



## CAFAM Educational Research Alliance (CERA)

Date: March 2022

Individuals Submitting This Report: Heather Paladine, MD, CERA director; Melissa Abuel, CMP

### 1. Status of Program (please type an X before appropriate option):

- Green:** On target with achieving objectives/timeline.
- Yellow:** Caution - program moving forward but key areas need attention.
- Red:** Not hitting multiple targets.

### 2. REQUESTED ACTIONS FOR STFM Board: (i.e., feedback requested on areas of concern, additional fiscal note/resources requested, etc.): Approve new SMART Objectives as outlined in section 4

### 3. Program Goals

CERA Vision  
excellent family medicine educational research

CERA Mission

Provide a centralized infrastructure to:

- Produce rigorous and generalizable medical education research
- Facilitate collaboration among medical education researchers
- Provide training and mentorship in educational research methods

### 4. Program Smart Objectives

Note: previous SMART objectives from 2018–2020 were all achieved as reported in the February 2021 board report. These included: 1) CERA will receive at least 100 survey applications (received 206 over this timeframe) 2) CERA participants will generate at least 30 presentations and/or peer-reviewed papers (69 presentations completed and 43 papers published over this period) 3) CERA will develop 1-2 new projects/collaborations in order to expand the breadth of our impact on family medicine scholarship (collaborated with AAFP on resident and student surveys; collaborated with ABFM on another survey).

SMART Objective	2021	2020	2019
<b>New metric:</b> CERA will receive at least 75 survey submissions annually	84	94	91
<b>New metric:</b> CERA participants will generate at least 25 presentations and/or peer-reviewed papers annually*	33	33	30
<b>New metric:</b> The student and resident surveys will have a response rate of at least 10%	R= 5.32%	R= 5.66% S= 2.94%	

R=resident; S=student

\* CERA sees presentations and publications as an outside validation on the quality of research of these projects.

- 5. Attendance/program participation (3-year history, if applicable):** Expect maintenance or some growth in attendance for activities. Steady decline in attendance is an indication that issues need to be addressed.

	(2021)	(2020)	(2019)
<b>#of Accepted Research Team Proposals*</b>	(5 surveys) 24	(6 surveys) 27	(6 surveys) 28

\*This is an internal marker of research quality by the survey directors.

- 6. Program's budgeted income/expenses & actual income/expenses:**  
(Net profit accounts for direct staff salaries, not indirect)

	(2021)	(2020)	(2019)
<b>Projected Income</b>	\$12,000 NAPCRG, ADFM, AFMRD, STFM contrib.	\$12,000 NAPCRG, ADFM, AFMRD, STFM contrib.	\$7,500 NAPCRG, ADFM, AFMRD, STFM contrib.
<b>Projected Expenses</b>	\$10,000	\$22,800	\$23,500
<b>Projected NET PROFIT</b>	\$2,000	-10,800	-16,000
<b>Actual Income</b>	\$16,000 (ADFM, AFMRD, NAPCRG, ABFM)	\$12,000 (ADFM, AFMRD, NAPCRG)	\$7,500 (ADFM, AFMRD, NAPCRG)
<b>Actual Expenses</b>	\$14,221	\$16,907	\$26,325
<b>Total NET PROFIT</b>	\$1,779	-\$4,907	-\$18,825

**Comments on trend or overall financial performance:**

- CAFM organizations increased their annual support from \$2500 to \$4000 in 2020.
- 2020 expenses were lower due to no travel expenses with all virtual meetings
- 2021 income was higher due to the new contribution from ABFM. Expenses were lower due to no travel expenses with all virtual meetings

## BACKGROUND:

### 7. Program Description:

The CAFM Educational Research Alliance (CERA) is a framework to focus and support medical education research. CERA is a joint project of the Council of Academic Family Medicine (CAFM) which consists of STFM, ADFM, NAPCRG, and AFMRD. Expenses are shared by member organizations, and STFM provides administrative support for the initiative.

CERA conducts 5-6 surveys per year, generally of various subsets of CAFM membership. Each survey includes questions submitted by CAFM members on multiple subjects, as well as a set of recurring questions to provide data for historical comparisons. CERA added resident and student surveys in 2020.

Researchers receive their individual survey results, plus the demographic and organizational information. Individuals who submit survey questions are given 3 months to analyze the data before it is released to the general membership. The expectation is that investigators will write and submit a paper within those 3 months. Data is collected through STFM and housed at STFM under the oversight of CERA.

### 8. Accomplishments to Date:

- CERA updated the demographics questions. These new questions will be implemented with the 2021 surveys.
- The first CERA fellow is finishing up her fellowship and a new fellow has been selected to start in May 2022.
- In collaboration with AAFP, CERA completed the first student and resident surveys in 2020. The CERA chair currently serves as director over these surveys.

- The Robert Graham Center now has a representative on the CERA Steering Committee.
- CERA had its 100<sup>th</sup> published paper in 2020. To date, CERA research has resulted in 136 published papers and 165 presentations.
- Starting in 2021, the ABFM Foundation agreed to financially support CERA with \$4,000 per year and will continue to have a representative on the steering committee.
- CERA has had three directors: Chip Mainous, PhD (founding director); Dean Seehusen, MD; and now Heather Paladine, MD.

**9. Areas we are watching or working to address:**

- The first student and resident surveys received very low response rates. The steering committee added an incentive for these surveys however this change had no impact on the response rate. The 2022 surveys will be conducted at the AAFP National Conference to attempt to increase the response rate.
- The steering committee will have a new mentorship director starting in May 2022. The mentorship director and CERA director will work on a plan for improving the quantity of CERA mentors and the quality of their mentorship. A relevant SMART objective on mentorship will be added in 2023.
- CERA and our family medicine organizations have not identified effective, alternative surveying solutions for individuals not accepted for inclusion in a CERA study, particularly those of sufficient quality but not accepted due to space constraints.

**10. Estimated staff time required to administer program:**

	(2021)	(2020)	(2019)
High=>30 days per year	X	X	X
Mod=8-29 days per year			
Low= <8 days per year			

**11. Fits STFM Strategic Priorities:** The Board will use our strategic priorities as the measure by which we determine what is of highest importance to STFM.

High	Med	Low	Prior Assessment	Priority	Outcomes
X			2021: High 2020: High 2019: High	<b>PROFESSIONAL AND LEADERSHIP DEVT</b>	STFM will be the leader in training, leadership development, and creation of knowledge that improves family medicine education and teaching.
<b>Comments:</b> Research teams are receiving mentorship in research methods and surveys, survey directors get experience with running a large research survey, CERA fellow receives professional development					
X			2021: High 2020: High 2019: High	<b>SCHOLARSHIP</b>	STFM will enhance the capacity and quality of family medicine scholarship.
<b>Comments:</b> CERA provides a venue for educational scholarship that was not present before. CERA has brought educational scholarship to a higher level					
		X	2021: Med 2020: Med 2019: Med	<b>WORKFORCE RECRUITMENT AND RETENTION</b>	STFM will inspire individuals to become exemplary, fulfilled, and compassionate family medicine teachers.
<b>Comments:</b>					
		X	2021: Low 2020: Low	<b>ANTIRACISM AND HEALTH EQUITY</b>	STFM will drive antiracism initiatives and the health equity of communities through medical education.

<b>Comments:</b> CERA has had surveys focused on these topics that have the potential to improve medical student and resident curricula in these areas. The steering committee is discussing more ways to incorporate this systematically.				
	X		<b>2021: Med 2020: Med 2019: Low</b>	<b>ADVOCACY</b>  STFM will champion family medicine education, research, and workforce recruitment and retention.
<b>Comments:</b> Individual survey results are providing important data to improve resident, student and faculty experiences. i.e. the survey on parental leave was cited when ABFM changed their parental leave policy for residents.				

**12. Alignment with STFM Mission and Values: (Add X to designate your evaluation.)**

High	Med	Low	Prior Assessment	Mission: Advancing family medicine to improve health through a community of teachers and scholars. Core Values: Diversity, Excellence, Integrity, Nurturing, Openness, Relationships
X			<b>2021: High 2020: High 2019: High</b>	

**13. Impact on Field: (Add X to designate your evaluation.)**

High	Med	Low	Prior Assessment	Level to which the program is, or has the potential to, contribute meaningfully to advancing FM.
X			<b>2021: High 2020: High 2019: High</b>	

**14. Program Differentiation: (Add X to designate your evaluation.)**

High	Med	Low	Prior Assessment	This indicates the level to which the program offers something particularly unique to the discipline that we can do better than anyone else. Is another organization providing this service through another program?
X			<b>2021: High 2020: High 2019: High</b>	

**15. Member Need: (Add X to designate your evaluation.)**

High	Med	Low	Prior Assessment	In general, the more specialized the audience is that a program addresses, the greater the need for the program to address a high priority for the discipline or be a strong revenue generator.
X			<b>2021: High 2020: High 2019: High</b>	

**Project Leaders:**

**Current CERA Steering Committee Members:**

- Heather Paladine, MD, MPH, CERA director
- Kelly Everard, PhD, mentor director
- Aimee Eden, PhD, MPH, ABFM representative
- Amanda Kost, MD, clerkship director survey director
- Diane Harper, MD, NAPCRG representative
- Tiffany Ho, MD, MPH, general membership survey director
- Wade Rankin, DO, CAQSM, program director survey director
- Irfan Asif, MD, MSPH, ADFM representative
- Kelsie Kelly, MD, AFMRD representative
- Yalda Jabbarpour, MD, Robert Graham Center representative

**STFM staff:**

- Melissa Abuel, CMP, project liaison
- Ray Biggs, IT support