

## LETTER FROM THE EDITOR-IN-CHIEF

## The Urgent Care Foundation: Building a Stronger Specialty



The discipline of urgent care medicine remains in its developmental infancy. While the strong consumer-driven market lurching toward efficient and cost-effective health care delivery systems has supported astounding industry growth, our discipline continues

to struggle to define itself.

Like all new specialties, urgent care medicine has, in fits and starts, made efforts to evolve an identity, but despite early gains, it's been an up and down effort. Most every urgent care practitioner I know wants to be identified uniquely for his or her craft. As a family physician, I don't really practice the continuity primary care I was trained for, and my practice is definably different. Like many of my colleagues, I have built my "urgent care competency" over time, through years in practice and selected, urgent care-focused continuing education. That is not, however, a sufficient pathway to specialty recognition.

Within the house of medicine, a defined specialty development pathway exists, and the requirements for consideration are specific and significant. The details surrounding specialty development are determined by the Accreditation Council for Graduate Medical Education (ACGME) and beyond the scope of this discussion. However, a few absolute criteria are worth noting. To be considered by ACGME for inclusion in the American Board of Medical Specialties (ABMS), all developing specialties must have the following:

- A network of training programs of significant size and of consistent form;
- A "core competency document" that is defined and refined by the training programs;
- A physician society of sufficient size;
- A network of clinical practices of sufficient size and national scope;
- A peer reviewed journal dedicated to the clinical practice and original research of the discipline;
- A portfolio of original research that focuses on advancing clinical quality or the scientific basis of the discipline; and
- A discipline definition that represents a measurably unique clinical practice or scientific body of knowledge.

For prospective subspecialties, a sponsoring ABMS board is necessary.

Urgent care has made significant strides towards many of these

criteria, but most require considerable work. Training and research are perhaps our biggest and most critical holes to fill. Fellowship training programs in urgent care have been around for 7 years but are limited to 3 to 4 developmental sites per year. Expansion of fellowships is wholly dependent on the financial resources available to recruit talent and develop and market new and existing programs. UCAOA has sustained the existing fellowship programs, but the investment required to grow the network would create an unsupportable and unrealistic financial strain on the association. Likewise, research has been all but nonexistent in the discipline and the few projects completed have focused on industry benchmarking and urgent care census data, not clinical care.

With the Urgent Care Foundation, a 501(c)(3) nonprofit dedicated to supporting education and research that advances the discipline of urgent care medicine, we finally have an appropriate vehicle for supporting these most ambitious and resource-intensive initiatives. The Foundation has had an exceptionally busy year developing a sustainable strategy for supporting its mission. We have created a partnership with one of the most eminent primary care research departments in the country in Case Western Reserve University School of Medicine, Department of Family Medicine. Grant applications have been submitted for projects deemed most likely to receive funding and demonstrate urgent care in a relevant and positive light to national health care policymakers and stakeholders.

The Urgent Care Foundation stands tall at a critical moment with significant interest from outside of the urgent care world, but its future depends on significant support and investment from within. Every clinician, vendor, and owner with a stake in the future of urgent care should feel a mandate to participate. With proven leaders and trustworthy stewards leading the way, the time is now to contribute. Please support the Urgent Care Foundation. To find out how, go to www.urgentcarefoundation.org.

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