DFCM State of the Department - 2023

Anna Flattau, MD, MSc, MS
Alumni Professor & Chair
March 15, 2023
We are Building the Family Medicine Department of the Future

- Enterprise strategic alignment
- Leveraging value-based payment mechanisms
- Advancing health equity
- Interprofessional care
- Interprofessional education
- Bringing expertise to scale
- University level structures for health systems research and education
New Leadership and New Structures

- Chair

- Executive Vice Chair
  - Vice Chair, Clinical Services
    - Medical Directors
  - Vice Chair, Education
  - Residency Director
  - Clerkship Director
  - Director of Research
  - Associate Director of Research

- Departmental Administrator
  - Vice Chair, Community Medicine
  - Director of SJIHE
  - Director, Sports and Exercise Medicine
  - Director, Geriatric Medicine
  - Director, Palliative Care
  - Medical Directors

- Center for Refugee and Immigrant Health
  - FAB Center
  - Center for Supportive Healthcare
We are growing

Faculty 57*
Clinical Staff 85*
Administrative Staff 16
Clinical Fellows 9
Research Fellows 6
Residents 30

TOTAL: 203

Volunteer Faculty 225*

* growth
Our staff is our foundation
Vice-Chairs and Administrative Leadership

George Valko, MD  
Executive Vice-Chair

Robert Motley, MD  
Vice-Chair for Community Medicine

Geoffrey Mills, MD, PhD  
Vice-Chair for Clinical Services

Maria Syl de la Cruz, MD  
Vice-Chair for Education

Emmy Stup, MPH  
Administrator
Division Directors

Alexis Tingan, MD
Sports & Exercise Medicine

Susan Parks, MD
Geriatric Medicine

John Liantonio, MD
Palliative Care

Randa Sifri, MD
Research

Krys Foster, MD
Diversity, inclusion, and social justice
Center Directors

Marc Altshuler, MD
Director, Center for Refugee & Immigrant Health

Lara Weinstein, MD, MPH
Co-Director, Center for Supportive Healthcare

Erin Kelly, PhD
Co-Director, Center for Supportive Healthcare

Mary Stephens, MD
FAB Center Co-Director

Karin Roseman, LSW, MCSW
FAB Center Co-Director
Two New Centers established in January 2023

The FAB Center for Complex Care

Co-Directors: Mary Stephens MD and Karin Roseman

Provides comprehensive primary care for adults and adolescents with intellectual/developmental disability and other complex childhood-onset conditions.

Center for Supportive Healthcare

Co-Directors: Lara Weinstein MD and Erin Kelly PhD

Develops and tests new models of care and educates healthcare professionals to improve well-being for people experiencing serious mental illnesses and substance use disorders.
Division of Palliative Care - est. 2023

Vision:
Reimagine care for patients with serious illness through advocacy, superior clinical care, academic excellence, and community collaboration.
Strategic Planning Process

Implemented structured strategic planning process with consistent focus on 12 key metrics across 9 divisions, centers, and teams

12 Departmental Metrics

Extramural Funding
- Total funding
- Principal Investigator funding

Publications
- # Publications

Social Justice
- Team-specific diversity and inclusion goal
- Team-specific community engagement goal

Clinical
- Patient experience
- Financial sustainability and/or growth

Education
- # medical students trained
- Trainees’ evaluations

Philanthropy
- $ received
- # donors

Wellness
- Faculty satisfaction (annual review)

8/10
## Community health and DEI are everyone’s job

<table>
<thead>
<tr>
<th></th>
<th>Community Goal</th>
<th>DEI Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Education</strong></td>
<td>Develop partnerships with community organizations to allow opportunities for learner involvement</td>
<td>Continue to be intentional with recruitment practices to increase diversity among faculty &amp; residents</td>
</tr>
<tr>
<td><strong>Research</strong></td>
<td>Continue collaborations with community pillar and community-driven research</td>
<td>Continue to recruit, support, and retain diverse research faculty, fellows, and staff; ensure DEI is woven into all research topic areas</td>
</tr>
<tr>
<td><strong>Community</strong></td>
<td>Prepare a longitudinal, integrated curriculum to support Community Medicine competency development in UME, GME</td>
<td>Identify synergies and align our work with the priority areas of need identified in the Jefferson Health CHNA &amp; Improvement plans</td>
</tr>
<tr>
<td><strong>Primary Care</strong></td>
<td>Add 1 new community connection per team per year</td>
<td>Increase URM hiring for clinical faculty &amp; leadership positions</td>
</tr>
<tr>
<td><strong>Sports</strong></td>
<td>Increase AHO athlete physicals by 10% (add on one additional athlete physicals event)</td>
<td>Contribute one DS&amp;EM faculty or staff to the Departmental DEI committee</td>
</tr>
<tr>
<td></td>
<td><strong>Staff</strong> the sports medicine clinic at the Wyss Center every 1-2 months</td>
<td>Explore opportunities for extramural funding for DEI clinical or educational initiatives</td>
</tr>
<tr>
<td><strong>Geriatrics</strong></td>
<td>Increase Division community engagement</td>
<td>Engage with DFCM on recruitment strategies to recruit URM candidates</td>
</tr>
<tr>
<td><strong>Palliative Care</strong></td>
<td>Increased community engagement</td>
<td>Purposeful efforts to increase DEI throughout palliative care</td>
</tr>
<tr>
<td><strong>FAB Center</strong></td>
<td>Collaborate with the Jefferson Center for Autism &amp; Neurodiversity &amp; DEI office to provide quarterly presentations</td>
<td>Advisor for student AADMD chapter</td>
</tr>
<tr>
<td></td>
<td>Participate in the Special Olympics of PA Cities of Inclusion Task Force</td>
<td>Community Resource Fair</td>
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<tr>
<td></td>
<td>Participate in panel with patient and caregiver for Humanities course lecture for 1st and 2nd years medical students</td>
<td>Young Adult social skills group</td>
</tr>
<tr>
<td></td>
<td>Explore creating a patient advisory board PDAT (People with Disabilities as Teachers)</td>
<td>Participate in “Got Transition” work group, a federally funded and nationally recognized resource center</td>
</tr>
<tr>
<td><strong>Center for Supportive Care</strong></td>
<td>Continue efforts to improve the coordinated care of individuals with SMI and SUD across the Philadelphia region</td>
<td>Continue to hire diverse post-doctoral fellows and to support a diverse group of medical students with research projects</td>
</tr>
</tbody>
</table>
Value-based Care: We Have Arrived

- Clinical systems redesign - the time is now
- Primary care is a business imperative as well as a moral imperative
- We are active drivers of health systems change
Our current contracts support transformation to value-based approaches.

Keystone First Medicaid: ~93,000 people

Primary Care First: 43,400 people

HPP: 55,400 people

Employees: ~60,000
We have met the payer, and they are us

**HPP Value Propositions**

- Attract/retain HPP members
- Document risk appropriately
- Improve STAR ratings/ HEDIS/ NCQA
- Save costs
- Attribution and care stays within Jefferson
- Meet a mandate
- Align with existing resources at state or plan level

- Population capture
- Quality, equity, and experience
- Patient visits for attribution and coding
- Efficient, in-house utilization
- Shared external priorities
Novel Approaches to Care!

Complex care clinics!

Treating patients in the contexts of their lives!

Clinical experts as leaders of health services design!

Home-based primary care!
1. We’ve been talking for years about value-based care - when will this actually happen?
2. Will HPP now be willing to support my brilliant idea?
3. Primary care does all this work - where is the money?
4. I’m tired of having a dysfunctional system inflicted on me! How can we break free?
Jefferson Primary Care

- An interprofessional system of care
- Comprehensive, longitudinal, relationship-based care for ~600,000 people in the Philadelphia region
- The major driver for specialist referrals, attribution, value, population health, and health equity

Our Vision:
We are the premier national model of an academic primary care system

~600,000 Patients
944,219 Visits
98 Practices
1,447 Employees
Primary Care Geographic Footprint

Light Purple: EPM
Red: Abington
Green: Northeast
Dark Purple: ECHA
Blue: Center City
Yellow: New Jersey
### Strategic focus areas – Jefferson Primary Care

<table>
<thead>
<tr>
<th>Quality, experience, and equity</th>
<th>Systems Design: Care Models</th>
<th>Systems Design: Ops/Finance</th>
<th>Growth</th>
<th>Community partnerships</th>
<th>Academic integration</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Health equity data infrastructure</td>
<td>• Specialist interfaces</td>
<td>• Standardization of best practices across divisional operations teams</td>
<td>• Maximizing Existing Capacity</td>
<td>• Steering Committee established</td>
<td>• Jefferson Primary Care Research Center</td>
</tr>
<tr>
<td>• Person-Centered Primary Care Measure</td>
<td>• Interprofessional team roles</td>
<td>• Social needs screening roll-out</td>
<td>• Community Partnerships</td>
<td>• FQHC partnerships</td>
<td>• Enterprise-wide clinical trials</td>
</tr>
<tr>
<td>• Peer review</td>
<td>• Social needs screening roll-out</td>
<td>• Complex patient phenotypes</td>
<td>• Advancing Value-Based Models</td>
<td>• City health centers</td>
<td>• Family Medicine Residency Collaborative</td>
</tr>
<tr>
<td>• Break the Rules</td>
<td>• Complex patient phenotypes</td>
<td>• Dashboards incorporating risk and utilization</td>
<td>• Planning for geographic expansion</td>
<td>• Refugee health</td>
<td>• Primary Care Training Institution (interprofessional workforce development)</td>
</tr>
<tr>
<td>• Integrated clinical dashboards</td>
<td>• Dashboards incorporating risk and utilization</td>
<td>• Integrated financial models</td>
<td>• Homeless health/ addiction and SMI</td>
<td></td>
<td>• Uninsured care</td>
</tr>
</tbody>
</table>
Academic Mission at Enterprise Scale

- Jefferson Primary Care Training Programs
- Health systems transformation/New care models
- Jefferson Primary Care Research Center
- Community-Based Clinical Models
- Health systems transformation/New care models
- Jefferson Primary Care Training Programs
- Community-Based Clinical Models
- Jefferson Primary Care Research Center
- Health systems transformation/New care models
- Jefferson Primary Care Training Programs
The Jefferson Primary Care Research Center is:

- A university-level structure
- The research arm of Jefferson Primary Care and for our population health partners in value-based care
- A high-impact, high-value initiative to elevate health services research at Jefferson
- A structured collaboration across colleges, departments, regions, and health system partners to support team science and capture funding opportunities

By aligning colleges and departments across our organization, and housing health system work at scale within the academic entity, we will create the **health services research infrastructure** that our organization needs.
Components of primary care research infrastructure

- **Governance structure**: Advisory committee with university, practice, and community representation.
- **Practice Based Research Network**: Infrastructure to facilitate research across Jefferson Primary Care, identify funding opportunities, connect investigators, and assist in grant-writing.
- **Primary Care Research Review Committee**: Ensure feasibility and success of practice-based primary care research.
- **Data infrastructure and data library**: Develop in collaboration with IS&T and clinical-operational leadership.
- **Faculty ‘fellows’ from across university**: Forum to connect and exchange ideas amongst primary care researchers.
- **Recruitment and career pipeline**: Collaborative recruitment including mid-career/senior faculty; mentorship of junior investigators across departments/colleges.
- **Metrics to track success of primary care research across the enterprise**: Monitor increase in funding, productivity, and inclusion.
Education and Workforce Training at Scale

Family Medicine Residency Collaborative est. 2022
- 5 programs + 1 in planning for NJ
- Joint presentation accepted for national conference (STFM)
  - “A new residency coalition can find commonalities across and strengths in programs’ diversity and can make concrete steps for positive collaboration within the first year of its establishment.”
- Grant-funded program on training in primary care for IDD
- New 4-year track with MPH launched with College for Pop Health
- Joint teaching sessions
- ERASMUS proposal for exchange with Italy - first trip this month!

Future opportunities

<table>
<thead>
<tr>
<th>School</th>
<th>Potential programs</th>
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<tbody>
<tr>
<td>Nursing</td>
<td>• RN capstone project in primary care</td>
</tr>
<tr>
<td></td>
<td>• RN precepting opportunities</td>
</tr>
<tr>
<td></td>
<td>• RN primary care residency (6 months)</td>
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<tr>
<td></td>
<td>• NP primary care fellowship (1 year)</td>
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<tr>
<td>Health Professions</td>
<td>• Social work program</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>• Pharmacy residency in primary care</td>
</tr>
<tr>
<td>All</td>
<td>• Research opportunities for students</td>
</tr>
<tr>
<td></td>
<td>• Pipeline opportunities/ tuition support for lower-level staff (MA-&gt;RN)</td>
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<tr>
<td></td>
<td>• Training collaborations with external organizations that are leading innovators (Oak Street, Iora, Cityblock)</td>
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Inter-college collaborations est. 2022
- Community-based interprofessional training opportunities
  - e.g. Wyss Center has: RN, OT/PT, pharmacy, medical residents
- Research and evaluation partnership: College of Pop Health/ Jefferson Primary Care
  - PhD student
  - MPH student
- College of Nursing and JCIPE are providing technical support in development and and evaluation of Jefferson Primary Care Nursing Model
Our Achievements
Some of our many awards...

Michael Hurchick, DO  
**Excellence in Education**

John Liantonio, MD, MBA  
**Faculty Mentoring**

Mary Stephens, MD, MPH, FAAFP  
**Community Service**

Josh Barash, MD  
**Outstanding Clinician**

Victor Diaz, MD
- 2022 Al Dia Top Doctor
- 2022 Metro Philadelphia Healthcare Power Players List
- 2023 Algernon B Jackson Faculty Honoree

Amy Cunningham, PhD, MPH  
**Bowman Early Career Investigator**

Cindy Cheng, MD  
**New Board Certification in Obesity Management**
The Investiture of Robert L. Perkel, MD
10/13/22
The first Robert L. Perkel, MD Professor of the Humanities and Medicine!
Philanthropy Update

Department Metrics
- FY22 DFCM Funds Raised to Date - $892,461
- FY22 DFCM Referrals to Date - 10 of 72 patients referred, ~14% to goal

Department Victories
- Hansjörg Wyss Wellness Center - 60 unique donors, $5.38M to $6M goal
- The Friends of Robert Perkel Professorship - $1.21M to date
- Geriatric Med/Palliative Care - $10,000 gift from the Martin and Nora Salzman Foundation
Primary Care Services
## Practice Demographics

<table>
<thead>
<tr>
<th>Practice</th>
<th>Annual Visits (Patients) (Cal Year 2021)</th>
<th># of Active Patients (24M Panel)</th>
</tr>
</thead>
<tbody>
<tr>
<td>JFMA</td>
<td>50256</td>
<td>25418</td>
</tr>
<tr>
<td>SPORTS</td>
<td>3420</td>
<td>---</td>
</tr>
<tr>
<td>CHA</td>
<td>5504</td>
<td>1692</td>
</tr>
<tr>
<td>Navy Yard</td>
<td>10475</td>
<td>5520</td>
</tr>
<tr>
<td>South Broad</td>
<td>4597</td>
<td>2881</td>
</tr>
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</table>

## Operational Optimization

- Primary Care Dashboard
- Recruitment for open positions
- Creation of a Workflow Reference Guide
- Increasing Access and Support for Specialty Services
- Increased Utilization of Quick Actions
New patient experience survey in April (PCPCM)

Ongoing work:

- Promoting OnPoint reports (culture of safety)
- Scheduling patient experience trainings (motivational interviewing)
- Phone abandonment rate is improving with standardization and process improvement

<table>
<thead>
<tr>
<th>HOW WOULD YOU ASSESS YOUR PRIMARY CARE EXPERIENCE?</th>
<th>Definitely</th>
<th>Mostly</th>
<th>Somewhat</th>
<th>Not at all</th>
</tr>
</thead>
<tbody>
<tr>
<td>My practice makes it easy for me to get care.</td>
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<td>My practice is able to provide most of my care.</td>
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<td>In caring for me, my doctor considers all factors that affect my health.</td>
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<td>My practice coordinates the care I get from multiple places.</td>
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<tr>
<td>My doctor or practice knows me as a person.</td>
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<tr>
<td>My doctor and I have been through a lot together.</td>
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<tr>
<td>My doctor or practice stands up for me.</td>
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<td></td>
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<tr>
<td>The care I get takes into account knowledge of my family.</td>
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<td></td>
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<tr>
<td>The care I get in this practice is informed by knowledge of my community.</td>
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<td></td>
<td></td>
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<tr>
<td>Over time, my practice helps me to stay healthy.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Over time, my practice helps me to meet my goals.</td>
<td></td>
<td></td>
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</table>
Diabetes Pathway: an example of team-based care

**Purpose:** Our DM pathway program is a comprehensive way of managing our diabetic population using a team-based approach incorporating clinicians from multiple disciplines.

**Who has been referred to the Pathway?**
- About 100 patients
- Anecdotally seeing progress as patients get closer to their goals
- Currently working on patient satisfaction surveys and quantitative analysis of patient progress.
Characteristics of goal interprofessional model

- “Unit of production” is the care team, not the provider
- Cost-efficient staffing structure with standardized roles
  - Planned variability based on population and care model
- Capitalizes on value-based opportunities
- Tracks process and outcomes metrics
- Retention, engagement, and well-being of providers and staff
## Jefferson Primary Care Nursing Model

<table>
<thead>
<tr>
<th>2022 model (implemented at some sites)</th>
<th>To be implemented</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Clinical</strong></td>
<td></td>
</tr>
<tr>
<td>• Chronic disease management (e.g. diabetes care pathway, warfarin management)</td>
<td>• Uniform implementation of high-performance RN roles</td>
</tr>
<tr>
<td>• Triage</td>
<td>• Expanded standing orders</td>
</tr>
<tr>
<td>• Medication management</td>
<td>• Algorithm-driven treatment protocols</td>
</tr>
<tr>
<td>• Nursing visits</td>
<td>• Home visits</td>
</tr>
<tr>
<td>• Patient education</td>
<td>• Transition visits</td>
</tr>
<tr>
<td>• AWVs</td>
<td>• Remote monitoring</td>
</tr>
<tr>
<td></td>
<td>• SmartSets to standardize documentation</td>
</tr>
<tr>
<td><strong>Care management</strong></td>
<td></td>
</tr>
<tr>
<td>• Care coordination based on provider referral</td>
<td>• Protocols to proactively manage risk and avoid utilization (<em>requires data transparency and integrated workflows with pop health team</em>)</td>
</tr>
<tr>
<td>• MyChart management</td>
<td></td>
</tr>
<tr>
<td>• Home care, DME, authorizations</td>
<td></td>
</tr>
<tr>
<td><strong>Staff management, training, and back-up</strong></td>
<td></td>
</tr>
<tr>
<td>• MA training and ongoing education, in process of creating written protocols</td>
<td>• Standardization and uniform implementation of MA training and education to support enhanced role</td>
</tr>
</tbody>
</table>
# Measuring the success of interprofessional teams

<table>
<thead>
<tr>
<th>Dimension of success</th>
<th>Examples of metrics</th>
</tr>
</thead>
</table>
| Revenue              | • Revenue metrics (savings, quality, capitation, FFS)  
                       • Cost structure of interprofessional team |
| Utilization          | • Utilization metrics at practice level |
| Growth               | • Panel size per provider FTE  
                       • Risk scores |
| Quality, experience, & equity | • Person-Centered Primary Care Measure  
                               • Contract-based metrics  
                               • Access  
                               • % referrals coordinated with Jefferson providers |
| High-functioning teams | • ACE-15 Assessment for Collaborative Environments/ JTOG  
                         • Wellness |

[PERSON-CENTERED PRIMARY CARE MEASURE](Launching April/May 2023)

**How would you assess your primary care experience?**

- My practice makes it easy for me to get care.  
  - Definitely  
  - Mostly  
  - Somewhat  
  - Not at all
- My practice is able to provide most of my care.  
  - Definitely  
  - Mostly  
  - Somewhat  
  - Not at all
- In caring for me, my doctor considers all factors that affect my health.  
  - Definitely  
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- My practice coordinates the care I get from multiple places.  
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- My doctor or practice knows me as a person.  
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  - Not at all
- My doctor and I have been through a lot together.  
  - Definitely  
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- My doctor or practice stands up for me.  
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  - Not at all
- The care I get takes into account knowledge of my family.  
  - Definitely  
  - Mostly  
  - Somewhat  
  - Not at all
- The care I get in this practice is informed by knowledge of my community.  
  - Definitely  
  - Mostly  
  - Somewhat  
  - Not at all
- Overtime, my practice helps me to stay healthy.  
  - Definitely  
  - Mostly  
  - Somewhat  
  - Not at all
- Overtime, my practice helps me to meet my goals.  
  - Definitely  
  - Mostly  
  - Somewhat  
  - Not at all
Maternal-Child Health and Gynecology
Thanks to all the hard work with patient education provided by JFMA medical assistants and providers we have be awarded the Baby Friendly designation for another 5 years!
Maternal and pediatric health: Strengthening our full-spectrum practice

- Increased New OB patient volume from improved central scheduling workflows
- Leveraging data reports to identify patients with a positive pregnancy test in our office
- Focus on newborn nursery/pediatric services to Health Partners families
- Community partnerships (SKWC and Wyss) to care for their prenatal patients and newborns in the hospital
- Plans with MATER to absorb primary care of their patients with substance use disorder
The Division of Geriatric Medicine & Palliative Care is Now Two Divisions!

1 Parent cell

2 Nucleus divides

3 Cytoplasm divides

4 Two daughter cells
The Division of Geriatric Medicine
Long-term care collaborations

- The Hill at Whitemarsh (Danielle Snyderman, MD, Medical Director)
- Logan Square rehabilitation and healthcare center (Jaja Jarra, MD)
Geriatrics Fellowship

Dr. Kristine Swartz MD, Fellowship Director

Current Fellows
- Lili Flink MD
- Christopher Azzolino MD

Incoming fellows
- Dayna Hovern, MD, Jefferson Palliative Care Fellow
- Beverly Ng, MD, Bryn Mawr FM
Examples of Geriatric Scholarship and Research

- Dr. Swartz, Co-Chair of TJUH Delirium Committee, launched inpatient Delirium protocol
- Dr. Michael Danielewicz trailblazing LGBTQ+ competent and sensitive care for older adults
  - Plenary speaker at PAMDA Symposium
  - Symposium presenter at AGS
  - Part of both AGS and AHPM’s working groups to develop LGBTQ+ competencies for both geriatric and palliative care fellowship programs
Honors and awards

• Dr. Rownea McBeath -- Faculty geriatrics research Beeson award

• Dr. Kristine Swartz -- American Geriatrics Society (AGS) Tideswell scholar, to improve recognition and treatment of delirium at TJUH as a model for enterprise-wide initiatives.

• Dr. Brooke Salzman -- Distinguished Fellow in the National Academies of Practice.

• Dr. Susan Parks was elected to the Board of the American Geriatrics Society (AGS). This is a national role and honor for Dr. Parks.
We Show Our Commitment to the Fight Against Alzheimer’s by Participating in the Annual Alzheimer’s walk at Citizen’s Bank
The Division of Palliative Care
Palliative Care Programs

Outpatient Palliative Care Consults

Multidisciplinary ALS Clinic

Specialist collaborations

Bereavement support group

Inpatient palliative care services

Coming soon!
- Collaboration across enterprise to expand partnerships and for patient services
- Palliative care consultation in subacute and long-term care settings
- Modeling for home-based palliative care services
Research and Education in Palliative Care

- Palliative care fellowship program
- Publications this year, including on:
  - ALS and advance care planning
  - LGBTQ+ Education for fellows
  - Grief and Bereavement Screening...among many others!
  - 7 posters at AAHPM; 2 posters at AGS
- Multiple grant applications underway as we continue building our research program
Division of Sports & Exercise Medicine
The Team: Drs. Close, Mallow (via Rehab), Marschilok, Okon, and Tingan

New Division Director!

Continued growth of clinical practice, education, scholarly work, and community investment

Continued close collaboration with our partners in rehab medicine, orthopedic surgery, PT/OT, and athletic training
Sports and Exercise Medicine - Clinical

• 834 Walnut St practice is thriving and growing

• Navy Yard practice has expanded

• New partnerships with Women's Health and Neurosurgery

• Dedicated MSK clinic within JeffHope

• Continued sports partnerships with the Phillies, Jefferson, Villanova, St. Joe's, University of the Arts.
• Expanded involvement in the Penn Relays.
• New involvement in USA Track and Field
Sports and Exercise Medicine - Education

- Wonderful Fellowship Match this year:
  - Dr. Aisha Bowan - OhioHealth/Grant Family Medicine
  - Dr. Chelsea Salas-Tam, MD (homegrown talent)

- Current Fellows are having a terrific year and already setting their sites on the future:
  - Dr. Greta Bires and Dr. Michael Bozzi both actively in the job hunt

- With the support of the DS&EM the department continues to succeed in the sports medicine match
  - Dr. Jake Schutzman- PCSM Fellowship Crozer (in addition to Dr. Chelsea Salas-Tam)
Sports and Exercise Medicine - Scholarly work

• Continued academic excellence in collaboration with our educational partners

• Peer-reviewed pubs: 11
• Conference presentations: 39
• Other presentations: 13
• Chapters: 4
• Grants: 1
Jefferson FAB Center for Complex Care

- For Adolescents & Beyond
Meet Katie Orr - Our First FAB Nurse!

Katie will work alongside Dr. Stephens and Karin Roseman, LCSW to provide care coordination and support to our complex patients.

Katie is mom to three kids including twins one of whom, Charlotte, has Down syndrome as well as a younger daughter. Having her daughter with Down syndrome is one of the things that led her to become a nurse and she is excited to be joining the team at Jefferson.
We started our PDDC grant!

New grant award from the Pennsylvania Developmental Disabilities Council


Four family medicine residency programs, including our own!

- Hire persons with disabilities to develop & deliver the program
- Reach over 90 Family Medicine residents across Jefferson
Grant Kickoff With Subject Matter Experts
Jefferson Center for Supportive Healthcare
Our vision is a healthcare system that works for everyone!
Innovative Clinical care, research, and policy development

Co-Directors:
Lara Weinstein, MD, MPH Dr.PH & Erin L. Kelly, PhD

Supporting people with mental illness and substance use disorders in accessing the healthcare they need to achieve their own health and recovery goals
Center for Supportive Healthcare: Clinical programs

- Project HOME Health Services FQHC
- Pathways to Housing PA Integrated Care Clinic
- JFMA MOUD clinic
- Clinical Addiction Medicine Fellowship
Center for Supportive Healthcare: Research and Policy programs

- T32 Jeff MAP Fellowship
- Pew Foundation: Mapping the Opioid Crisis in Philadelphia
- MOUD clinic evaluation
- MOUD 2.0 Algorithm Measurement based care approach in Primary Care
Center for Supportive Healthcare: 2022-2023 Publications and Presentations

Presentations:
• Jaffee, G., Proddutur, S., Chertok, J., Caplan, I., Kelly, E.L., & Zimmerman, H. (2022, April). How to build your own Medication for Opioid Use Disorder (MOUD) Clinic...From scratch! Oral presentation at Society for Teachers of Family Medicine Annual Spring Conference. Indianapolis, IN.

Publications
Medical Student Education
Medical Student Education Updates

UME Leadership in Family Medicine

- Marisyl de la Cruz - Vice Chair of Education
- Other continuing leadership roles
  - Barbara Cymring - Phase 3 Family Medicine Pathway and Director and Family Medicine Interest Group (FMIG) Advisor
  - Gregory Jaffe - co-director for Scholarly Inquiry: Population Health Research
  - Cindy Cheng - Associate Director for Scholarly Inquiry: Clinical & Translational Research

JeffMD Faculty

- 10 clinical skills small group leaders
- 4 skill observation and reflection group leaders
- 8 Scholarly Inquiry project mentors
- 5 case-based learning facilitators
Clerkship Evaluations 2022-23 2nd Quarter

How would you rate this clerkship experience? (N=129)

- Excellent: 60%
- Good: 33%
- Fair: 6%
- Poor: 1%

Regardless of my future career, this clerkship positively affected my perspective of this field (N=129)

- Strongly Agree: 80
- Agree: 40
- Neutral: 10
- Disagree: 0
- Strongly Disagree: 0

Frequency
Percent

[Graph showing frequency and percent distribution]
Clerkship Evaluations 2022-23 2\textsuperscript{nd} Quarter

I received valuable teaching on patient care by attendings (N=129)

- Strongly Agree
- Agree
- Neutral
- Disagree

I received valuable teaching on patient care by residents (N=117)

- Strongly Agree
- Agree
- Neutral
- Disagree
Medical Student Education by the Numbers

264 completed Family Medicine clerkship

168 fourth year students who took a course/elective in our department

34 in PSAP

26 in the Urban Underserved Program

48 students working with DFCM researchers
  • 10 Scholarly Inquiry
  • 6 MD research elective
  • 30 volunteer/other research
  • 2 capstone (MPH)
A pipeline to the future of family medicine

35 students in the Family Medicine Interest Group (FMIG)
   Stay tuned for ways to help increase FM interest among students

18 in the FMIG mentoring program last year
   Working on this year’s mentor-mentee pairs
   Thanks to all the faculty who volunteered their time!

22 in FM Pathway graduate this year
   Match Day is March 17th!
The 2023 STFM Medical Student Education Conference: 1/26-29/23 in New Orleans, LA
Curricular Recommendations for a National Family Medicine Subinternship: A Qualitative Analysis From Multiple Stakeholders

Maria Syl D. de la Cruz, MD; Tomoko Seirerji, MD, MS; Sarah E. Stumber, MD, MPH; Dolapo Babatola, MD; Alexander W. Chessman, MD

BACKGROUND AND OBJECTIVES: The 2011 Alliance for Clinical Education panel recommended the development of a specialty-specific curriculum for all subinternships (sub-I). A 2019 CERA survey found that 38% of family medicine clerkship directors agreed that a standardized curriculum would be helpful. The goal of this study was to explore attitudes and preferences regarding a national family medicine sub-I curriculum among a broad set of stakeholders.

METHODS: Focus groups were conducted with medical students, residents, residency faculty, and undergraduate medical education faculty at the 2020 STFM Conference on Medical Student Education. Focus groups were transcribed, and a qualitative analysis was conducted with participants’ responses about the benefits and characteristics of a family medicine sub-I, recommendations for core sub-I skills/objectives, likelihood of using a national curriculum, and preferred student and program evaluation methods.

RESULTS: There were four focus groups with a total of 24 participants. The following main themes emerged: the family medicine sub-I has distinctive characteristics from other sub-IIs and provides unique benefits for students and residency programs, a standardized curriculum should allow for adaptability and flexibility, and the sub-I evaluation for the students and program should be specific and experience-focused. These themes were classified into specific subthemes.

CONCLUSIONS: The stakeholder emphasis on themes of relevance, adaptability, and the development of a national family medicine sub-I curriculum imply that a standardized curriculum for the sub-I rotation is needed. In previous studies, residents and faculty identified the sub-I as one of the most important rotations to prepare a student for internal medicine and pediatrics, respectively. The Society of Teachers of Family Medicine (STFM) has developed multiple iterations of a National Clerkship Curriculum—a renewable, web-based, peer-reviewed resource for the third-year core clerkship—but there is not yet a national standard for the sub-I rotation.

Medical Student Education in Pediatrics, and the Association of Pediatric Program Directors developed sub-I guidelines for internal medicine and pediatrics, respectively. The Society of Teachers of Family Medicine (STFM) has developed multiple iterations of a National Clerkship Curriculum—a renewable, web-based, peer-reviewed resource for the third-year core clerkship—but there is not yet a national standard for the sub-I rotation.

In previous studies, residents and faculty identified the sub-I as one of the most important rotations to prepare a student for internal medicine and pediatrics, respectively. Specifically, the family medicine sub-I would prepare students to be interns by fostering progressive responsibility for patient care. More research is needed to understand the benefits and characteristics of the family medicine sub-I curriculum.
Residency Education
JEFFERSON FAMILY MEDICINE
2022-2023 residency advances

- Creation of 4-year MPH Residency Program
- Integration of POCUS curriculum into resident conference
- Expanded Areas of Concentration for PGY2 and PGY3

- Full day experiences at Wyss Wellness Center
- Dedicated Stephen Klein/Project Home experiences for PGY1

- Jefferson FM Program Director Collaborative
- International academic exchange with Rome

Two new residency faculty:
Dr. Jaja Jarra
Dr. Ivel Morales
PGY3—Where are they going?

Natalie: Community Health Centers of Burlington, VT  
Hannah: FAB Center fellow (TJU)  
Catherine: Research fellow (TJU)  
Yael: Outpatient community practice  
Tiff: POCUS fellow (Penn)

Amy: Exploring FQHC opportunities  
David: Exploring hospitalist/fellowship opportunities  
Chelsea: Sports fellow (TJU)  
Jake: Sports fellow (Crozer)  
Kate: Community Health Fellowship at Harbor-UCLA
Residency Program: Recruitment

- Applications received - 1025: 403 (US schools)
- Total # of US medical schools - 163 (42 U.S. states)
- Total # of interviews - 139 completed (all virtual)
- URM % selected interviewed - 40 / 139 (29%)

MATCH DAY: MARCH 17TH!!!
Congrats and Thank you!!!

• Thank you to our retiring chiefs: Kate and Hannah

• And congrats to our new chiefs: Rachel and Kelly
Jefferson Center for Interprofessional Practice and Education (JCIPE)
Jefferson Center for Interprofessional Practice and Education (JCIPE) Update

- JCIPE continues to be a national leader under the leadership of Co-Directors Brooke Salzman MD and Amber King PharmD.

- In the Jefferson New Student Survey, students identify the “opportunity to learn about, from and with students in other healthcare professions” among the top 10 reasons why they chose to attend Jefferson.

- With 16% ranking interprofessional education as their first, second, or third top reason to attend Jefferson!
What does JCIPE do?

• **Health Mentors Program** includes >1,600 students per year from 12 different health professions, partnering student teams with volunteers in the community with chronic illness.

• **TeamSAFE, Introductory:** Team Simulation and Fearlessness Education, adapted from TeamSTEPPS, reaches >1,200 students per year from 11 different health professions to teach communication and teamwork skills.
JCIPE Programs

• Jefferson Student Interprofessional Complex Care Collaborative (formerly known as Student Hotspotting) pairs small teams of interprofessional students with patients with complex health and social needs, with 15 Jefferson teams

• Team Care Planning: ~300 students participate in simulations of a family meeting or discharge planning meeting

• Interprofessional Palliative Care Program: 40 students, DCFM Palliative Care Fellows serve as faculty facilitators!
JCIPE Programs

• Virtual Reality Simulation Education
  • AVIT (Alzheimer’s Virtual Interprofessional Training) - piloted at The Hill with Dr. Snyderman
  • ESHP (Enhancing Services for Homeless Populations)

• ECHO (Extension for Community Healthcare Outcomes)
  • ECHO MOUD: Partnered with Project Home
  • ECHO Integrated Behavioral Health: 80 attendants from across 12 clinical sites and 10 different health professions

• Community Voices
  • New monthly series featuring conversations with community members about their lived experience facing issues such as addiction, racism, homelessness, etc. and their interactions with the healthcare system
JCIPE

• Josiah Macy Jr Foundation Grant: *Learning to Practice Collaboratively for the Benefit of Patients with Complex Care Needs*, Co-PIs Brooke Salzman, MD and Tracey Earland, PhD, OTR/L, 2020-2023

• Awarded the *Creativity of Practice and Education Award* for the 3C’s: Complex Care Curriculum team, National Academies of Practice, Transforming Interprofessional Healthcare, 2022
Community Medicine
# DFCM Contributions to Community Plan

<table>
<thead>
<tr>
<th>Access to Care</th>
<th>Care Navigation</th>
<th>MH &amp; SUD Care</th>
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</thead>
<tbody>
<tr>
<td>Wyss Center</td>
<td>JFMA Care Mgt nurses &amp; Social Workers</td>
<td>Integrated Beh Health Psych e-consults pilot</td>
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<tr>
<td>FAB Center</td>
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<tr>
<td>Project HOME</td>
<td>Community Resource Directory (JeffHOPE) &amp; TJUH Find Help platform</td>
<td>MOUD clinic for JFMA patients</td>
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<tr>
<td>Pathways to Housing &amp; Hub of Hope</td>
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<tr>
<td>JFMA</td>
<td><strong>Chronic Disease Care &amp; Prevention</strong></td>
<td>Expansion of MOUD to additional training sites</td>
</tr>
<tr>
<td>JeffHOPE shelter clinics</td>
<td>JFMA Pop Health outreach</td>
<td>ECHO learning groups (IBH, MOUD)</td>
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<tr>
<td>Refugee Health</td>
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<tr>
<td>Community Engagement</td>
<td>Lung, Colorectal Cervical, Breast cancer screening</td>
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<tr>
<td>students (health fairs), faculty service</td>
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SKMC rural Physician Shortage Area Program (PSAP)

• PSAP 2023 = 13 new doctors for rural America
• 13 students accepted for the coming year
• Newly redesigned 4\textsuperscript{th} year community preceptorship elective approved by SKMC, includes 3 rural primary care sites
• Invited commentary in \textit{Academic Medicine}
• Featured as a model program on \textit{Rural Health Innovation Hub} and \textit{Rural Monitor}

• Brianna Kunes (PSAP ’23) -- Student Family Medicine Primary Care Research Award by the North American Primary Care Research Group (NAPCRG) for her work with Allison Casola
• Elizabeth Klingensmith (PSAP ’24) -- PAFP Research Day Award on Rural Primary Care recruiting incentives
JeffHOPE

• >2000 annual encounters at 5 care sites
• New Women’s Clinic at Prevention Point
• First annual Directors’ leadership retreat
• Jose Medina -- new assistant faculty advisor
• Shout out to Jeff Fam Med resident volunteers, Rich Faulkner, Courtney and Mary in Finance
Jefferson Center for Refugee and Immigrant Health: Wyss Wellness Center

By the numbers...since opening 4/2021

- Individuals seen: 2559
- Total visits: >4000
- # Languages represented: 40
- Uninsured + medicaid rate: 63%
- # SDOH screens: 393
- COVID vaccines provided: 6500+
- More than 50% of the Afghan refugees who resettled in Philadelphia came to the Wyss Wellness Center

Plans to expand our reach...stay tuned

More than just numbers

- Onsite services include:
  - Wills Eye free clinic 2x/month
  - Jefferson mobile mammogram van
  - Fresh fruit and vegetable distribution
  - Learning site for medical, nursing, PT/OT and pharmacy students and residents
  - Legal services starting this month

- Working with local agencies to serve the Ukrainian refugees and Latin American asylees from Texas
- Participated in application for Philadelphia to be named as an official Welcoming City (only 18 in the US)
Research Organization Structure

- **Randa Sifri, MD**: Director of Research, Research Fellowship Director
- **Amy Cunningham, PhD, MPH**: Associate Director of Research, Postdoctoral Fellowship in Health Services Research Director
- **Chris Chambers, MD**: Director of Clinical Trials
- **Lara Weinstein, DrPH, MPH**: Director, JeffMAP Postdoctoral Fellowship
- **Erin Kelly, PhD**: Co-Director, JeffMAP Postdoctoral Fellowship
- **Allison Casola, PhD, MPH, MCHES**: Assistant Director of Research & Senior Research Investigator
- **Richard Faulkner**: Research Administrative Assistant/Coordinator
- **Mary Duffin**: Business Manager
- **Emmy Stup**: Department Administrator

**Research Support**

- Melanie Chalfin, MPH
- Ava Darby, BS
- Kaitlyn Davis, MS, MPH (trials)
- William Leach, (trials, project manager)
- Brooke Mauriello, MPH
- Dhruvi Shah, MPH
Clinical Trials

- **HPV Vaccine and COVID Vaccine Concomitant Administration Trial (Merck/ Moderna)**
  - Phase 3 study of concomitant administration of Merck’s HPV vaccine and Moderna’s COVID vaccine in boys and girls 9-11 who are naïve to both vaccines
  - Projected to close Spring 2023

- Working in conjunction with SKCC to establish a cancer screening learning community and a primary care research network

- **Lean Into the SOAR Initiative (Exact Sciences)**
  - Pilot study of patient and provider receptivity both to a Multi-Cancer Early Detection blood test and to participation in an MCED clinical trial
  - Surveys to providers at Jefferson & phone interviews with patients

- **Screening Of All comeRs (SOAR) (Exact Sciences)**
  - Trial to assess Multi-Cancer Early Detection screening test
  - Temporarily on pause from the sponsor

- Exploring other options to continue to contribute to Multi-Cancer Early Detection research
Increasing Number of Publications Per Year

Papers Published, 2015-2022

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Papers Published</th>
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<tbody>
<tr>
<td>2015</td>
<td>32</td>
</tr>
<tr>
<td>2016</td>
<td>16</td>
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<td>2017</td>
<td>19</td>
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<td>2018</td>
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<td>2019</td>
<td>37</td>
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<tr>
<td>2020</td>
<td>40</td>
</tr>
<tr>
<td>2021</td>
<td>55</td>
</tr>
<tr>
<td>2022</td>
<td>58</td>
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</tbody>
</table>
What areas did we publish in 2022?

<table>
<thead>
<tr>
<th>Topic Area</th>
<th>Number of Papers</th>
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<tbody>
<tr>
<td>Women, Maternal, and Child Health</td>
<td>10</td>
</tr>
<tr>
<td>Primary Care Practice Management and Team Wellness</td>
<td>8</td>
</tr>
<tr>
<td>Palliative Care</td>
<td>7</td>
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<tr>
<td>Addiction and Serious Mental Illness</td>
<td>7</td>
</tr>
<tr>
<td>Medical Education and Training</td>
<td>6</td>
</tr>
<tr>
<td>Health Services Research</td>
<td>4</td>
</tr>
<tr>
<td>Academic Medicine, Faculty Development and Retention</td>
<td>4</td>
</tr>
<tr>
<td>Refugee and Global Health</td>
<td>3</td>
</tr>
<tr>
<td>Geriatrics</td>
<td>2</td>
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<tr>
<td>Integrated Community Health</td>
<td>2</td>
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<tr>
<td>Chronic Care Management</td>
<td>2</td>
</tr>
<tr>
<td>Disability Health and Complex Care</td>
<td>2</td>
</tr>
<tr>
<td>Cancer Screening and Prevention</td>
<td>1</td>
</tr>
<tr>
<td>Sports Medicine</td>
<td>0</td>
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</table>

**Total = 58**

*Of the N=58 papers published, n=21 had a trainee (student, resident, fellow) co-author (36%)*
2022 Student and Trainee Accomplishments

Brianna Kunes, MS-4 & PSAP Student
NAPCRG Student Family Medicine Primary Care Research Award

Trainees by the Numbers

Overall, N=98 students or residents reached out to us. Trainees that completed work with us:

- Student Research
  - N=15 Scholarly Inquiry
  - N=20 Volunteer Research
  - N=21 MS-4 Elective
  - N=8 Summer Research

- Resident research
  - N=2 Elective or Volunteer
Where did we present our work in 2022?

**N=48 oral and poster presentations in 2022, across k=19 conferences**

- AAFP Women's Health Livestream
- Annual Assembly of Hospice and Palliative Care
- American Geriatric Society Annual Meeting
- American College of Osteopathic Family Physicians Annual Convention
- American Medical Society of Sports Medicine Annual Meeting
- American Society of Preventive Oncology
- Academy Health
- AOA Research Symposium
- Bureau of Health Workforce All Grantee & Stakeholder Meeting
- College of Physicians of Philadelphia Public Health and Preventive Medicine Poster Session
- Jefferson Department of Medicine Disparities Summit
- European Congress of Qualitative Inquiry
- Kempe Center International Virtual Conference: A Call to Action to Change Child Welfare
- North American Primary Care Research Group Annual Meeting
- Pennsylvania Academy of Family Physicians Research Day
- Society for Social Work and Research Conference
- Society of Teachers of Family Medicine
  - Annual Meeting
  - Conference on Medical Student Education
- Teaching Prevention 2022: Pivot with Purpose to Build a Healthier Future

Of the N=48 presentations, n=20 had a trainee (student, resident, fellow) co-author (42%)
Research and Postdoctoral Fellowships

- **Research Fellowship**
  - 40th year anniversary of the research fellowship; celebrated with a fundraiser in October, 2022

- **Leadership:**
  - Randa Sifri, MD: Fellowship Director
  - Amy Cunningham, PhD, MPH: Associate Fellowship Director
  - Howard Rabinowitz, MD: Fellowship Faculty

- **Current Fellow:**
  - Alexa Waters, MD
    - Focus Area: Chronic Disease Management and Prevention

- **JeffMAP Postdoctoral T32 Fellowship**
  - HRSA-funded

- **Leadership:**
  - Lara Weinstein, DrPH, MPH
  - Erin Kelly, PhD

- **Current Fellows:**
  - Jacelyn Biondo, PhD, BC-DMT, LPC
  - Meghan Gannon, PhD, MSPH
  - Rachel Ludeke, PhD, LMSW
  - Shane’ Gill, PhD, LPC
SAVE THE DATE!

2023 DFCM Poster Session
Wednesday May 17, 2023
7:45 am - 9:15 am
Hamilton Hall 4\textsuperscript{th} Floor
Social Justice, Inclusion, and Health Equity

DFCM_Diversity@jefferson.edu

WE STAND UNITED
AGAINST RACISM AND INJUSTICE
# Diversity, Inclusion & Social Justice

## About Us

The Department of Family and Community Medicine (DFCM) was founded with a mission to provide the best possible care to our patients and to train an outstanding new generation of family physicians.

To do this successfully, it fundamentally requires dismantling the biases and injustices impacting our teams, patients, and the communities we serve. Health cannot be optimized while members of our community are impacted by racism and discrimination. Addressing these, intentionally and explicitly, must be and is part of our mission.

As a department, we have committed to continuous self-development and action towards justice, anti-racism, and health equity.

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## Family & Community Medicine

<table>
<thead>
<tr>
<th>Chair's Message</th>
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<tbody>
<tr>
<td>Diversity, Inclusion &amp; Social Justice</td>
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<tr>
<td>Residency</td>
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<tr>
<td>Fellowship Programs</td>
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<td>Medical Student Education</td>
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<td>Research</td>
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<tr>
<td>Division of Geriatric Medicine &amp; Palliative Care</td>
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<tr>
<td>Community Health</td>
<td>+</td>
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<tr>
<td>Faculty &amp; Leadership</td>
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Krys E. Foster, MD, MPH, FAAFP; Director, DFCM Diversity, Inclusion & Social Justice
Objectives

- To increase awareness of racism, diversity and inclusion issues affecting our Department, patient populations and community

- To identify and prioritize interventions that can increase Department responsiveness to racism, diversity and inclusion issues

- To develop a strategy and actionable steps that assures a Departmental commitment to social justice, health equity, diversity and inclusion
Lecture Series for Social Justice, Inclusion and Health Equity!

• Kicked off informally via Grand Rounds lectures
• Formal launch of series in Spring 2022!
  • June 2022 - “Why Can’t We Have Nice Things? Race & Pharmaceuticals in the US” (Dr. Utibe Essien)

Upcoming Speaker for SJIHE Lecture Series:
Dr. Marcella Nunez-Smith, MD, MHS

May 10, 2023
8:00AM - 9:30AM
SAVE THE DATE!!!
Other Updates

• Krys Foster and Danielle Snyderman continue efforts as a part of STFM’s Antiracism Collaborative

• SJIHE “IDEA” (Inclusion, Diversity, Equity and Antiracism) Library AVAILABLE! Please check out titles and consider contributing :)  

• Continued Departmental learnings and workshops, including several invited speakers on topics related to DEIA.

• Continued efforts in Diversity and Recruitment in Hiring and inclusion of guest lecturers.
50 years of bounding forward

- Enterprise strategic alignment
- Leveraging value-based payment mechanisms
- Advancing health equity
- Interprofessional care
- Interprofessional education
- Bringing expertise to scale
- University level structures for health systems research and education