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COGME Questionnaire:

Creating a National Strategic Plan for Graduate Medical Education (GME)

Response from the Council of Medical Specialty Societies (CMSS)

Please provide responses from you and/or your organization below to the following questions. Please feel free to use a separate sheet if necessary:

1. Do you think there would be value in creating a national strategic plan for graduate medical education? Would you support the development of such an initiative?

The Council of Medical Specialty Societies (CMSS) believes that there is value in creating a national strategic plan for GME that is consistent with and supports an evolving healthcare system in the US that incorporates the national quality strategy: enhancing the experience of care for patients, improving outcomes of care for populations, and reducing waste and the per capita costs of care in the system.

The CMSS would support the development of a national strategic plan for GME as long as this plan will:

- Serve as a call-to-action
- Clarify the issues and concerns of both the medical community and public related to GME
- Serve as a blueprint for the future of GME funding that would include mechanisms to ensure transparency and accountability
- Provide a case for continued public support for GME at current levels at a minimum
- Recognize that the needs and challenges of medical and surgical specialties are unique and differ widely, and that collaboration with medical societies is necessary to achieve the full spectrum of workforce to meet the nation's needs
- Create a culture of performance improvement in the delivery of graduate medical education
- 2. Which entity or entities should oversee the development of a strategic plan for GME?

Oversight should include representation from physician organizations that actually provide residency and fellowship training, such as the Organization of Program Director Associations. Recognizing that GME is not a one-size-fits-all undertaking, the divergent needs of medical and surgical specialties should be represented through the Council of Medical Specialty Societies (CMSS). COGME, with a modification in its authorized scope and with additional resources, should be considered as the national advisory body as envisioned by the IOM.

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3. Who (individuals or organizations) would you recommend to be included on a strategic planning committee for the development of a national strategic plan for GME?

In the fulfillment professional self-regulation, physician organizations should lead the process of developing a strategic plan for the physician workforce. CMSS, already listed, should be included as the organization that can represent the interests and perspectives of specialty societies. Consideration should be given to including stakeholders in the health care industry that gain from a well-trained physician workforce, including government, hospitals, health care systems, health maintenance organizations, private and public insurers, health information technology companies, patient and public representatives, and others. The strategic planning committee must also include public members.

We note that the American Hospital Association is on the list, and maintain that the Children's Hospital Association should also be included because of their unique perspective and funding. In addition to representatives from those entities listed above, CMSS further suggests that the Department of Veterans' Affairs, and the Department of Defense be included so that military residency programs will be represented. There should also be representation from HRSA because of the many supported through the Public Health Services Act (e.g. Title VII, Section 747 – Primary Care Education). Finally, CMSS maintains that it is critical to include representation from those who actually are in the front-lines of GME, namely program directors. This group is broadly represented by the Organization of Program Director Associations (OPDA).

4. Please provide any comments or feedback on the draft mission and vision statements and guiding principles (please see accompanying document) proposed for the GME system:

Please see attached.

5. Additional comments for COGME to consider:

In parallel with the foundational principles of CMSS, should COGME oversee the nation's strategic GME plan, it would need to convene all GME stakeholders around critical GME issues and serve as their common voice. The challenge for COGME in the development of this proposal will be to bring to the table those organizations that have already developed or are in the process of developing a plan for the future of GME, and are invested in their own work



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and/or may feel that this initiative is unnecessary. It is imperative to hear not only from those who provide or are involved in the GME enterprise, but also those who benefit from a well-trained and qualified physician workforce.

Many may consider the time and money invested in the IOM Report, "Graduate Medical Education that Meets the Nation's Health Needs," and question the need for another report. COGME will need to develop a strong rationale for the creation of another report or plan.

COGME will also need to ensure that the proposal addresses what needs to be done, from the outset, to ensure that this strategic plan has the ability, "traction" and funding to be implemented.