



Mission

AFMA is dedicated to the professional growth and development of its members with particular emphasis on administration and coordination of health care delivery, education and research within Family Medicine Residency Programs

Inside this issue:

President's Message	1
State of the World Special Edition	2
Coordinator Wellness	3
What is Happening Across Family Medicine	4
Coordinator Checklist	5
Mentorship	6
Hot Hits	7
Coordinator Spotlight	8
Accreditation Bytes	9
New Members	10
Physician Advisors	11

PRESIDENT'S MESSAGE

Tina Krajacic, AA



Hello from the beautiful Shenandoah Valley in Northern Virginia. It's such a wonderful place to live, work and play. There are many outdoor activities and adventures to experience here. Virginia has been my home state since 1998 and I couldn't imagine not living here.

I truly hope and pray you are all doing well. This year has been like no other before it. All around the world we have felt the effects of the Coronavirus. Collectively and as individuals, we all have learned to adapt to new ways of doing things. I am extending a huge thank you to each of you for staying the course and making sure our residency programs and physicians remain on track during this time. I hope you have been able to find some time to rest and relax with family and friends as much as possible.

I want to say that it is an honor to be the President of AFMA this year. Though nothing is as it was in years past, the AFMA Board members have still been able to hold meetings every month via WebEx to discuss key items. We are finding that just about everything has gone virtual. Even the National Conference in Kansas City to showcase our programs was held using a virtual platform this year. And now with our focus on how to best conduct

our interviews this season, most if not all of us will be virtual for that as well. However, what I know is that we have learned to overcome and adapt while keeping it together and doing our jobs.

As we all know, unfortunately the annual RAD and PDW and RPS Residency Education Symposium was canceled at the beginning of the year due to COVID-19. The RAD Workshop and RES Planning Committee are working diligently on topics, key speakers and additional details, so be on the watch for updates. More to follow as it begins to all come together.

I leave you with this final thought: take time to encourage someone or reach out to someone that encourages you! AFMA has an amazing mentoring program and we'd love for you to be a part of this dynamic group. If you are in need of a mentor or you would like to be a mentor, please contact Cristin Estes at cestes@aafp.org

Respectfully,
Tina Krajacic, President
E-mail: tkrajaci@valleyhealthlink.com



State of the World: Special Edition



*Submitted by Angie Womble, Program Coordinator
University of Wisconsin Department of Family Medicine and Community Health—Baraboo RTT*

“Bring your whole self to work”.

How many of us, over the course of our careers, have been told by our superiors, to leave our personal baggage at the door? “Keep your personal life at home, and your work life at work,” they said.

In a world of 24/7 access and limited opportunity to fully disconnect, we have no choice but to allow our personal self and professional self to come together. We are also complex human beings who feel very deeply. Think about it; we are, after all, in Family Medicine; the “bleeding heart” specialty.

Many of us are excellent at establishing boundaries, some of us not so great, while others are still learning and implementing them as they read this. I will candidly share with you that I am definitely still learning and implementing. There is no shame in being exactly where we are right now.

It goes without saying that 2020 has tested our resilience, and no matter how sharp or strong we believe we are, we cannot just check our fear, anxiety, sorrow, rage, etc. at the door when we arrive at work. When we cross the threshold from the parking lot through the door of our office, we do not undergo some magical transformation, shedding our personal skin and donning our professional skin. This isn't a Disney movie here — a wave of a wand won't make our home life disappear from our minds from 9 to 5. We continue to be responsible for, and care for, things that exist outside of the office. Blurring that line even more, so many are now participating in the COVID-19 enforced remote work.

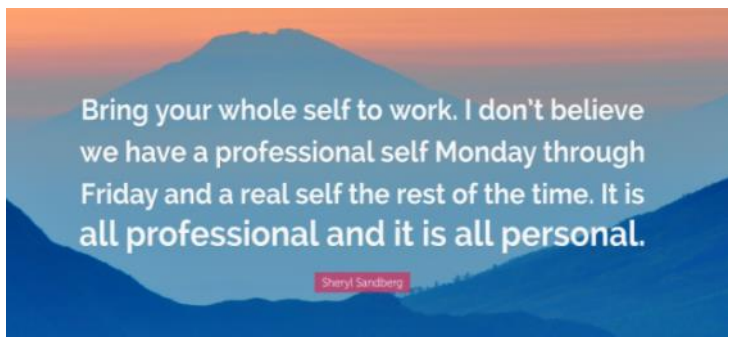
- Wildfires spreading and threatening lives, homes and livelihoods.

- Civil unrest peaking, creating a space for unity, but also continued tragedy and devastation.
- COVID-19, in addition to the ever-increasing cases and deaths, this is restricting opportunity for human touch, a basic human need.
- Flooding in Indonesia
- Explosions in Beirut

We are affected by all of these things, and so much more. In addition to these external stressors, we have our own internal struggles, and personal tragedies to overcome. So, being told to leave our personal baggage at the door seems not only impossible, but unhealthy at best. Instead, bring your whole self to work. That's right; bring every last drop of who YOU are!

- Be authentic
- Be vulnerable
- Be self-aware

When you interact with your colleagues, keep in mind that they are whole people too, and that we all respond to trauma and the current state of the world differently. Maybe others want to bring their whole selves, but fear the risk of putting themselves out there, so be YOU and pave that path!





Coordinator Wellness



*Submitted by Carla Eilerman, Academic Program Coordinator
Mercy Health – St. Rita's Medical Center Family Medicine Residency, Lima, OH*

*Ingrid Singh, Residency & Fellowship Programs Supervisor
University of California San Francisco, Fresno Family Community Medicine, Fresno, CA*

Surviving the Struggle of Telecommuting During COVID-19

As Program Coordinators, we probably thought we'd never telecommute and maybe some of us aren't. For those of us who are, it has been quite a challenge. With little to no idea of how to telecommute effectively, I've decided to share what my experience has been.

First, I didn't want to leave our campus. It seemed like I was deserting the residents that I strive to "be there" for and I didn't want to feel disconnected. At the same time, I wanted to observe the call for social distancing. I reluctantly headed home, box in hand (with what I thought I'd need to work from home). I had no idea how this was going to go down.

As I emptied the contents of the "work box", I came to the realization that I brought things that weren't helpful and forgot things that were essential. I don't have a printer/scanner so why I brought home a stapler, tape dispenser, a box of paper clips, and two sizes of binder clips, was evidence that I had no clue. Additionally, my kitchen table wasn't quite the ergonomic stand-in for my sit-stand desk, nor was my dining chair built for comfort. Somehow, I forgot that my large hands would have a difficult time typing from my average-size laptop. The second monitor that sits so nicely on my desk at work, was a luxury I didn't have at home and toggling between windows seemed archaic.

I spoke to a few of my staff during the day, but seeing their faces became necessary if I was going to maintain my sanity. We decided to meet twice daily, via Microsoft Teams – this has been essential! We started our meeting with each of us discussing what

things we didn't like about telecommuting and offered suggestions to overcome the obstacles that we could change (i.e. the difficult decision to wear "work attire"; fighting the urge to eat all of the snacks/food we'd stocked up on for our families.)

Things we found to be helpful:

- ◆ Decorate your space. A workspace isn't your office until you have something personal on your desk.
- ◆ Get some fresh air. A small walk around the block or down the driveway is a good way to break up the monotony of your routine.
- ◆ Stick with normal business hours. Fighting the inclination to work all day and into the night. Your body and mind need a break.
- ◆ No news is bad news. Communicate regularly with your peers/staff/leadership. Our Program Director checks in by text or telephone at least once a day. All communication received is funneled to the staff, so they always feel like they have the most up-to-date information.

Finally, if you find something that's working well for you, please use the discussion list, social media, or some other form of communication, to share with others. We're in this together.





What's Happening Across Family Medicine?



Submitted by Angie Womble, Program Coordinator
University of Wisconsin Department of Family Medicine and Community Health—Baraboo RTT



- The AAMC strongly encourages all residency programs to conduct virtual interviews this fall/winter to limit the spread of COVID-19.
- ERAS files, including MSPE's, will not be released to programs until October 21, 2020 at 9pm ET.
- The [AAFP](#) PDW and RPS Residency Education Symposium is tentatively scheduled for March 5-9, 2021, with the annual RAD Workshop scheduled for Friday, March 5. Keep in mind, this is one month earlier than usual. The AAFP is committed to the well-being and safety of the GME community, and will continue to monitor the impact that the pandemic may have on the in-person event.
- Check out the AAFP 2020 PDW and RPS On Demand [Library](#), where you can purchase and have access to 22 recorded workshops that were intended for the 2020 Residency Education Symposium.
- The Society of Teachers of Family Medicine (STFM) Annual [Spring Conference](#) will be held May 1-5, 2021, at the New Orleans Marriot in New Orleans, LA. The annual conference offers interactive workshops, seminars, posters, hot-

topic sessions, and more for family medicine educators. Currently, the STFM is optimistically hoping for an in-person Annual Spring Conference.

- Family Medicine Midwest will conduct its annual [conference](#) virtually from November 13-14, 2020.
- The ABFM announced its updated Family Leave policy, effective July 1, 2020, which increases total allowable [Family Leave](#) time away from program to 8 weeks.
- The United States Medical Licensing Examination (USMLE) program will change score reporting for [Step 1](#) from a three-digit numeric score to reporting only a pass/fail outcome, and this will take effect no earlier than January 1, 2022.

STAY **UP** TO DATE

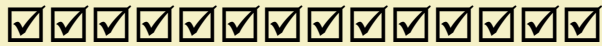


Coordinator Checklists: Important Dates & Events



Submitted by
Summer Jamison, MEd, Residency Coordinator,
UAMS- South Central, Pine Bluff, AR

Take time to Laugh



September

- ◇ Applicants may begin submitting application to residency program.
- ◇ GME Track & FRIEIDA uploads

October

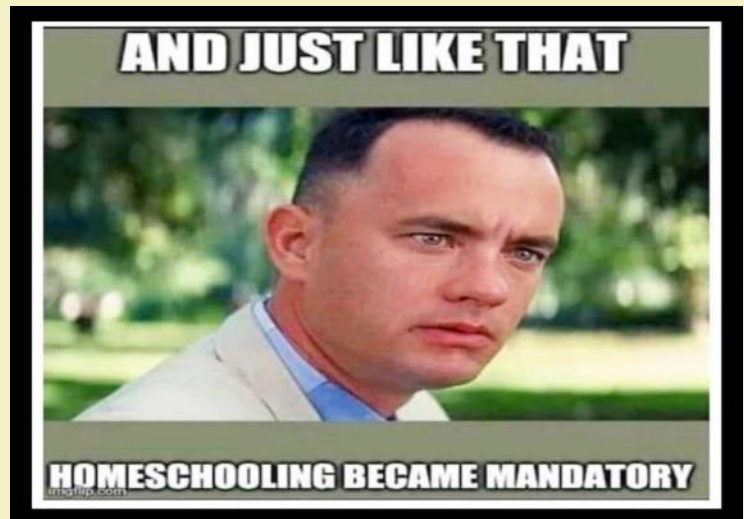
- ◇ Residency programs may begin reviewing applications& MSPEs are released to programs
- ◇ ITE & ISE
- ◇ Set Interviews
- ◇ AAFP Family Medicine Experience

November

- ◇ Thanksgiving
- ◇ Interviews
- ◇ ABFM Fall Examination
- ◇ CCC Meeting
- ◇ Resident Semi-Annual Meeting
- ◇ June graduates registration for ABFM boards

December

- ◇ Interviews
- ◇ AFMA Memberships expire December 31



AFMA Discussion List
A Costly Benefit ...

Please limit discussion list responses to those that add value.

"Me too" and "thank you" responses increase traffic on our service and risk unnecessary price increases!

Your assistance is greatly appreciated!

Mentorship:

A relationship in which a more experienced person helps to guide a less experienced one.



Submitted by

Tina Krajacic, AA, AFMA President/Mentoring Committee

Residency Program Manager

Shenandoah Valley Family Practice Residency, Front Royal, VA

“In learning you will teach, and in teaching you will learn.”

~Phil Collins

I would like to extend our well wishes to everyone regarding COVID-19 that has and continues to affect us all. There is no greater time to reach out and let others know you're there and give encouragement. Send a card, make a phone call, or send a text message or email. Mentoring goes beyond just what we do and how we grow and learn our jobs. Once mentor/mentee pairings take place, the bonding journey begins and over time can lead to lifelong friendships. It's a journey that takes some time and a bit of effort, but so worth it.

Though our AFMA members are from all around the United States, there are many ways and things that keep us connected and united as a family. As mentioned above, use those tools to reach out to others. We don't know what a simple card or a quick phone call can do to change or make a difference in someone else's life. It is a true privilege to be a part of an amazing group. Mentoring is a gift that gives both ways, all you have to do is take the first step.

Please know, if you are in need of a mentor or you would like to be a mentor, you can contact Cristin Estes at cestes@aafp.org.



Come learn and grow along with us by being an AFMA Mentor!

2020-2021 Mentorship Committee Members

Tina Krajacic– Chair

Jessica Brooks

Patty Irwin

Ellen James

Summer Jamison

Lanette Johnston

June LeCroy

Cindy Profera



“HOT HITS”

from the AFMA Discussion List



Submitted by Kelsey Gender, Program Manager, The University of Arizona, Tucson, AZ

Here are some of the recent questions and responses that have been posted on the AFMA Discussion List. What would we do without all of you? Thank you for your responses—They’re so helpful. Remember, too, that the AFMA website has resources for you. www.afmaonline.org It’s a great place to start when looking for answers/ideas.

Q Has anyone requested special accommodations for a resident to get extra time taking the ITE? Any tips, tricks or lessons learned anyone can share?

Responses:

- ◆ Check with your GME/Institution for the policy about testing accommodations.
- ◆ Have the resident go through the Disability Resource Center for formal accommodations (if you have a DRC).
- ◆ Ensure you have documentation that shows they need testing accommodations. It will make it hard for them to get accommodations on the board exam without this trail.
- ◆ When you register for the exam you can select the amount of time the resident may need.

Q Due to COVID-19 restrictions we have not been able to complete nursing home visits and our geriatrics experience has been very limited. We are going to try doing virtual home visits because we are not able to go into private homes currently. How are other programs completing these requirements? Are you having these same type of limitations?

Responses:

- ◆ Community physician who is still doing mobile home visits so residents are accompanying to those visits.
- ◆ Most nursing homes are not allowing residents in the facilities but will conduct virtual visits.

◆ Residents still going to nursing home location for their geriatrics rotation but they are being COVID tested before the rotation begins and every week they are there. It is a 4 week rotation. They wear a mask and face shield and maybe other PPE like gloves, etc.

Q Can you please share with when you have your first PEC meeting and how often you have it. Also, does anyone keep a binder for the PEC meeting?

Responses:

- ◆ First PEC meeting in July and then meet every other block.
- ◆ Keep a binder for the PEC meeting. In it is any materials that were distributed at the meeting including agenda, minutes, etc.
- ◆ Quarterly and save all our PEC information into a digital folder.
- ◆ Appoint committee in February. It is always the two Chiefs, two faculty members and a resident from each class. We let the faculty and residents volunteer. At the first meeting in early March, I give each of them a binder with all of the required data to be reviewed. They meet 5 - 6 times over March and April, and their draft report goes to the PD in May. It is presented to the residents in June.



Program Coordinator Spotlight

Nicole Russell, Program Manager



Do you know someone who is not yet a member of AFMA?

Encourage them to
sign up today!

For more information
contact Cristin Estes:
cestes@aafp.org

Benefits of AFMA:

Access to AFMA's Web Site
www.afmaonline.org

Mentoring Program

Communicate with others on
the AFMA Discussion List

Membership Committee
Opportunities

Online Newsletter

Online Membership
Directory

Access to
*A Practical Guide for the
Administration of
Family Medicine
Residency Programs*

Information regarding
AFMA's Annual Business
Meeting, the RAD
Workshop, and
networking opportunities
scheduled in conjunction
with the PDW and
RPS Residency
Education Symposium in
Kansas City

Free AFMA webinars

Membership Certificate

Meet Nicole!

Nicole has been a Program Manager at the Florida State University College of Medicine Residency Program since January of 2019. Prior to her new role, Nicole worked as a medical assistant in a family medicine residency program.

After receiving her Master's degree, she began developing her skills and knowledge by working in continuing medical education, medical practice management and even had the opportunity to create a home health agency that had gone through initial accreditation. During her time in CME, she also participated in reaccreditation and achieved Accreditation with Commendation. Way to go Nicole!

When it comes to resources, Nicole says "it has been most helpful to be able to work with other program coordinators to find what works best in their programs." Even with having great resources in your back pocket, we as an AFMA community know there are always hurdles or challenges that we must navigate through.

For Nicole, the biggest challenge she has faced so far is gathering the documents required for the initial ACGME accreditation visit and faculty appointments. This means every PLA and yes, even all faculty CVs. Don't worry though, she is persistent! Nicole is always looking for ways to learn more and grow professionally. When asked what 3-5 topics would be at the top of her list when it comes to learning more at RAD, Nicole identified innovation, coordinator empowerment, personal development, and training for TAGME certifications.

These are all great topics to learn about. At the time of surveying Nicole, she had no residents. So, the unprepared or not expecting aspect of being a coordinator hasn't really come into play yet. Nicole has been taking this "quiet" time to learn the ins and outs of the different tasks a coordinator is responsible for, without the pressure of a fully functioning residency program. In times like these, you don't know what you don't know but it's what you learn during that time that will help you in the end.

Finally, I asked about her favorite part of the job. Nicole has really enjoyed being an integral part of starting a brand-new program! She states, "It is a delight to be able to meet and collaborate now with those who will end up being part of each of the many pieces that go into the program." It's like putting a puzzle together; finding just the right piece that fits together with another. Once all the pieces are in place, you can see the beautiful picture you had been working towards.

Nicole, we would like to wish you the best of luck when your residents do start. AFMA has your back and will help you become a very successful coordinator.

*Submitted by
Stephanie Bilger, Program Coordinator
Lewistown Rural Family Medicine—
Geisinger Lewistown Hospital
Lewistown, PA*



Accreditation Bytes!

*Submitted by Natalie Smith, Residency Program Administrator
MAHEC (Mountain Area Health Education Center), Asheville, NC*

Who should serve as a role model for residents in inpatient adult, inpatient pediatric, and maternity care?

[Program Requirement: II.B.1.c)(1)-(3)]

The Committee considers core and non-core family medicine faculty members as appropriate role models in these areas. The Committee anticipates there may be faculty members providing different areas of this role modeling and not necessarily the same faculty members providing care in all three areas.

Can residents count experiences with continuity patients seen in the hospital toward the required 1,650 patient encounters in the family medicine practice (FMP) site?

[Program Requirement: IV.C.4.e)]

No. The expectation is that 1,650 are patients exclusive to an FMP site. A hospital as a setting does not fit that criterion.

What are the expectations of the Committee with respect to faculty members precepting the resident via teleconference?

[Program Requirement: VI.A.2.]

It is the responsibility of the program and institution to ensure that in situations in which a faculty member is precepting via telemedicine (resident has the face-to-face encounter with patient), there is either direct or indirect supervision available to the resident as needed, as compliance with the supervision requirements still applies.

How should programs develop the list of required procedural competencies?

[Program Requirements: IV.C.21.a)- IV.C.21.a). (2)]

The list of procedures required to be performed by practicing family physicians varies based upon the needs of a community, therefore, the Review Committee expects the program director and faculty members to develop a list of required procedures based upon the needs of the local FMP and recommendations of organizations such as the American Academy of Family Physicians (AAFP), the Society of Teachers of Family Medicine (STFM), and the Association of Family Medicine Residency Directors (AFMRD).

Who should be included on the interprofessional teams?

[Program Requirement: VI.E.2.]

Examples of professional personnel who may be part of the interprofessional teams include nurses, physician assistants, advanced practice providers, pharmacists, social workers, psychologists, dentists, occupational and physical therapists, and care coordinators.

Can patient encounters during internal moonlighting count toward the required 1,650 encounters?

[Program Requirements: IV.C.4.e) and VI.F.5-VI.F.5.c)]

No. Resident experiences while moonlighting (internal or external) may not be used to meet minimum accreditation requirements.

From the ACGME Family Medicine FAQs,
Effective 8/2019



New AFMA Members

Alexis Aguirre
Shane Alday
Suraj Amrutia
Kassandra Baptista
Karla Barrett-Dexter
Kristine Briand
Leona Caldemeyer
Becki Coale
Lorie Cospelich
Brenda Dolejs
Courtney Eaken
Beth Everts
Laura Graver
Heather Gecewich
Margaret Godet
Melissa Graham
Nancy Guinansaca
Kalyn Hadacz
Jennifer Haluzak
Kelsey Huttunen
Kimberly Infante
Ashley Jacobs
Kimberley Jones

Rachael Jones
Cristina Keresztes
Grace Kost
Sonya Laughlin
Rachelle Maldonado-Lopez
Emilia Martinez
Billie McGarrah
Malorie Millner
Kristin Nygaard
Jakki Persak
Breanna Shelton
Franklin Sotolongo
Christine Suarez
Nebat Suker
Samantha Weisend
Robbin Williams
Katerina Woods
Joelle Zarefoss



Is there something you would like to read about in your newsletter?
Do you have a topic that you would like to submit?

Send your ideas to the *AFMA CONNECTION* newsletter committee:

Angela Womble, Co-Chair angela.womble@ssmhealth.com
Summer Jamison, Co-Chair: sdjamison@uams.edu

Kelsey Gender kgender@email.arizona.edu

Ingrid Singh isingh@fresno.ucsf.edu

Kristen Morris kmorris11@umphysicians.umn.edu

Natalie Smith natalie.smith@mahec.net



www.afmaonline.org

11400 Tomahawk Creek Parkway
Leawood, KS 66211-2672

*President
Mentoring Committee Chair*
Tina Krajacic, AA
540-636-2028
tkrajaci@valleyhealthlink.com

*Residency Administrative Development (RAD)
Workshop / Residency Education Symposium
(RES) Program Planning Co-Chairs*
Cheryl Haynes, BA, C-TAGME
910-678-7259
cheryl.haynes@sr-ahcc.org
Jill Freda, MSM-HCA
207-795-2824
fredaji@cmhc.org

Membership Committee Chair
Annette Sheets, C-TAGME
570-321-2340
sheetsam@umpc.edu

*Information Exchange-Website Chair
Audio & Web Conferencing Chair*
Deborah Egger, AAS
715-464-6352
egger.deborah@mayo.edu

*Fundraising & Marketing Committee
Co-Chairs*
Erika Robinson, BS
713-343-5511
elrobinson@houstonmethodist.org
Pamela MacMillan
307-777-7911x104
pmac@uwyo.edu

Information Exchange-Media Co-Chairs
Summer Jamison, BS, MEd
870-541-6010
sdjamison@uams.edu
Angela Womble, C-TAGME
608-355-7270
angela.womble@ssmhealth.com

*Professional Development Committee
Co-Chairs*
Gina Silvey, C-TAGME
573-882-6061
silveyg@health.missouri.edu
Kristi Stocks
703-391-2021
kstocks@ffpcs.com

*Immediate Past President/Strategic
Planning/Nominating/Bylaws Chair*
Melissa Blecha Yeager, MBA, C-TAGME
253-697-5757
mayeager@multicare.org

Secretary
Angela Womble, C-TAGME

Executive Secretary
Cristin Estes
800-274-2237, ext. 6356
cestes@aafp.org

Physician Advisors
Gregory Blake, MD, MPH
Jennifer Knowles, MD
Karen Mitchell, MD
Zachary Waterson, DO

2020-2021

AFMA Physician Advisors

AFMA's Board of Directors are responsible for the selection of Physician Advisors for the organization who advise the board on a number of details related to AFMA decisions and activities. They participate in elements of the Fall Board Meeting, including RES speaker selection and selection of the plenary speaker for the conference. They have also committed to writing articles pertaining to pertinent topics for the AFMA newsletter throughout the year. Finally, they meet with the board during RES each year to review what each committee has been working on, the goals of the organization and to ask questions regarding how they can better assist us in the year to come.

The collaboration allows for AFMA to play a huge role in administration of our specialty while giving us the benefit of having leaders in our field for advice when needed. It is truly a win-win situation! Our advisors are:



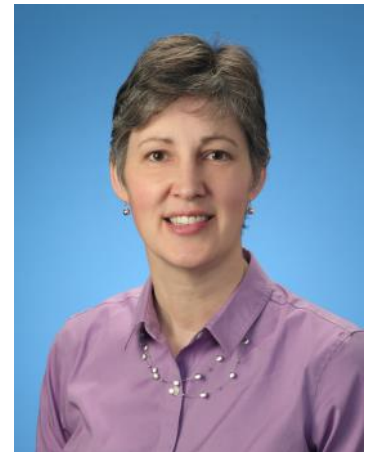
Gregory H. Blake, MD, MPH

University of Tennessee Medical
Center; Department of Family
Medicine



Karen Mitchell, MD

Director, Division of Medical Education
American Academy of Family Physi-
cians (AAFP)



Jennifer Knowles, MD

MultiCare Health System (East Pierce)
Program



Zachry Waterson, DO

Fort Wayne Medical Education Program