SGIM’s Strategic Priorities for 2015-2016: Work Environment, Reimbursement, and Value
Marshall H. Chin, MD, MPH

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Over the past few months, SGIM Council has engaged in a strategic planning process to ensure that SGIM effectively addresses internal and external threats and opportunities. This planning included a lively brainstorming session with leaders of different SGIM committees and task forces at the 2015 Annual Meeting in Toronto and reaching out to members for their views through GIM Connect. It is a tricky time for SGIM. The policy and economic environments are rapidly shifting, creating a fertile setting for innovation. Traditional general internal medicine (GIM) is under siege financially while policymakers and administrators look to it for solutions to improve systems of care and patient outcomes. A thoughtful long-standing member of SGIM recently told me that we as a society have to be careful not to do too much navel-gazing. I think he meant that we have a justifiably proud history as an organization but that we cannot view ourselves in isolation from the outside world. We must be informed by creative ideas as we devise solutions to the complicated challenges facing us.

In this spirit, Council has identified three priorities for 2015-2016: 1) to improve the work environment for primary care providers, 2) to ensure that reimbursement systems fairly compensate primary care providers for their work, and 3) to make SGIM more attractive to recruit and retain members. These priorities have been given to the various SGIM committees and task forces to help guide their planning for the upcoming year and their budget requests. I will now describe the three priorities in more detail.

**Improve the Work Environment for Primary Care Providers**

Work environment rose to the top of the priority list because it is essential to the survival of GIM. Physicians who work in inefficient clinics that are neither patient-centered nor designed to enable physicians to be as effective as possible are physicians at high risk for being frustrated, dissatisfied with their work lives, and burnt out. Students who rotate and are taught in poorly organized clinics and residents who care for patients in overburdened practices are trainees who may seek career paths other than primary care. The core of GIM—caring for the whole patient over time in a humanistic way—is a beautiful ideal but one that becomes significantly less attractive in a difficult work environment.

Improving work environment will require the talents and expertise of all of SGIM’s members. What care transformations will lead to more satisfied physicians providing better care for patients and populations? What is the physician’s role in team-based care? What ways of training students and residents in the clinic create a better work environment and improved patient care? How can we increase physicians’ sense of autonomy so the system supports their provision of outstanding care rather than overwhelming them and giving them little control over their daily schedules and activities? Are there ways to improve our communication and messaging around primary care and the work experience? How can we tap into physicians’ innate professionalism and deep moral values and nurture the sense of mission, caring, and social justice that can make our jobs so satisfying and rewarding?

**Ensure That Reimbursement Systems Fairly Compensate Primary Care**

Related to improving work environment is fairly compensating primary care providers for their work. For years, SGIM’s Health Policy and Clinical Practice committees have engaged in a variety of education and advocacy activities designed to reimburse primary care providers fairly for their work. Current methodologies and mechanisms to measure the value of primary care work and calculate payments do not accurately measure the full range of complex cognitive, coordinating, analytical, and management functions of the primary care physician who cares for complicated patients with multiple medical, behavioral, and social comorbidities.

Underpayment is a major problem for several reasons. Fewer resources are available to transform primary care systems to be more patient centered and to support physicians in their clinical practice. Less funding leads to lower prioritization of primary care by medical center leadership. Major inequities in salary mean many debt-ridden medical students will shy away from primary care and enter more lucrative specialties. Thus, ensuring fair reimbursement continued on page 2
systems is a fundamental building block for GIM’s long-term viability.

**Make SGIM More Attractive to Recruit and Retain Members**
Core to any organization is providing outstanding value so people join it, remain in it, and participate actively. What programs can provide excellent career development opportunities? How can we effectively market SGIM both internally and externally? Are we innovating, and are we at the cutting edge of the field? Are we advocating for and working on the most critical issues of our members?

SGIM is a dynamic organization. The importance of areas such as mentoring and networking is timeless. However, the context of today differs from that of yesterday, and the tools for networking and collaboration have also expanded. Are we meeting members’ needs through our current tools and programming? SGIM’s recent membership survey will help illuminate this area.

**Define Our Identity as a Society**
At the Toronto brainstorming session about strategic priorities, the top-rated issue was not a specific area but the wish for a clear and concise mission and vision for SGIM today. Who is SGIM? Council will devote almost half of its June 2015 retreat to discussing this area, with the other half scheduled for reviewing the proposed plans of each committee and task force for the next year and allocating the budget. I will report on the discussion about “Who is SGIM?” in a future Forum column.

I think we are in a good position as a society. The three strategic priorities around work environment, reimbursement, and the value of SGIM are major challenges yet ones in which we have significant expertise, experience, and prior work to build upon. Care transformation and reform of health care financing are critical issues for the entire health care system now, and our efforts as a society line up well with the ultimate goals of improving patient health. SGIM is at the forefront of health care reform, and our contributions will make a difference for GIM and our patients.