Family Medicine Physician

2023-2024 MICHIGAN HOSA EVENT MODIFICATIONS FOR REGIONAL CONFERENCES!



future health professionals

New for 2023 – 2024

An Interview Verification Form has been added and it is now a required upload to the HOSA Digital Upload System. These guidelines are written for ILC. States may modify events or have different event processes and deadlines. Be sure to check with your Local/State Advisor (or state website) to determine how the event is implemented for the regional/area or state conference. Editorial updates have been made. These guidelines are specifically for Michigan HOSA members in preparation for the regional leadership conferences. For more information about regionals, please visit <u>www.michiganhosa.org/regionals</u>.

Event Summary

The Family Medicine Physician competitive event provides HOSA members with the opportunity to gain knowledge about this career path through interviews, research, and a peer presentation. Competitors will conduct interviews to learn more about family medicine, and then will share their finding with their peers through a presentation. Competitors will present their peer presentation to a panel of judges, showcasing what they have learned. This event aims to inspire members to learn about the dynamic field of Family Medicine and ultimately and ultimately ensure patients from every community, everywhere have access to a family physician. All competitors will advance to the second round.

Sponsorship

This competitive event is sponsored by the American Academy of Family Physicians (AAFP)



Dress Code

Competitors shall wear official HOSA uniform or proper business attire. Bonus points will be awarded for <u>proper dress</u>. At the regional level, bonus points will not be added for proper dress, but judges/event managers will make note if competitors are NOT in proper dress which could result in overall point deduction.

Competitors Must Provide:

- Photo ID
- □ Index cards or electronic notecards (optional)
- □ Any battery operated presentation aids/tools needed to support the presentation
- Two #2 lead pencils (not mechanical) with eraser for evaluation

General Rules

1. Competitors in this event must be active members of HOSA and in good standing.

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- 2. Eligible Divisions: Secondary and Postsecondary/Collegiate divisions are eligible to compete in this event.
- 3. Competitors must be familiar with and adhere to the "<u>General Rules and Regulations of the HOSA</u> <u>Competitive Events Program (GRR).</u>"
 - A. Per the <u>GRRs</u> and <u>Appendix H</u>, HOSA members may request accommodation in any competitive event. To learn the definition of an accommodation, please read <u>Appendix H</u>. To request accommodation for the International Leadership Conference, <u>submit the request form here</u> by May 15 at midnight EST.
 - B. To request accommodation for any regional/area or state level conferences, submit the request form <u>here</u> by your state published deadline. Accommodations must first be done at state in order to be considered for ILC.

All competitors shall report to the site of the event at the time designated for each round of competition. At ILC, competitor's <u>photo ID</u> must be presented prior to ALL competition rounds. Event managers will be checking photo IDs at the regional level as well. A digital copy of a photo is appropriate (i.e., picture on phone of photo ID from school portal).

Learning Objectives

- 4. Through interviews and research (explained more below in #7-8), competitors will be able to identify:
 - a. Demand and Occupational Outlook
 - Items to consider:
 - Outline the need for Family Medicine Physicians and why now is the time to consider this career path.
 - b. Span of Medical Education and Career Options
 - Items to consider:
 - Outline the training requirements and options from Medical School to Family Medicine Residency, Dual Degrees, Fellowships, and Certificates of Added Qualification.
 - Explain the various practice settings, practice emphasis, and subspecialties available in Family Medicine.
 - c. Work, Lifestyle, and Financial Implications
 - Items to consider:
 - Explain the benefits and challenges of being a Family Medicine Physician, with whom family physicians work, the role of family physicians on the health care team, the family physician lifestyle, and work-life balance highlights.
 - Understand the cost of medical education, average salaries and signing bonuses, and scholarship and loan forgiveness opportunities in family medicine.
 - d. Importance of Primary Care and Preventive Medicine to Achieve Health Equity
 - Items to consider:
 - Summarize the role Family Medicine Physicians play in primary care and preventive health and the impact family medicine has on patients, families, and communities.
 - Describe the role of family physicians as advocates for their patients and communities, including how family physicians are leaders in addressing health disparities and health equity.
 - e. The WHY The Story of the Family Medicine Interviewee
 - Items to consider:
 - Tell the story of WHY the Family Medicine Physician chose this career path. What is their passion? Why do they do what they do? What is the physician's journey and why did they get started?

- Ask questions to elicit emotion and undercover the reasons behind why the interviewed physician is excited and passionate about their career choice.
- f. Is Family Medicine Right for Me?
 - Items to consider:
 - Explain why this career could be a good fit for the competitor what did they learn that intrigues them and that has piqued their interest? It is also acceptable to explain why this career might not be a fit after the competitor has taken part in this event.

Official References

- 5. The recommended reading/viewing for this event can be accessed at <u>this summary landing page:</u>
 - a. Additionally, competitors may find it helpful to view <u>Start With Why</u> (especially to address Learning Objective "e".)

Research and Interview

- 6. Competitors will research the Learning Objectives outlined in item #5 by using the official references for this event (item #6). If needed, competitors may also use resources of their own choosing for research.
- 7. Competitors will also investigate the Learning Objectives outlined in item #5 by conducting at least two (2) interviews with two (2) separate people to further understand the Learning Objectives.

The Interviews

- 8. The interviews must be conducted with two (2) people from the following categories:
 - a. Medical Student interested in Family Medicine
 - b. Family Medicine Physician
 - i. One interview MUST be with a Family Medicine Physician (retired Family Medicine Physician acceptable)
 - ii. The second interview can be with a Medical Student interested in Family Medicine OR with another Family Medicine Physician.
 - iii. Both interviews may NOT be with Medical Students.
 - iv. The competitor may choose to conduct more than two (2) interviews to help address the Learning Objectives, but only two are required.
- 9. During the interviews, competitors should ask questions that will help them understand the topics listed in the Learning Objectives item #5.
- 10. During the interview with the Family Medicine Physician in particular, it will be important to focus on Learning Objective "e" in order to tell the story of the interviewee. It will be vital to understand WHY the interviewed physician chose this career path try to craft questions that will elicit a powerful and emotional response from the interviewee. Telling an effective "story" of the physician will help the audience (the peers and the judges) understand and relate to the content in a more meaningful way. Refer to the "Start With Why" video listed in the resources (item #6) for more context.
- 11. Competitors and interviewees can determine the length of interview and format of the interview (in-person, via Zoom, via telephone, etc.).
- 12. If competitors do not know, or do not have connections to help set up the interviews, competitors should complete the <u>online form HERE</u> to be connected to a Physician and Medical Student identified by the American Academy of Family Physicians (AAFP). Competitors should contact AAFP as soon as possible in the competition-prep process to ensure there is ample time to be connected to the professionals. At least 4 weeks lead-time is recommended. Competitors may also use their connections through the health science classroom (local HOSA chapter advisors) or friends/family/community partners to find the Family Medicine Physician and Medical Student to interview.

Interview Verification Form

- 13. Once the interviewees have been identified, competitors must complete the Interview Verification Form found in these guidelines. The purpose of this form is to identify the people who have agreed to be interviewed as part of this HOSA Competitive Event.
- 14. The Interview Verification Form will be uploaded to the HOSA Digital Upload System.
- 15. The Interview Verification Form will NOT be pre-judged. Rather, event staff will check the list of those who have uploaded to the HOSA Digital Upload System for compliance.
- 16. Failure to upload the Interview Verification Form to the HOSA Digital Upload System by the deadline will result in a 15 point deduction taken in Tabulations.

REQUIRED Digital Uploads

The following item(s) **MUST** be uploaded to the HOSA Digital Upload System by May 15: For regionals, you must upload by your region's upload deadline listed on the website www.michiganhosa.org/regionals

a. Interview Verification Form – as one pdf file.

May 15 at midnight EST is the **final deadline** and there will be **NO EXCEPTIONS** to receipt of the required materials after the deadline.

- 17. Detailed instructions for uploading materials can be found at: <u>https://hosa.org/competitive-event-digital-uploads/</u>
- 18. State Leadership Conference (SLC) vs. HOSA's International Leadership Conference (ILC) State Leadership Conferences. It is the competitor's responsibility to check with their Local Advisor for all state-level processes used for competition as digital uploads may or may not be a requirement. For regionals, you must upload by your region's upload deadline listed on the website www.michiganhosa.org/regionals

International Leadership Conference.

- If a competitor uses the HOSA Digital Upload System as a requirement at the SLC, the competitor MUST upload an ADDITIONAL time for ILC by May 15.
- If the HOSA Digital Upload System is NOT used at the competitor's SLC, it is still the competitor's responsibility to upload the product for HOSA's ILC no later than May 15. Not using the HOSA Digital Upload System at a competitor's State Leadership Conference is not an exception to the rule.
- 19. The FINAL ILC digital upload deadline is May 15. We STRONGLY suggest not waiting until the last minute to upload online to avoid user-challenges with the system.

Peer-to-Peer Presentation

- 20. Competitors will create an educational and creative presentation "Who is a Family Medicine Physician?" that can be shared with their peers to educate others about this career path and to tell the story of the interviewed physician and/or medical student. The exact presentation title can be of the competitor's choosing.
- 21. The presentation will be a maximum of ten (10) minutes long.
- 22. The presentation for peers must effectively inform the audience about the learning objective topics outlined in item #5.
- 23. Competitors may present to any live audience of their peers their HOSA chapter, health science classroom, at a school assembly/meeting, etc. The presentation may be done virtually (i.e., over Zoom), but must be delivered live.

- 24. Competitors may use any presentation aids/tools/technology they wish Prezi, PowerPoint, Bulb, video clips, videos, photos, posters, handouts, etc. but the competitors must speak during the presentation and only use the aids to enhance the message they are trying to convey. In other words, competitors should not simply record something ahead of time and push "play" the presentation should be given live for the audience!
- 25. Competitors should be creative in how the content is presented to capture the attention of the audience and share the powerful story about the interviewed Family Medicine Physician and the learning objectives outlined. *If a competitor chooses to interview two Family Medicine Physicians, the stories of one or both can be incorporated into the presentation at the discretion of the competitor.*
- 26. The content can be organized and presented in any manner the competitor wishes potentially weaving in facts and data to the story, the why, and the emotional pieces of the learning objectives. The most compelling and unique ways of sharing the content will be most successful.

The Competitive Process - Presentation to Judges

- 27. The presentation given to the judges should be the same presentation that was given to the competitor's peers. Therefore, the presentation should cover the Learning Objectives from item #5.
- 28. Competitors will have ten (10) total minutes to present to the judges.
 - a. To begin the presentation for judges, the competitor should state:
 - i. who they interviewed
 - ii. when the interviews took place
 - iii. when and where the peer presentation was given

i.e.: I interviewed Dr. Theljewa Wilson at HOSA Family Health on March 1. I interviewed Emily Alvarez, Medical Student at University of Washington on March 2. I presented this content to my HOSA Chapter on April 3.

- b. This gives verification for judges of the interviews and peer-to-peer presentation. Note* Competitors only need to state items #30a in the presentation to judges. This information does not need to be included in the peer-to-peer presentation.
- c. The remaining time will be reserved for the actual presentation that was given to the competitor's peers not to exceed ten (10) total minutes for everything.
- 29. Competitors will report to the event site at their appointed time with any pre-made presentation aids/tools/technology to support their presentation. HOSA only provides one table. Any other equipment and presentation needs must be provided by the competitor.
- 30. Upon entering the competition room, competitors will have two (2) minutes to setup any presentation equipment/materials.
- 31. Competitors will NOT have access to electricity. Battery powered equipment (such as a laptop) is permitted. Internet connection is NOT provided but can be used if provided by the competitor via a Wi-Fi hotspot or other source.
- 32. Use of index card notes during the presentation are permitted. Electronic notecards (on a tablet, smart phone, laptop, etc.) are permitted, but may not be shown to the judges.
- 33. The timekeeper will announce when the two (2) minute setup time is complete; and when there is one (1) minute remaining in the presentation. The timekeeper will stop the presentation after ten (10) minutes and the competitor will be excused.

Final Scoring

36. In the event of a tie, a tiebreaker will be determined by the areas on the rating sheet section(s) with the highest point value in descending order.





FAMILY MEDICINE PHYSICIAN – Interview Verification Form

- 1. This form must be completed and uploaded online by the competitor to the HOSA Digital Upload System per the instructions above.
- 2. The purpose of this form is to identify the people who have agreed to be interviewed as part of this HOSA Competitive Event.
- 3. Both the competitor and interviewee will complete the applicable information below.
- 4. If a competitor completes more than the required two (2) interviews, they will make additional copies of this form as needed.

Compe	etitor Name:	State:	_ Chapter:
Intervi	iew #1		
	Name and title of interviewee:		
	Date of interview(s):		
	Practice/Clinic/Hospital Name and A	Address:	
	Email Address of interviewee:		
		AFP, including	g, you consent to receive post- g event evaluations and feedback. to engage further with the AAFP on
	Signature of Interviewee:		
	Please check this box if you do not	wish to be conta	cted by the AAFP.
Intervi	iew #2 Name and title of interviewee:		
	Date of interview(s):		
	Practice/Clinic/Hospital Name and A	Address:	
	Email Address of interviewee:		
		AFP, including	g, you consent to receive post- g event evaluations and feedback. to engage further with the AAFP on
	Signature of Interviewee:		

Please check this box if you do not wish to be contacted by the AAFP.

FAMILY MEDICINE PHYSICIAN – Judge's Rating Sheet

FAMILY MEDICINE PHYSICIAN – Judge's Rating Sheet Section # Division:SSPS/Collegiate Competitor # Judge's Signature						
A. Overview	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
1. Interviews and Peer-to-Peer Presentation Confirmed	Peer-to-Peer Presentation date; and two Interviewee names and dates; stated for judges at the start of the presentation.	N/A	N/A	N/A	Interviewees and/or Peer Presentation not confirmed.	
2. Live Presentation	Presentation for Peers and Judges is given live and not a recording. (Virtual live presentations over Zoom, for example, are acceptable)	N/A	N/A	N/A	Presentation did not incorporate a live component.	
B. Presentation Content	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
1. Overall understanding / coverage of Demand and Occupational Outlook	Exceptional presentation of the demand and outlook for the occupation. It is evident the competitor researched and understands this topic and why the time is now to consider this career path.	The presentation of occupational demand is mostly clear and is provided, but some details are missing.	The presentation is somewhat vague and does not clearly show an understanding of the demand and outlook of the occupation.	The presentation is unclear with little information provided on the demand and outlook of the occupation.	Presentation does not provide information regarding the demand and outlook of the occupation.	
2. Overall understanding / coverage of Span of Medical Education and Career Options	Presentation includes detailed information along with excellent descriptions of the medical education required and career options available as a Family Medicine Physician.	Information regarding medical education and career options were provided and described.	Presentation includes a short description of the medical education and career options, but there were gaps in the information provided.	The information provided in the presentation provided an incomplete description of the medical education and career options.	Presentation is unclear and does not provide information regarding medical education and career options.	
3. Overall understanding / coverage of Work, Lifestyle and Financial Implications	Presentation includes detailed information along with excellent descriptions of work, lifestyle, and financial implications of being a Family Medicine Physician.	Information regarding work, lifestyle, and financial implications were provided and described.	Presentation includes a short description of work, lifestyle, and financial implications, but there were gaps in the information provided.	The information provided in the presentation provided an incomplete description of work, lifestyle, and financial implications.	Presentation is unclear and does not provide information regarding work, lifestyle, and financial implications.	
4. Overall understanding / coverage of Importance of Primary Care and Preventive Medicine to Achieve Health Equity	The presentation does an excellent job of detailing the importance of primary care and preventive medicine in achieving health equity. It is explicitly clear how the Family Medicine Physician plays a vital role in this process.	Information is provided regarding primary care and preventive medicine and how the Family Medicine Physician plays a part in achieving health equity. More/stronger examples could have been used.	Presentation includes a short description of primary care and preventive medicine but there were gaps in the information provided and the role the Family Medicine Physician	The information provided in the presentation was incomplete in describing primary care, preventive medicine, health equity and the role of the Family Medicine Physician.	Presentation is unclear and does not provide information regarding primary care and preventive medicine and health equity.	

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plays in these items was unclear.

B. Presentation Content	Excellent 20 points	Good 15 points	Average 10 points	Fair 5 points	Poor 0 points	JUDGE SCORE
5. Telling a powerful story of WHY the Family Medicine Physician chose this career path	The presentation did an extraordinary job at telling the story of WHY the Family Medicine Physician chose this career path. Passion is evident through the story telling. The story evokes emotion, is highly impactful, and encourages a "call to action".	The presentation did a good job at telling the story of WHY the Family Medicine Physician chose this career path. There is some passion and emotion, but the message could have inspired the audience more.	The presentation told the story of WHY the Family Medicine Physician chose this career path, but it did not stand out or elicit much emotion. The presentation did not impact the audience to action.	The presentation needed more attention to detail and could have done a better job connecting to the audience. The WHY message was not clear and did not share the story of the Family Medicine Physician.	Presentation is unclear and does not provide information about the story or WHY of the interviewed Family Medicine Physician.	
6. Sharing "Is Family Medicine Right for Me?"	The competitor did an extraordinary job of sharing why the Family Medicine Career path would be a good fit (or not a good fit) for them. They explained with passion and in detail what intrigues them and what has piqued their interest. Or conversely, what they learned about why this career path wouldn't be a good fit for them.	The competitor did a good job of sharing why a career in Family Medicine would or would not be a good fit for them, but the descriptions don't stand out.	The competitor included a brief description of why a career in Family Medicine would or would not be a fit, but details and enthusiasm are lacking in the presentation.	The competitor included an incomplete description of why a career in Family Medicine would or would not be a fit. The message was confusing and lacked clear direction.	Presentation is unclear and does not provide information about how the competitor feels about a career as a Family Medicine Physician.	
B. Presentation Content	Excellent 15 points	Good 12 points	Average 8 points	Fair 5 points	Poor 0 points	JUDGE SCORE
7. Distinctive / Captivating / Unique	The competitor provided a highly creative, original, and imaginative presentation that was highly distinct. It stood out and was unique.	The presentation was unique and offered a fresh approach to the topic; however, it was missing the "wow" factor.	The presentation was adequately distinctive. Would like to see more creativity and innovation in the approach to the presentation.	The presentation was unoriginal and little imagination was included in the presentation.	No evidence of imagination or creativity was used in the presentation.	
C. Presentation Organization	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
1. Flow, Logic, and Transitions	There is evidence of practice and consistency of presentation flow and transitions.	There is evidence of practice and some consistency in presentation flow and transitions.	The presentation could benefit from a more consistent flow and transitions.	More practice is needed to achieve an authentic flow in the presentation.	The entire presentation is delivered with a lack of attention to flow and transitions.	

C. Presentation Organization	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
2. Opening	The competitor clearly establishes the occasion and purpose of the presentation, grabs the audience's attention, and makes the audience want to listen.	The competitor introduced the presentation adequately, including an attention getter and established the occasion and purpose of the presentation.	The competitor introduced the topic but did not clearly establish the occasion and/or purpose of the speech. Weak attention getter.	The competitor failed to introduce the presentation. Or the introduction was not useful in indicating what the presentation was about.	The competitor did not provide any kind of opening statement or action.	
3. Closing	The competitor prepares the audience for ending and ends memorably. They drew the presentation to a close with an effective memorable statement.	The competitor adequately concluded the presentation and ended with a closing statement. Clear ending but ends with little impact.	The competitor concluded the presentation in a disorganized fashion with cohesion.	Audience has no idea conclusion is coming. Competitor's closing message was unclear.	The competitor ended the presentation abruptly without any kind of conclusion.	
D. Presentation Materials	Excellent 20 points	Good 15 points	Average 10 points	Fair 5 points	Poor 0 points	JUDGE SCORE
1. Presentation Visual Aids / Tools / Technology	Visual aids, props, tools, and/or technology add value and relevance to the presentation and are not used as substitutes. They help to tell a story and offer a better understanding of the subject. Creativity is evident.	Visual aids, props, tools, and/or technology support the theme of the presentation and complement the overall message.	Most of the visual aids, props, tools and/or technology add some value to the presentation but could have supported the overall message more effectively.	The visual aids used offered minimal support or missed the opportunity to enhance the overall presentation.	No visual aids were used to complement the presentation.	
E. Presentation Delivery	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
1. Voice Pitch, tempo, volume, quality	The competitor's voice was loud enough to hear. The competitor varied rate & volume to enhance the speech. Appropriate pausing was employed.	The competitor spoke loudly and clearly enough to be understood. The competitor varied rate OR volume to enhance the speech. Pauses were attempted.	The competitor could be heard most of the time. The competitor attempted to use some variety in vocal quality, but not always successfully.	Judges had difficulty hearing /understanding much of the speech due to little variety in rate or volume.	The competitor's voice is too low or monotone. Judges struggled to stay focused during the majority of presentation.	

E. Presentation Delivery	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
2. Stage Presence Poise, posture, eye contact, and enthusiasm	Movements & gestures were purposeful and enhanced the delivery of the speech and did not distract. Body language reflects comfort interacting with audience. Facial expressions and body language consistently generated a strong interest and enthusiasm for the topic.	The competitor maintained adequate posture and non- distracting movement during the speech. Some gestures were used. Facial expressions and body language sometimes generated an interest and enthusiasm for the topic.	Stiff or unnatural use of nonverbal behaviors. Body language reflects some discomfort interacting with audience. Limited use of gestures to reinforce verbal message. Facial expressions and body language are used to try to generate enthusiasm but seem somewhat forced.	The competitor's posture, body language, and facial expressions indicated a lack of enthusiasm for the topic. Movements were distracting.	No attempt was made to use body movement or gestures to enhance the message. No interest or enthusiasm for the topic came through in presentation.	
3. Diction*, Pronunciation** and Grammar	Delivery emphasizes and enhances message. Clear enunciation and pronunciation. No vocal fillers (ex: "ahs," "uh/ums," or "you- knows"). Tone heightened interest and complemented the verbal message.	Delivery helps to enhance message. Clear enunciation and pronunciation. Minimal vocal fillers (ex: "ahs," "uh/ums," or "you- knows"). Tone complemented the verbal message	Delivery adequate. Enunciation and pronunciation suitable. Noticeable verbal fillers (ex: "ahs," "uh/ums," or "you- knows") present. Tone seemed inconsistent at times.	Delivery quality minimal. Regular verbal fillers (ex: "ahs," "uh/ums," or "you-knows") present. Delivery problems cause disruption to message.	Many distracting errors in pronunciation and/or articulation. Monotone or inappropriate variation of vocal characteristics. Inconsistent with verbal message.	
Total Points (155):						

*Definition of Diction – Choice of words especially with regard to correctness, clearness, and effectiveness. **Definition of Pronunciation – Act or manner of uttering officially.