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President's Message: CalAAEM's Academic Task Force...The First Steps

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President's Message

CalAAEM's Academic Task Force...The First Steps

On May 18, 2006 the first meeting CalAAEM's Academic Task Force (ATF) convened at the SAEM annual meeting in San Francisco.

Representatives from each of the academic programs were contacted and invited. Programs from UCI, USC, UCSF, UCD and Stanford were represented at the table.

In the period leading up to this meeting, CalAAEM through our President-Elect Rob Rodriguez of UCSF and board member Stuart Swadron of USC had contacted individuals that we felt would commit to an effort to elevate the *California Journal of Emergency Medicine (CalJEM)* to a fully indexed journal representing the California's academic community, its accomplishments and CalAAEM.

As president of CalAAEM, I had the opportunity to open the meeting and frame the discussion of our proposal and document the first steps of the initial objective we had proposed for the ATF. We were able to conjure up an image of California's prodigious academic achievements disseminated through the journal, leading to practical improvements in the quality of emergency medical care in California's emergency departments. We could see CalJEM contributing to the growth of professionalism, more activism and increased awareness of a broader array of issues impacting EM.

It was clear to us that the volume and quality of work being done in California far exceeded the capacity of EM's first-tier journals to publish worthy materials. We felt that this situation would become more acute over time and that the need for another quality journal to disseminate important information into the practicing community of physicians in California would increase.

It was also clear that the California emergency medicine community could benefit from a journal not only dedicated to publishing its academic work product but one that put the practice of Emergency Medicine into a more sophisticated context that included discussions of public policy, business practices and standard of care related issues. We felt that through a case study series and other published materials that could distill the collective academic fund of knowledge into practical information that would be of value to providers and patients alike.

We also foresaw a section of the journal dedicated to residents and medical students and their work. We believe this section would create opportunity to showcase early-stage accomplishments, let students and residents see materials being produced by their peers and offer first opportunities to publish, understand the process of contributing to the scientific literature and generate positive experiences.

We felt the journal had tremendous potential as a communication tool within the EM community at large and to be a nexus of shared insight and open communication between communities of physicians in California and the western United States. We discussed the alternate pathway of open-access submissions to currently indexed publications and possible funding schemes for this route as an intermediate step that might be useful to reaching our goal.

Our intention is to accelerate the designation of the journal to an indexed journal by any and all viable pathways. We agreed to continue to explore all possible options.

Intrinsic to such an ambition is a commitment to improve the practice of EM in all EDs across the state. Academic medicine, through the journal, would be capable of disseminating new diagnostic and therapeutic strategies to non-affiliated EPs. All physicians would have easier access to leading-edge strategies and work in better synergy with the academic centers. Such an effort would shape the evolution of the standard of care in California and demonstrate the collective and individual academic might of the participating programs. We see California as a force of substantial mass, capable of being a world leader in academic accomplishment and worthy of its own journal of those efforts.

It was our belief that such a task that could be accomplished by identifying individuals at each academic program who are in a position to recognize quality research within their own institutions that would otherwise be unpublished, and bring such materials to the fore to be published in *CalJEM*.

We also wanted to identify residents and medical students who would work with their faculty advisors and together, across program boundaries. Such involvement would connect CalAAEM to the future leaders of EM and engender broader participation in the journal project. We think such activities will help residents understand the nature of EM practice and the role of their professional societies in their professional development and the preservation of their livelihoods.

This group once assembled and formally seated would make up the Academic Task Force.

At this point we identified the steps that are necessary to move forward.

- We have already arranged for improvements in the print quality of the journal and redesigned the cover to give a more professional look, as you see with this month's inaugural four-color edition.
- We are in the process of increasing administrative support for the editorial staff, an activity that will be funded by CalAAEM.
- We believe that with improved quality the journal will attract more advertising revenue and can become self-sustaining. Ultimately we believe we can generate enough revenue to support more dedicated and compensated time for the editorial staff. We are seeking an editor for our case review series.
- We seek to increase the number of reviewers to support our effort to expand the size of the journal and add heft to our peer review process.
- We discussed an improved email based notification system that would inform subscribers of articles and

subjects of interest to them, offering links to abstracts and/or the full articles.

- We have initiated an effort to improve the production process of the journal and are investing in new publishing software and in people dedicated to the journal business.
- We discussed increasing awareness that residents and medical students can have free membership to CalAAEM. We hope to develop lists of resident email addresses and expand our contact base and distribution list for the CalAAEM newsletter and *CaJEM*.
- We discussed the role of the ATF in the development of the LLSA abstract series and CME related to those study materials.
- What is needed now is some feedback to firm up the membership of the ATF so that an email distribution list can be created. This will be the vehicle to communicate with each other and plan and execute this transformation.
- I am asking for people currently on this email distribution to coordinate with others at their programs to present your choice to sit on this committee. We are seeking a faculty member and a resident member. The committee will communicate via email and use telephone conferences as necessary. Those interested in participating should communicate with me. Those not interested can pass the request on to others they believe might be interested and have them contact me or inform me of their lack of interest.
- We think that these ATF representatives will be able to screen research at their institutions, encourage faculty to submit to *CaJEM*, participate in the peer review of materials coming from other programs. At the same time these reps should be able coordinate the involvement of interested parties at their institution in *CaJEM* and CalAAEM activities including what we hope will be state wide involvement in the LLSA project.
- We are considering medical student and resident involvement at all levels.

Long range we see residents involved in CalAAEM during the training phase of their career, developing a lifelong commitment to education and participation in the professional organizations that are working to maintain the viability and dynamism of emergency medicine as a specialty and something that represents a community of colleagues with common purpose.

The first meeting was a very positive experience. I felt genuine interest in moving this project forward. It was clear that this piece of the newly defined mission of CalAAEM, including the efforts to align the organization with academic medicine and to use that alliance to improve emergency medical care statewide through a coordinated effort, can succeed. We seek to identify the

people who want to be a part of that and have an interest in enrolling others in that effort.

Thank you for your consideration and participation in this project.

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