Q&A: Clinical Faculty Advisory Committee (CFAC) at the medical school

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The Clinical Faculty Advisory Committee (CFAC) at the Alpert Medical School represents the clinical and clinician educator faculty, serving as their “voice” and liaison with the medical school community and leadership. CFAC is distinct from the Medical Faculty Executive Committee (MFEC), which represents medical faculty with academic appointments.

In the following Q&A, LINDA NICI, MD, current CFAC chair, and vice chair CATHERINE A. CUMMINGS, MD, articulate the group’s mission and the multi-faceted roles it provides its constituency.

Dr. Nici is Professor of Medicine, Clinician Educator, at the Alpert Medical School and Chief of the Pulmonary and Critical Care Section of the Providence VA Medical Center. Dr. Cummings is Clinical Associate Professor of Emergency Medicine at the Alpert Medical School and is affiliated with Miriam and Rhode Island hospitals.

Q: What is the role of the Clinical Faculty Advisory Committee (CFAC) and its relationship with clinical faculty and Brown?

A: The major roles of the CFAC are to be the “voice” of the clinical faculty within the Warren Alpert Medical School of Brown University and to advocate on their behalf to the Dean of Medicine and Biology.

The CFAC also has the responsibility of informing the clinical faculty of the benefits of their clinical appointment as well as programs that enhance their clinical knowledge and skills. The CFAC ensures a successful collaboration with the medical school to achieve its educational mission.

Another important role of the CFAC is to solicit nominees from the clinical departments for the Dean’s Excellence in Teaching Awards. These awards are given to clinical faculty for their exemplary teaching in pre-clinical courses, core clerkships and clinical electives. These faculty members are recognized for their exceptional teaching and mentoring as lecturers, small-group leaders, and as hospital- and office-based preceptors.

Q. Can you discuss the role that clinical faculty provide in the education of medical students, residents and fellows at the Alpert Medical School?

A. The clinical experience is arguably the heart of a medical student's education. It is the opportunity to apply the “book” knowledge and learn the art of medicine. Medical students’ career choices are often determined by their clinical experience, and therefore cultivating and nurturing talented clinical faculty should be one of our highest priorities.

Clinical physicians are measured and compensated according to productivity. However, we do this work for our altruistic sense of obligation to the profession and to “give back” to those who did this for us.

Q. Would you describe the educational and teaching opportunities available for clinical faculty on the medical school campus, in the hospitals and especially in the outpatient setting in physicians’ offices?

A. There are many diverse teaching opportunities for clinical faculty. Some are listed below. For a complete listing, see the CFAC website at: brown.edu/about/administration/biomed/clinical-faculty-advisory-committee.

There are core clerkships opportunities in years 3-4 by discipline (required clerkships in internal medicine, pediatrics, family medicine, surgery, obstetrics and gynecology, psychiatry, and neurology). In addition, there are numerous opportunities to precept students on elective specialty clerkships.

The Doctoring Program is a required course for all first- and second-year medical students. The students spend one half-day a week in an office working alongside a physician-mentor who guides their every step. The students observe and practice crucial clinical skills, such as medical interviewing, history taking, physical examination, and professional conduct that they first learned in small-group settings at the medical school.
The Medicine in Action Program (MIAP) is an early professional development opportunity for Program in Liberal Medical Education (PLME) undergraduate students and Brown medical students. It offers students the chance to spend some time (generally for one-day visits or for a morning/afternoon) observing Brown medical faculty and alumni in a variety of health care settings.

The Whole Patient Program is for PLME first-year undergraduate students. It emphasizes the significance of the doctor-patient relationship and attempts to demonstrate to students the importance of treating the patient’s illness as opposed to treating the disease. A guest physician presents along with his/her invited guest patient. Recognizing the limited medical knowledge of the undergraduate students, the program does not attempt to address topics from a clinical perspective. Rather, it stress the role of empathetic understanding in the practice of medicine.

The Whole Physician Program focuses on life as a medical student and as a physician through panel presentations.

The Women in Medicine & Science Mentoring Program promotes connections between women medical students early in their educational and professional studies, with women physicians based at Brown-affiliated hospitals and in the community. Through informal meetings with their mentors, students can learn about a medical specialty, a field of healthcare delivery, or a specific career choice from the perspective of a woman physician. This is also an opportunity for students to consider ways of shaping their career goals in medicine. Faculty who are interested in teaching medical students in years 3 and 4 should indicate their interest to the Associate Dean for Medical Education (Allan Tunkel, MD, PhD: alan_tunkel@brown.edu), who can discuss specific opportunities with individual faculty to teach medical students in the inpatient and outpatient settings.

The Office of Diversity and Multicultural Affairs Mentoring Program seeks to pair under-represented in medicine (URM) minority medical students with URM faculty to help ensure the success of under-represented students by increasing a sense of community and support for students. Mentors are expected to meet with the mentees twice during the semester (minimally once in person) and to provide guidance on an as-needed basis. Mentors are also invited to participate in community building events hosted by the Office of Diversity and Multicultural Affairs.

The Outpatient Precepting of Medical Students & Residents in the Family Care Center Teaching Practice is a program that allows faculty members to provide one-on-one and small-group teaching to family medicine residents and medical students who are caring for a broad range of healthcare issues in a model family medicine teaching center in an underserved multi-ethnic community. Faculty can be scheduled for half days most days of the week or on select evenings.

Q. How does one become clinical teaching faculty: who is eligible and what is the process?
A. All details regarding appointments and promotions can be found on the CFAC website at: brown.edu/about/administration/biomed/clinical-faculty-advisory-committee/criteria-appointmentpromotion-0

Q. What do you see as the biggest challenges in recruiting clinical faculty?
A. The biggest challenge is support. Our world is filled with “unfunded” mandates and overwhelming requirements on physicians’ time and resources. Teaching takes time and costs money in terms of productivity. Clinical physicians are measured and compensated according to productivity. However, we do this work for our altruistic sense of obligation to the profession and to “give back” to those who did this for us. Members of the CFAC are committed to nurturing and supporting the clinical faculty and by doing so, allowing them to share their knowledge and craft with the next generation of clinicians.

Q. What is the time commitment for a physician?
A. As you can see from the above descriptions, the time commitment is quite varied.

Q. How do patients react to students?
A. The overwhelming response of patients is positive. They often see this as their opportunity to teach and have an impact on the development of a great physician.