

Society of General Internal Medicine
Geriatrics Task Force Charge
May 4, 2007

The charge to the Geriatrics Task Force describes activities to be accomplished before the 2009 annual SGIM meeting. Objectives for which no outside funding will be sought will be accomplished. A subset of objectives for which funding will be sought will be accomplished, depending on funding.

Career / Leadership Development at the Annual Meeting

- Connect SGIM members whose work intersects with areas relevant to geriatrics with ideas, funding, potential collaborators, and senior advisors in geriatrics. Examples include chronic illness management, patient safety, quality improvement, or pay for performance. Work will be accomplished in collaboration with the annual program committee. Examples of types of activities include:
 - Expand the number and range of presentations and events listed in the “Geriatrics Track” in the program. Possible methods:
 - Add a check box “Would like identified as part of geriatrics track” to submission form.
 - Review submissions to identify relevant presentations and workshops.
 - Identify relevant posters and include them and their authors in the Distinguished Professor of Geriatrics (DPG) poster walk rounds.
 - Sponsor a reception or one-on-one mentorship pairings for senior geriatrics academicians to interact with junior faculty.
 - Panel discussion of geriatrics academicians on a focused topic (e.g., funding, career development awards, organizations)
- *Seek continuation funding for the Distinguished Professor of Geriatrics Program (DPG, previously called the Visiting Professor Program in Geriatrics and Gerontology) beyond 2008. This highly successful program enhances the visibility of geriatrics as a career focus to SGIM members, fostering collaboration and career paths related to the care of older adults. Program features include the plenary lecture, moderated oral abstract session, poster walk rounds, participation in the Geriatrics Interest Group session and numerous small-group and one-on-one interactions with SGIM members by physicians with distinction in geriatrics research, clinical care, or education.*

Promote the measurement and evaluation of geriatric competencies for medical students and residents to increase knowledge of and interest in geriatrics among trainees

- Send up to two representatives to the John A. Hartford-AAMC conference on geriatric competencies and their measurement during the summer of 2007. Internally funded.

- Increase geriatrics content of ABIM and “Shelf” exams.

(NOTE: Through past efforts by SGIM members there is now a permanent geriatrics position on the In-Training Exam {ITE} planning committee. The GTF has no new objectives related to the ITE.)

- *ABIM certifying exam: Through previous work by SGIM members, the ABIM adopted a process for defining the content of items related to more than one subspecialty and is now re-defining the blueprint for the exams.*
 - *The GTF will update information on whether the ABIM has adopted previous recommendations to increase the number and type of geriatrics items on certifying and re-certifying exams, and to report subscores.*
 - *Funding may be sought for further projects with the ABIM, depending on findings regarding progress and interest at ABIM to refine the geriatrics content of the exams.*
- *ABIM Self-Examination Program (SEP) and Practice Improvement Modules (PIMs): Assess current use and utility of geriatrics-related SEP and PIMs by practitioners and residency programs. Based on this assessment, explore opportunities to use SEP and PIMs at SGIM meetings to enhance geriatrics skills and behaviors by members.*
- *Examine feasibility and need for interventions to modify the geriatrics content of the Internal Medicine “Shelf” Exam. If opportunity and needs to modify the Shelf exam are identified, seek funding to support personnel to review and modify items and report geriatrics subscores. Develop a relationship with the Clerkship Directors in Internal Medicine (CDIM) to identify and complement ongoing work in defining the content for the “Shelf” exam.*
- *Submit to Council by end calendar 2008 a paper reviewing and recommending the most appropriate (feasible, accurate, and relevant to the care of older patients) performance measures, by learner level. Seek funding to support a systematic review suitable for submission for peer-reviewed publication. If unfunded, produce a qualitative review and disseminate through several mechanisms (e.g., SGIM Website, SGIM Forum, regional leaders).*

Facilitate geriatrics clinical care and teaching among SGIM members.

- *Submit to Council by end calendar 2008 a review of non-paper resources for geriatrics education among health professionals. Focus on resources that have been applied outside their source context, and those with evidence of effectiveness. Seek funding to support a systematic review suitable for submission for peer-reviewed publication. If unfunded, produce a qualitative review and disseminate through several mechanisms (e.g., SGIM Website, SGIM Forum, regional leaders).*

- Sponsor at least one precourse or workshop at 2009 National SGIM meeting to increase clinical and/or teaching skills of SGIM members related to the care of older patients. Examples of specific content include: a) application of geriatrics PIM in teaching programs, b) teaching geriatrics on inpatient rounds or continuity clinics, and c) applying existing teaching tools or lessons from Reynolds or other programs in teaching. Attempt to join with at least one other professional organization (e.g., AGS, SHM) in preparing the workshop or precourse.

Promote clinical care, teaching, and research related to overlapping responsibilities of hospitalists and ambulatory care physicians related to the care of older patients.

- *Conduct a needs assessment in clinical reform and teaching among hospitalists and outpatient physicians. Scope may range from small working group (if unfunded) to multi-site focus group(s) (if funded).*
- Prepare a working paper describing “best practices” for care innovations and their implementation through literature review and/or contact with organizations or projects to improve transitional care between inpatient and outpatient settings. Disseminate through SGIM venues (e.g., SGIM Forum, Website, meetings).

Complement the work of other groups through regular communication and joint projects when feasible

- Identify liaisons and regular as well as informal communication channels between GTF and other relevant organizations or working groups within those organizations, including:
 - Society of Hospital Medicine
 - American Geriatrics Society
 - Alliance of Academic Internal Medicine (including Association of Specialty Professors)
 - Association of Chiefs of General Internal Medicine
 - American Association of Medical Colleges
 - American Medical Association
 - American College of Physicians

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