

FMIG Program of Excellence (PoE) Application

Please fill in the following:

1. Number of students in your medical school: 300
2. Number of active FMIG members: 34 M1s, 30 M2s, 45 M3s, 21 M4s
3. Check all that apply to you:
 - 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.)
4. Our FMIG has won this award in the past:
 - YES What years? 2002, 2003, 2005
 - NO
5. We intend to apply for [Select one]:
 - Overall award
 - Award for Excellence / Innovation in: [Select one]

INSTRUCTIONS FOR THE PROGRAM OF EXCELLENCE AWARD APPLICATION:

- You must use this template for your application. Please complete all sections (unless #8 does not apply to you).***
- The length of this document should be between five and 15 pages. Any longer or shorter and your application will not be considered.***
- In answering questions #3-6, describe what your FMIG learned from the previous year(s), what enhancements/changes you made or what innovations were developed.***

1. Contact Information:

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2. FMIG Operation: Provide a brief overview of how your FMIG operates, including your leadership structure, mission statement and goal(s), student involvement and retention, and the role of your faculty advisor.

The Family Medicine Interest Group (FMIG) is one of the most active student organizations at the Brody School of Medicine with participation spanning all four classes and including the enthusiastic involvement of Family Medicine residents and faculty. During the 2008-2009 school year, we had 34 M1s, 30 M2s, 45 M3s and 21 M4s be a part of FMIG in some way. In the fall, we host a cook-out to kick-off the new year, recruit new M1 members and reunite with current members. The presence and support of Family Medicine faculty at the cook-out are our greatest recruiting tools as they inspire new students to consider family medicine. We also participate in the School of Medicine's annual organization fair to recruit new members and to let students know what our FMIG accomplished throughout the preceding year.

As an organization, we are committed to providing information and resources to students interested in Family Medicine and primary care. We are avid supporters of our school's mission to increase the supply of primary care physicians in North Carolina and to improve the health status of eastern North Carolinians. This year 13 Brody students, constituting 21% of the Class of 2009, matched in Family Medicine residencies. We consider these graduates to be a testimonial to the dedication of our FMIG for inspiring medical students to become family physicians for North Carolina.

The Brody FMIG is run by students under the supervision of a faculty advisor. As a liaison for a very supportive Department of Family Medicine, the FMIG Advisor serves as an assistant and facilitator for the FMIG as a whole. The advisor has the privilege of advocating for and working directly with the officers in planning. She also provides continuity from year to year.

The FMIG leaders for the 2008-2009 school year are:

President - Jennifer Parker, M2
Vice-President - Matthew Paine, M2
Secretary - Jennifer King, M2
Treasurer - Vanessa Everett, M2
M1 Representative - Andrew Justice, M1

The role of each position is summarized below.

President - organize meetings, facilitate events, procure funding, establish an annual budget, attend state and national conferences, organize student travel to conferences, promote FMIG activities

Vice-President - assist the president and promote FMIG activities

Secretary - promote and advertise FMIG activities, complete POE application, assist with the M4 graduation banquet preparations

Treasurer - oversee the FMIG account, collect member dues, promote FMIG activities

M1 Representative - promote FMIG activities to the M1 class, assist the president in planning FMIG events, facilitate a smooth transition to new leaders following officer elections

Officer elections are held in the spring, and leadership duties are passed on to the new leaders at the end of each school year. FMIG officers are nominated by members and, with the exception of M1 Representative, are rising second year students. Each nominee must give a brief speech to their peers during an FMIG lunch event to describe the contribution they would make to the organization if elected. In the fall, first year students are invited to apply for the position of M1 Representative by

submitting a brief statement elaborating on their interest in Family Medicine. The leaders and advisor select a representative from among the applicants.

3. Community Service: What does your FMIG do for the community? [If you have several community outreach activities, list all of them.] Also, if your FMIG collaborates with your school's SNMA chapter, describe your activities here.

This year our FMIG hosted a blood drive at the medical school. Our vice-president encouraged participation from medical students and Brody faculty by dressing up in a "bloodhound" costume and asking people to donate. We were delighted to collect 76 units of blood for our community.

Our FMIG members are also active volunteers throughout the community. Students participate in the following:

Grimesland Clinic - a free, student-run clinic providing health care to many in Pitt County's Hispanic and indigent population

Greenville Shelter Clinic - a free, student-run clinic providing health care to residents of the Greenville Homeless Shelter and indigent patients

Hobgood Clinic - a free, student-run clinic providing health screening and education to residents of Hobgood, NC and surrounding communities

This year our FMIG also decided to implement the Tar Wars program in Pitt County and began planning for initiation of the program in fall of 2009.

4. Professional Development: What activities does your FMIG do to promote professional and/or leadership development among its members? If you describe a program that has been in existence for a number of years, please explain its *current significance*.

Professional development is encouraged in a variety of ways by our FMIG. A favorite event each year is the procedural workshop which gives medical students the opportunity to learn and practice skills that they will use on a regular basis as family physicians, including pelvic exams, suturing, colonoscopies, punch biopsies, and cryotherapy. These workshops are led by seasoned Family Medicine faculty who share advice and stories from their experiences in Family Medicine as well as their expertise in procedural techniques. This year the procedural workshop was quite popular with 26 students participating.

Similarly, our FMIG students actively participate in and learn new skills through the procedural workshops at the NCAFP's annual Family Medicine Day for medical students. This event is designed to introduce medical students interested in Family Medicine to the residency opportunities in North Carolina, thus encouraging students to stay in North Carolina and to invest in the health of our state once they are practicing physicians. Our students take advantage of the opportunity to establish connections with students/future family physician peers at other medical schools in the state.

Attendance at state and national meetings is another important way that our FMIG encourages professional development. We are proud of our student participation this year and hope to encourage even larger groups of students to travel to conferences next year. At the 2008 National Conference of Family Medicine Residents and Medical Students in Kansas City, we represented the eastern region with 16 students and 3 faculty members. The conference allowed our FMIG leaders to attend workshops with FMIG leaders from across the United States and to learn

methods for improving our organization and further encouraging student involvement and professional development.

Our FMIG has a history of promoting leadership development among its members at the state and national levels, and this year we had two students fill national leadership roles, Kyle Geissler (M4) and Vanessa Everett (M2) as representatives in the AAFP's Congress of Delegates.

At the 2008 North Carolina Academy of Family Physicians Winter Conference, we had 10 student participants. Kyle Geissler (M4) held the state position of NCAFP Foundation Ad-Hoc Student Trustee in 2008, and Cody Wingler (M3) was elected for the position for 2009. We also had a nominee for the position of Student Director-Elect, Vanessa Everett (M2).

Expanding upon the ways in which family practitioners can improve the lives of patients, Brody FMIG member Courtney Olmsted won a research award at the NCAFP Winter Conference for her project studying the need for health care providers to consistently follow current surveillance guidelines for breast cancer survivors. Courtney's success inspired us all to pursue professional development in family medicine in creative ways and not to limit ourselves to developing skills in clinical medicine only.

5. Exposure to Family Medicine and Family Physicians: Tell us what your FMIG does to expose its members to family physicians – in your medical school or community – and how the scope of family medicine is demonstrated.

Our FMIG is continuously overwhelmed by the support of Brody's Family Medicine Department. Exposure to family physicians is a weekly event due to the involvement of faculty in our Doctoring, Clinical Skills, and Ethics courses. These are courses which take place throughout the year in the M1 and M2 curriculum and involve small discussion groups and learning groups. Family Medicine faculty, as well as other Brody faculty, participate in the courses as small group facilitators. The Family Medicine faculty and residents also are always available and happy to have students shadow on both inpatient and outpatient services.

Faculty support for FMIG is especially strong at our monthly lunch talks, kick-off cook-out, and annual graduation banquet. In these intimate settings, students are able to engage with family physicians from the medical school and the community to learn more about Family Medicine. The scope of Family Medicine is demonstrated at these events by the wide range of ages, areas of expertise, training backgrounds, and practice backgrounds of our Family Medicine faculty. Most of our lunch talks are given by family physicians and cover a wide variety of topics, from global health to information on fellowships. Family Medicine faculty participate as speakers at lunches and meetings hosted by other student organizations, as well.

6. Promoting the Value of Primary Care: Describe what your FMIG does to tell members about the role of family medicine in enhancing primary care. This could include talking about the patient-centered medical home and the primary care workforce or coordinating activities with other primary care interest groups (internal medicine, pediatrics, OB/GYN or emergency medicine).

Our main venues for educating members on how Family Medicine enhances primary care are our monthly lunch talks. These talks are open to all medical students in the hopes of giving those who have not considered Family Medicine a realistic and positive view of primary care as a career option. This year our lunch talks have covered the following topics:

"What is Family Medicine"- The focus of the meeting was to introduce Family Medicine as a primary care specialty. Several Family Medicine doctors spoke about their personal experiences in training and in practice as primary care physicians. The different options for training in Family Medicine fellowships were also emphasized.

"Global Health and Primary Care"- Our FMIG participated in National Primary Care Week at Brody by hosting a lunch meeting featuring 2 family physicians who participated in a medical mission trip to Nicuargua in the summer of 2008. The physicians focused on the need for primary care providers in international medical missions and how Family Medicine fulfills that need. Resources were also provided for students to learn how they can become involved in Global Health.

"Family Medicine and Med/Peds: Differences in Training and Practice"- Many students have questions on the differences between Family Medicine and Med/Peds. We decided to address these questions by having the residency directors from each of these programs at Brody to explain the differences in training and practice. Each presenter went into detail about the differences in rotations during residency, fellowship opportunities, and practice environment.

"Pearls of Wisdom from M4s Matching in Family Medicine"- The goal of the meeting is to provide a forum for M1s, M2s, and M3s to ask questions about the match process of M4s who matched in Family Medicine.

"Sports Medicine Fellowship"- The goal for the meeting is to provide information on training in Sports Medicine as a fellowship after completing Family Medicine residency. A physician and a fellow from Brody's Sports Medicine program will talk about opportunities for Sports Medicine physicians and what the training involves. A Sports Medicine case will be presented at the end of the meeting.

"Women in Medicine Panel", FMIG/AMWA co-sponsored event for 2009 Diversity Week- As part of Diversity Week, FMIG hosted a panel of female physicians from various specialties, including Family Medicine, to discuss how they balance work and a family.

"Adult and Child Services: Medicaid", FMIG/AMA co-sponsored event for 2009 Cover The Uninsured Week- Our FMIG hosted an educational meeting on Medicaid. A social worker from the Pitt County Department of Social Services taught students about Medicaid qualifications and coverage for adult and child services. Only a small part of our education in medical school emphasizes government health programs that are available for those without insurance. We felt the need to educate ourselves and our classmates about Medicaid since so many patients in primary care rely upon it.

Brody FMIG works closely with the other student organizations at the school to co-sponsor events which demonstrate the integration of Family Medicine and other areas of primary care. We also use these events as channels for exposing the greater medical student community to the contributions of Family Medicine to health care.

7. Measures of Success: What programming elements has your FMIG considered successful? How do you track measurable improvements? This could include increasing membership, showing improvements in Family Medicine match rates among active FMIG members, or receiving recognition from your medical school/state chapter/AAFP.

The programming elements that our FMIG considers most successful are the close partnership between the organization and the Department of Family Medicine and the increasing member involvement in AAFP and NCAFP conferences and leadership. We track measurable improvements by the number of students and faculty participating at the state and national level, and the number of Family Medicine faculty available and willing to participate in events at the school. Improvement is also measured in membership and the number of members who attend meetings, fundraisers, and workshops.



Most importantly, we gauge our success as an organization by how many of our seniors match in Family Medicine residencies. This year our Family Medicine department earned a Silver Award for being second in the nation for the number of graduating medical students entering Family Medicine.

8. Special Consideration for First-Time Applicants or Those Wanting to Show Significant Enhancement in Programming, Membership or Operation: If your FMIG has never submitted an application for this award, or if your FMIG has made significant strides in a particular area, tell us why you think you should be considered for this award. [If this does not apply to you, you do not need to fill out this section.]

Our FMIG has made significant strides in the areas of M3/M4 involvement and state-wide collaboration with other FMIGs. We have unofficial liaisons in both the M3 and M4 classes who champion Family Medicine among their peers and encourage participation in FMIG events and Family Medicine conferences. Our high participation rate from these classes is evidence of the success of our student liaisons. This year we would like to recognize the passion and enthusiasm of Kyle Geissler, M4 and Cody Wingler, M3.

The NCAFP began hosting a meeting for FMIG presidents and advisors at the 2008 Winter Conference. We participated in this meeting as well as the Medical Student Section meeting in order to encourage collaboration with the other FMIG programs in North Carolina. Our advisor, Dr. Susan Schmidt, along with students Kyle Geissler and Cody Wingler have made great efforts throughout the 2008-2009 school year to reach out to the other NC FMIGs and facilitate teamwork and camaraderie between our students and faculty.

Thank you for your submission!