our learning collaboratives such as IMPLICIT (Interventions to Minimize Preterm and Low Birth Weight Infants Using Continuous Quality Improvement Techniques), the Integrative Health Learning Community, and others have shown seen the positive impacts of shared learning. We look forward to supporting residency programs within our region to meet the new requirement by creating learning collaboratives in which they can participate.
- The FMEC supports the goal of creating **adaptive learners and basing learning goals on community needs**. As a continuing medical education provider, the FMEC will benefit when family physicians leave

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training with a strong sense of the need for continuous learning and reflection on their needs and the needs of their communities.

To read FMEC's specific comments on these and other requirements, read our <u>January 21, 2022, Letter to the</u> <u>ACGME</u>. If you have any questions or would like more information on the FMEC's comments or activities that supports residency training, contact <u>Scott.Allen@fmec.net</u>.

## About the Family Medicine Education Consortium

The Family Medicine Education Consortium, Inc. (FMEC) is a catalyst, convener, and incubator that connects family physicians and other stakeholders to improve the health communities by strengthening family medicine, primary care and medical education. The FMEC serves 14 states and the District of Columbia in the northeast region of the U.S., working with 60 medical school departments of family medicine, 195 family medicine residency programs, and thousands of family physicians and other health care providers in communities, and quality improvement projects, the FMEC inspires medical students to seek careers in family medicine, strengthens academic family medicine through faculty development and leadership experiences, and stimulates innovative approaches to primary care service delivery.