

## PRESIDENT'S COLUMN

**SGIM Council Winter Retreat: A Focus on This Year and Years Beyond**

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*...the creation of the [SGIM National Commission on Physician Payment] gives us another chance to help provide constructive, ethical, and practical solutions.*



It was tough work. To be sure the venue was suitable, your SGIM Council had its winter retreat at the site of our upcoming spring annual meeting at the Swan and Dolphin Hotels at Walt Disney World in Orlando, Florida. We can report that the accommodations and grounds are wonderful and yet don't distract from SGIM business. You will want to check for yourself at our annual meeting, May 9-12, 2012, and add your own contributions to the SGIM legacy. In the meanwhile, I would like to share with you the work the Council did there on your behalf.

Over the two days we met, we reviewed a range of issues—both small and stable and large and challenging—from details of each committee's objectives, plans, and achievements to the overall mission of SGIM. There is not room here to share the details of our review of the many activities of our grassroots-powered organization other than to state unequivocally that SGIM's biggest asset is the engagement and work of its members through committees, task forces, interest groups, and other mechanisms that make so many great things happen. You need only look at the other articles in this issue of *SGIM Forum*, or attend our annual and regional meetings, to see the overwhelming evidence. However, in this column, I want to focus on two major undertakings for this year that were reaffirmed at the retreat and then shift the conversation to our mission.

The first of the two major undertakings for my year as president is the creation of a state-of-the-art website as the platform for information; resources; interactions among our

committees, task forces, interest groups, and special-purpose groups; access to our publications; and connecting us all together. In conjunction with building this new website, as I indicated in an earlier column, we are updating the "branding" of SGIM. The new website and branding will be a great improvement in function for our members and will enhance our communications and advocacy. The SGIM central office is working very hard with an outside vendor and with SGIM members to transform our face to the world and our infrastructure for our organization.

The second major project of this year is the creation of the SGIM National Commission on Physician Payment. In my first column as president, I pointed out that during the rise of capitation in managed care in the 1990s, SGIM missed an opportunity to offer its leadership in developing payment models that support our dual responsibilities to our individual patients and to society. As we enter another period of transformation of payment for and organization of care, the creation of the SGIM Commission gives us another chance to help provide constructive, ethical, and practical solutions. The Commission now has a chair, former SGIM president and former Robert Wood Johnson Foundation president Steve Schroeder, MD, and an honorary co-chair former Senator Bill Frist, MD. Ten additional members, who span general internal medicine, other specialties, and health care stakeholders, are now being signed on. We have been extremely fortunate to get very substantial support from the Robert Wood Johnson Foundation and also support from

the California HealthCare Foundation, which will cover expenses and outreach for the Commission. We anticipate its first meetings soon after the beginning of 2012, a report within the year, and a concerted communication strategy, aided by Burness Communications. SGIM Council is excited about this work and its potential impact on health care, and we are excited about this opportunity for SGIM to lead. I am particularly grateful to Steve Schroeder, who as chair has brought his characteristic leadership, energy, and wisdom to this effort.

Finally, I would like to focus on our long-term aspirations as reviewed and articulated by Council at the retreat. Below you will find a mission statement that arose from this work. We started with our current version, carefully considered the changes in our environment and in SGIM over the past several years since we last visited the statement, and revised it as seemed warranted. It is not a radically different document, but it does reflect the evolution of the health care system and our Society in recent years. I hope as you read it, you will both feel pride to be part of an organization that can authentically claim this work and that you will feel the strong tug of engagement to help further our goals. Here is your SGIM:

**Vision and Values**

*SGIM was founded in 1978 as the Society for Research and Education in Primary Care Internal Medicine (SREPCIM) with funding from the Robert Wood Johnson Foundation and had 178 attendees at its inaugural meeting. In 1988, SREPCIM be-*

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came the Society of General Internal Medicine, SGIM, and today has more than 3,000 members.

### Who are we?

SGIM is a diverse community of physician and other health professional educators, researchers and clinicians, and students and trainees, all of whom are committed to the SGIM mission.

### What is our mission?

To lead excellence, change, and innovation in clinical care, education, and research in general internal medicine to achieve health care delivery that:

- Is comprehensive, technologically advanced, and individualized.
- Instills trust within a culture of respect.
- Is efficient in the use of time, people, and resources.
- Is organized and financed to achieve optimal health outcomes.
- Maximizes equity.
- Continually learns and adapts.

### What do we value?

- Excellence in creative and innovative approaches to clinical care, teaching, and research
- Collegial support and mentorship
- Partnerships and interdisciplinary collaboration
- Social responsibility and equity in health and health care
- Diversity

### What are our goals?

To identify, foster, study, translate, and disseminate innovation in health care delivery. To do this we will:

- Create dynamic learning communities that promote innovation in clinical practice, education, and research.
- Leverage clinical, educational, and research innovations within and outside of the organization.
- Evaluate innovation in health care delivery and medical education.
- Develop and disseminate novel research methods.
- Operationalize technologies to improve the experiences of patients and the health care team with a focus on improving health outcomes.
- Advocate for improvements in the education, research, and clinical practice arenas and for policies that support such improvements.
- Create a multi-modal communications campaign for internal and external audiences.
- Support our committees, taskforces, and interest groups to undertake initiatives aligned with these activities.
- Forge alliances with other organizations using our knowledge, experience, and energy to support shared goals.
- Seek to eliminate disparities in health care access and outcomes.
- Promote healthy and sustainable work environments for physicians and other health professionals.

To enhance the value of SGIM membership and support member career development. To do this we will:

- Disseminate knowledge and grow community through the annual meeting, the Journal of

General Internal Medicine, SGIM Forum, regional meetings, interest groups, workshops, our Website, and other efforts.

- Develop career development programs and products, including activities in medical education, clinical leadership, and mentoring.
- Identify and celebrate outstanding achievement through awards and other venues.
- Create and sustain forums for members to exchange ideas and work collaboratively.
- Provide opportunities for engagement and leadership for all interested members.
- Increase the visibility and status of primary care and General Internal Medicine.

### We Work with Others to Increase Our Impact

We actively seek alliances with others—societies or individuals—with whom we can partner to improve the quality of patient care, medical education, and research. We believe advocacy on public policy issues is stronger if we collaborate with colleagues in other organizations. We support initiatives by the government and foundations that promote access to care, education of patients and trainees, constructive relationships between doctors and their patients, and medical research. We are committed to sharing our intellectual capital and experience with general internists wherever they practice. We aim to increase the visibility and status of primary care and General Internal Medicine.

SGIM