

ACEP Board Candidate Forum 2020

Meet Aisha Terry, MD, MPH, FACEP

As a current ACEP Board member and former EMRA president from Washington, DC, Dr. Terry has a long history of mentoring young physicians and medical students. She provides ACEP Board support for:

- Quality & Patient Safety Committee
- Research Committee
- EM Research
- Quality Improvement & Patient Safety

Tune in to hear her answers to the following questions developed by members of the Young Physicians Section.

What approach do you recommend ACEP take toward APP scope of practice and its impact on EM job security?

Full Q-and-A at 2:10

We are a specialty that thrives based on a team approach. That team should absolutely be led by an emergency physician.

- Scope of practice should be considered through the lens of quality.
- ACEP should do is more investigation around who provides more quality care as an objective way to say that the additional years of training the additional length of experiences EM physicians have had in the ED makes a difference.

What do you foresee being our biggest post-COVID job difficulties, and how would you address these if elected to the board?

Full Q-and-A at 5:26

We have to focus on our solvency as a profession and position emergency medicine an essential commodity.

• ACEP needs to work toward emergency physicians not being reimbursed or paid just based on volumes because we are a necessity in the community. Now is the right time to have this conversation in preparation for the next pandemic.

• Another way to ensure solvency is through quality measures. ACEP's CEDR program provides an opportunity to strengthen solvency.

YPS includes more than 17,000 ACEP members. We're a huge chunk of the total ACEP membership, but only a small percentage of leadership roles are held by YPS members. What can ACEP do to get young physicians more involved in ACEP leadership?

Full Q-and-A at 8:50

ACEP need to be intentional about creating opportunities for young physicians to have a voice, and the Board should be more intentional about mentoring YPS leaders.

- Extending the pipeline further upstream before medical school and residency would better expose even high school students to the unique culture of medicine.
- Most movements are ignited by young people, and ACEP needs to empower young physicians to use their voices by intentional providing platforms and opportunities.

With expanding residency programs, what are your plans for preserving emergency medicine practice?

Full Q-and-A at 12:17

Our specialty is young; we need to clearly define our identity to ensure solvency. We need to change the lens through which we deliver care in order to be prepared for the future and to last.

• We should invest in our quality portfolio because it speaks to becoming experts in artificial and augmented reality and it speaks to equity in terms of understanding social determinants of health.

What do you think ACEP can do to increase the public presence of our boardcertified emergency physicians and show the value that these board-certified emergency physicians provide to the public?

Full Q-and-A at 15:00

Bottom line: ACEP has to continue exploring new channels to tell the public what emergency medicine is, what emergency physicians do and why we are essential.

• We need to choose the right digital platforms that have the greatest return on investment and focus on those channels, utilizing our relatively new public-facing website, emergencyphysicians.org.