

**American College of Preventive Medicine
GME Committee Meeting**

Paradise Point Resort
San Diego, CA
Friday, February 21, 2003
7:00 – 8:00 a.m.

MINUTES

Chair: Judy Rubin

Staff: Ginger Anderson

Participants: Judy Rubin (Chair), Dorry Lane, Jill Waalen, Gary Goldbaum, Miriam Alexander, David Mann, Deborah Porterfield, Wayne Dysinger, Kathleen Acree, Gail Stennies, Elizabeth Garland, and Ginger Anderson (Staff).

Judy Rubin welcomed participants to the meeting and led introductions.

Previous Meeting

The minutes from the November 9, 2002 meeting were approved.

Progress on Competencies for GPM/PH

Concluding a discussion begun during the previous GME Committee meeting, the group agreed that it would call the list “competencies” and base it on the American Board of Preventive Medicine (ABPM) exam content outlines. The group discussed the best approach and level of detail for the competencies and determined that the competencies should be comprehensive but also written at the level of a general inventory so the programs can add items as needed. They should be superficial enough to avoid controversy but also specific enough to apply to the knowledge, skills, and work of physicians, as opposed to other professionals in the field. Dr. Rubin brought the discussion to a close, suggesting that the Committee do more work on the competencies outside of the meeting and continue the exchange as they take shape.

Action: The group will refer to Ruth Etzel’s environmental list as a model. The group will correspond and share elements by e-mail over the coming months.

In-service Exam Writing

Jill Waalen gave a brief overview of the current exam development resources, stating that only seven people contributed questions for the August 2002 exam. San Diego State University looked over the resulting 100 questions and then sent them out to reviewers. She asked the group for help in soliciting physicians to write items for the exam.

After some discussion, the group determined a good strategy would be to ask the program directors to encourage their residents to write items, perhaps providing the incentive of a reduced fee per exam for programs that contribute. The items would not have to be formatted perfectly, as they would go through extensive review and revision before appearing in the exam. One

participant suggested that a subcommittee of the GME Committee be formed for exam development and that Dr. Waalen be selected as the chair.

Action: Dr. Waalen and ACPM staff will approach the residency program directors for help with exam development for the 2003 exam.

Residency Directors Workshop

Elizabeth Garland brought to the table concern over the timing and length of the program directors' workshop. Specifically, she stated that the amount of time the program directors have to be away from home if they attend the workshop and the annual meeting is unreasonable.

Action: ACPM staff will prompt the College to consider other options for the workshop.

Residency Program Questionnaire Preliminary Results

Ginger Anderson shared with the group a preliminary results analysis of the questionnaire the College asked all residency programs to complete in January. She explained that the results available at the time of the meeting could not be considered conclusive as only about 30% of programs had responded.

Action: ACPM staff will slightly revise the instrument to make specific sections easier to answer and then will continue to urge the remaining programs to respond.

The meeting was adjourned.

Fall 2003 ACPM GME Committee Meeting (via conference call)

Minutes

October 28, 2003

Participants: Judy Rubin, Kathleen Acree, Mike Sokol, Deborah Porterfield, David Mann, Joel Nitzkin, Dorry Lane, Dan Blumenthal, Mike Barry (ACPM Staff), and Ginger Walters (ACPM Staff)

1. Welcome and Introductions/Review of Minutes—Judy Rubin welcomed the group and announced each participant. She invited comments on the minutes from the February 2003 meeting. Minutes were approved as written.
2. Update on Competencies—Dr. Rubin explained that the committee in February liked the format and comprehensiveness of the Environmental draft competencies Ruth Etzel prepared and so decided to use it as a model for the other sections. The group referred to the attached draft during the discussion. Dr. Rubin asked the group for volunteers to work specifically on the Public Health Practice section, which needs the most work. The group agreed that much of the content appropriate for the competencies already exists in other sources, so the task really is to organize the existing pieces into competencies and then refine them.

Action—Joel Nitzkin and Deborah Porterfield agreed to help. Dr. Rubin will mail the materials she has to them and they will get back to her with a draft.

David Mann reminded the group that it should be mindful of the two-year time constraint. The comment sparked a discussion of how broad the list should be. Dorry Lane proposed that the group could use an exhaustive approach and expect residents to merely get exposure to some of the items. In the end, the group seemed to agree that the list should be treated as a collection of true competencies; capabilities that all physicians trained in preventive medicine should be expected to have. In other words, preventive medicine physicians should be competent in each item, rather than just have familiarity. One suggestion was made to develop "minimum" competencies and beyond, an approach that would allow the group to include some items other than strict competencies. In the interest of time, the group agreed to continue the discussion later.

3. Update on PMR Program Questionnaire Analysis and Use—Ginger Walters gave a very brief overview of the results, referring to the attached draft results summary. The group was most intrigued by the assessment's finding that, on average, programs have more funded slots than filled slots.

Action—ACPM Staff will perform more analysis on the data to determine the Occupational Medicine vs. General Preventive Medicine/Public Health breakdown for each result and will assess a size comparison of the responding and non-responding programs.

Mike Barry continued the discussion by mentioning that there are a few programs tapping into Medicare GME funding and that the College would like to explore that route further for other programs.

Action—Mr. Barry will talk with some of the program directors who have accessed Medicare GME as a source of funding.

The group discussed ways in which to increase the questionnaire's response rate beyond what has been done already. One idea was to greatly reduce the tool to gain only the most important information from the remaining programs. Another was to focus effort on getting complete data for a certain category of programs (e.g., those that receive funding from HRSA).

Action—Committee members will review the questionnaire and the draft analysis (attached) to draw out the salient points for further examination. They will send their comments to Ms. Walters. The discussion will continue during the next committee meeting.

4. New Web Resources/Brainstorm Improvements—Ms. Walters gave a very brief overview of the changes that have been made to the Education section of the ACPM Web site. GME information has been separated from CME information and the framework has been made for a "Residency Training Resource Center." There are sections to house resources for programs and program directors, current residents, and medical students and prospective residents. Ms. Anderson asked the committee to visit the site and offer comments about what can be added to make it a complete resource for all three groups for which the site is intended.

Action—Committee members will visit the education section at www.acpm.org to identify areas for expansion, particularly beyond simple descriptive information about residency training to create a more robust resource. Comments should be sent to Ms. Walters.

5. In-service Exam—Ms. Walters mentioned that the August 2003 results were mailed to the programs.

Action—The overall results will be posted on the ACPM Web site.

6. Workshop planning—Ms. Walters asked the group for guidance regarding the planning of the 11th Annual Residency Program Directors' Workshop. The group suggested that accreditation issues and RRC topics be included on the agenda and they suggested getting further involvement from the Joint Council of Residency Directors.

Action—Ms. Walters will ask for topic suggestions and planning committee volunteers during the upcoming November Joint Council meeting and over the Program Directors' Listserv.

7. Update on HRSA Funding—Mr. Barry noted that, unfortunately, there was no news. He summarized that the bill was still held up in congress and that the probable outcome was not clear.
8. The meeting adjourned.