## Does AAEM Advocacy Resonate with Residents?

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he Academy recently released a position statement on the replacement of physicians by non-physician providers at urgent care



centers in the Edwards-Elmhurst health system. There was some healthy internal debate within the Academy and within the EM Workforce Committee about whether AAEM should speak out about this situation given that it involved urgent care centers as opposed to emergency departments. Do employment decisions at urgent care centers impact EM physicians? Could we have any actual influence over the decision? Do our members care about this? Are there more important things on which to focus?

Ultimately, the Academy decided that this situation was important to us and we published a statement on December 3, 2019 (https://www.aaem.org/current-news/edward-elmhurst-health).

Separately, on December 5, I was visiting the Kingman Regional Medical Center EM Residency Program in Kingman, AZ as part of the Academy's commitment to visit as many EM residency programs as possible to explain the Academy and mission to residents. I often start my discussion by asking the audience what they know about AAEM. The first response was something along the lines of, "Didn't AAEM just do something about doctor's getting replaced by NPs?"

I couldn't have been happier. (Well I suppose I would be happier if physicians weren't replaced by non-physicians, but we're still working on that.) While we have a template for residency presentations, I didn't really use it at all. What followed was instead, an open, informative, sometimes scary, sometimes inspiring conversation between me, an AAEM representative, and a room full of eager and excited EM residents. It was great.

While our statement on the Edwards-Elmhurst situation may not change the decision that organization has made, it absolutely helped inform residents and Academy members. I am fairly certain that it added a few members to our Academy and even more certain that these members will be engaged and contribute to the future of emergency medicine. For that, I want to thank the EM Workforce Committee members and particularly Evie Marcolini and Julie Vieth for their leadership. Job well done.



## Statement of the American Academy of Emergency Medicine (AAEM) on the Edward-Elmhurst Health Firing of Physicians and Replacement with Non-Physician Providers

The American Academy of Emergency Medicine is expressing it concerns over the recent firing of 15 physicians from the urgent care centers operated by Edward-Elmhurst Health in Chicago. The Academy represents board-certified emergency physicians, some of whom practice in urgent care settings, and most of whom receive patients sent from urgent care centers when their medical condition requires a higher level of care. Urgent care centers, while created to serve lower acuity patients, do in fact see a significant number of patients who have serious medical problems. It is well known that even a routine complaint such as a headache may be the harbinger of a life-threatening illness. We therefore are concerned by the report that these physicians were fired in a cost-cutting move by Edward-Elmhurst Health. The AAEM believes that the skills and training of non-physician clinicians requires that they function as part of a physician-led team with immediate, onsite, physician supervision. The AAEM asks that the decision to replace physicians with NPs and PAs be reconsidered. The community served must be informed and deserves a chance to be heard on the removal of these physicians. There are better ways to cut costs of health care delivery than removing the most qualified person who cares for the patient.

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