

Reference Committee on Education

**2015 Congress of Delegates of the American Academy of Family Physicians
Denver, CO**

Alternate Delegate, Mary Cullen, D.O.

Resolution No. 601 “Human Trafficking Education and Training for Family Medicine Physicians”

This resolution encourages education on recognizing the signs and health implications of human trafficking.

Outcome: ADOPTED Substitute Resolution:

- That the American Academy of Family Physicians provide human trafficking-related healthcare education, including identification and management information, in at least one educational conference workshop
- That the American Academy of Family Physicians communicate with the Council of Academic Family Medicine to encourage their organizations to identify opportunities to advocate for the integration of the subject of human trafficking into the education of medical student, residents and fellows
- That the American Academy of Family Physicians investigate the feasibility of human trafficking related CME, including but not limited to live presentations at the Family Medicine Experience and the National Conference of Family Medicine Residents and Medical Students
- That the American Academy of Family Physicians develop a position statement on human trafficking.

Resolution No. 602 “Family Physicians as Certified Medical Examiners”

This resolution heard mixed testimony with key testimony cautioning against a mandate to train all family medicine residents in this area, noting that residents should reserve the right to determine for themselves interest in engaging in these services. In addition, it was testified that eligibility requirements for the exam would make an “all” requirement unlikely for residencies to execute. A substitute resolution was submitted as the overall spirit was constructive.

Outcome: ADOPTED Substitute Resolution:

- That the American Academy of Family Physicians inform family medicine residency programs regarding the National Registry of Certified Medical Examiners’ requirements regarding training and certification of Commercial Driver Medical Examiners (CPMEs)
- That the American Academy of Family Physicians encourage family medicine residency programs to facilitate National Registry of Certified Medical Examiners’ mandated training and certification for residents who express interest in conducting such examinations.

Resolution No 603 “Promoting Transparency in Medical Education and Access to Training in Settings Affiliated with Religious Healthcare Organizations”

This resolution brought up the complex issue of how to let pre-med and medical students know about the availability of women’s health training in medical schools and residency programs. It was recommended that it be referred to the board due the complexity of the issue and because there does not seem to be a direct “key word” to let students know. Also, it is not just a religious issue as there have been many mergers and de-mergers that have affected access to this training.

Outcome: REFERRED to the Board of Directors

Resolution No 604 “Medical Education Support for Practice in Rural and Underserved Areas”

This resolution sought to have the AAFP “create, identify, and disseminate” information about programs demonstrated to increase the number of family physicians practicing in rural and underserved communities. Testimony was favorable but it was also felt that the AAFP was not in a position to create curriculum.

Outcome: ADOPTED Amended Substitute Resolution:

- That the American Academy of Family Physicians identify and disseminate model elements of medical school curricula and admission practices that prepare medical students for rural practice, which have been shown to increase student likelihood to practice in rural and underserved areas.

Resolution No. 605 “Support of Miscarriage Management Training in Family Medicine Residencies”

It was noted that AAFP Recommended Curriculum Guideline (AAFP Reprint Nos. 261 and 282) already specifically address this topic.

Outcome: RAFFIRMED as Current Policy

Resolution No. 606 “New Era of Maintenance of Certification: Streamline, Simplify and Reduce Cost”

Testimony was uniformly in support of efforts to simplify and streamline the Maintenance of Certification (MOC) process. However, testimony was mixed regarding the perceived value of the education attained by participating in MOC activities in general and specifically related to current IV activities. It was also noted that there would likely be unintended consequences of the suggestions to provide a “simple seamless pathway back to board certification for those who lost it” and to eliminate elements of MOC, specifically clinical simulations and part IV activities. It was ultimately referred to the board because of the complexity of the issues.

Outcome: REFERRED to the Board of Directors

Resolution No. 607 “Improve Procedural Training through State Licensure Reciprocity”

This resolution is directed to help post-residency physicians obtain more training, particularly when such training occurs outside the state where they are licensed. It was also noted that lack of license reciprocity also adversely affects team physicians and physicians providing care to disaster victims. The reference committee believed that the resolution as

written did not adequately capture the complexity of this issue and recommended referral to the Board.

Outcome: REFERRED to the Board of Directors

Resolution No. 608 “Providing Resources for Debt Relief on the AAFP Website”

Testimony was uniformly in favor of the resolution as written.

Outcome: ADOPTED

- That the American Academy of Family Physicians (AAFP) provide a description of, and links to, national resources available for practicing physicians to decrease debt burden on the AAFP’s website, including but not limited to the National Health Service Corps, Income -Base Loan Repayment, and Primary Care Service Loans.
- That as existing programs available for practicing physicians to decrease debt burden change and as new national programs emerge, that the American Academy of Physicians website be updated to include this new information.
- That the American Academy of Family Physicians provide information and assistance to chapters to advocate for effective state-level debt relief programs that are present in other states.

Resolution No. 609 “Standardizing Visiting Medical Student Elective Medical History Forms”

Testimony spoke to the need to remove the administrative burden related to the disparate forms required by various medical schools and hospitals as a prerequisite to elective experiences outside of medical students’ home institutions.

Outcome: ADOPTED

- That the American Academy of Family Physicians support the American Association of Medical Colleges’ effort to standardize the visiting medical student form for all United States medical schools and hospitals that is evidence-based, consistent with Centers for Disease Control and Prevention/Advisory Committee on Immunization Practices recommendations, easy to understand, cost effective and easy to complete.

Resolution No. 610 “Residency Training Office-Based Treatment of Opioid Dependence with Buprenorphine”

This resolution called for mandatory buprenorphine training and certification of all family medicine residents so that graduating residents are able to apply for waivers after they are permanently licensed. Although there was much testimony that opioid dependence identification and treatment is very important, it was felt the resolution as written neither promoted flexibility in training nor provided resources to provide the recommended education.

Outcome: NOT ADOPTED

Resolution No. 611 “Buprenorphine Education”

This resolution sought to have the AAFP develop a position paper supporting buprenorphine treatment by family physicians, include buprenorphine education at AAFP CME conferences, and provide resources to chapters to provide buprenorphine education. The intent of this resolution is important, but at the same time it is limited in scope to a single modality of

treatment. The committee also believed that the AAFP's policies, educational events, and resources should encompass more than buprenorphine.

Outcome: REFERRED to the Board of Directors