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doi: 10.12788/jfp.0691

Renewing the dream

The dream of family practice began more than 6 decades ago with a movement toward personal physicians who have "... the feeling of warm personal regard and concern of doctor for patient, the feeling that the doctor treats people, not illnesses ...". The personal family physician helps patients "... not because of the interesting medical problems they may present but because they are human beings in need of help."¹ One of the most influential founders of family medicine, Dr. Gayle Stephens, expounded on this idea in a series of essays that tapped into the intellectual, philosophical, historical, and moral underpinnings of our discipline.²

Following the dream and the birth of family medicine—like any organization—its lifecycle can be envisioned as proceeding through the rest of the 7 stages of organizational life (TABLE).³ Now allow me to give you some numbers. There are more than 118,000 family physicians in the United States, 784 family medicine residencies filled by 4530 medical school graduates, more than 150 departments of family medicine, multiple national family medicine organizations, and even a World Organization of Family Doctors.^{4,5} The American Board of Family Medicine is the second largest medical specialty board in the country. Family doctors make up nearly 40% of our total primary care workforce.⁶ We launched the venture, got organized, made it. We are an institution.

The threat at the institution stage is that we are on the precipice of "closing in." Many factors are driving this stage: commoditization in health care, market influences and competition for patients, alternative primary care models, erosion of the patient-physician relationship (partly driven by technology), narrowing scope of care, clinician burnout, and the challenges of implementing value-based care, to name a few. You see what comes next in the TABLE.³ The good news is that there is an alternative to the "natural" progression to the ending stage: the path of renewal.³

In the lifecycle of an organization, the path of renewal starts the cycle anew, with dreaming the dream. I recently had the opportunity to visit Singapore to learn about their health system. Singapore is one of the wealthiest countries in the world. I was impressed with their many innovations, including technological ones, as well as new models of care. However, I was most impressed that the country is betting big on family medicine. Their Ministry of Health has launched an initiative they are calling Healthier SG.⁷ The goal is for "all Singaporeans to have a trusted and lifelong relationship with [their] family doctor." Their dream is to bring personal doctoring to everyone in the country to make Singapore healthier.

While their path of renewal is occurring halfway around the world, here at home, our path of renewal has been ignited over the past several years by the work of the Robert Graham Center; the Keystone Conferences; the American Board of Family Medicine; and the National Academies of Science, Engineering, and Medicine, among others.⁸⁻¹¹ These organizations are aligning around re-centering on patient-clinician relationships, measuring what is important, care by interprofes-

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TABLE

The 7 stages of organizational life³

Stage	Description
Dreaming the dream	Conceptualization and planning; an idea in the founders' minds; a time of brainstorming and rallying
Launching the venture	"Birth" or creation of the idea, which begins to grow and establish foundation
Getting organized	A time of slowing down and standardizing things; replacing the "frantic" efforts of a small number of people with a system that facilitates participation by a larger number of people
Making it	"Adulthood" of the organization; expansion; now with a solid foothold and an increasing reputation
Becoming an institution	A subtle shift from <i>doing</i> to <i>being</i> , from staking a claim to occupying a territory; established reputation; can last for some time
Closing in	Refers to the organization "closing in" on itself, losing its connection to the world and even its <i>raison d'être</i> ; competitive markets may drive this process; the alternative to closing in is the path of renewal
Ending	Organization is phased out or overtaken (in the business world, may get acquired, sold, or file for bankruptcy); activities and identity of the organization cease

sional teams, payment reform, professionalism, health equity, improved information technology, and adherence to the best available evidence. We are working toward the solution shop as opposed to the production line.¹² We are indeed dreaming a new dream.

While I write about this renewal, I close with an ending. This is the final issue of *The Journal of Family Practice*. It marks the end of an era of nearly 50 years of publication. *The Journal of Family Practice* has left a lasting mark, providing generations of clinicians with evidence-based, practical guidance to help care for patients as well as serving as an important venue for scholarly work by the family medicine community. Although I have had the privilege of serving the discipline as an editor-in-chief for only a brief time, I am grateful I had the opportunity. Most of all, I appreciate being on the journey of family medicine with you, renewing the dream together.

JFP

The references for this Editorial are available in the online version of the article at www.mdedge.com/familymedicine.

UNITED STATES POSTAL SERVICE Statement of Ownership, Management, and Circulation (Requester Publications Only)

1. Publication Title: *The Journal of Family Practice*

2. Issue Frequency: Monthly

3. Issue Date: SEPTEMBER 2023

4. Issue Periodicity: Monthly (except January/February and July/August issues)

5. Number of Issues Published Annually: 12

6. Annual Subscription Price of Copy: \$1,700

7. Complete Mailing Address of Known Office of Publication (not printer): 4800 Rockledge Drive, Suite 100, Jacksonville, FL 32246

8. Complete Mailing Address of Headquarters or General Business Office of Publisher (not printer): 300 North Zeeb Road, Suite 100, Jacksonville, FL 32218

9. Full Names and Complete Mailing Addresses of Publisher, Editor, and Managing Editor (Do not leave blank):
 Publisher: Scott H. Kohn, MD, 300 North Zeeb Road, Suite 100, Jacksonville, FL 32218
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 Full Name: HCAHEALTH Corp.
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11. Known Bondholders, Mortgagees, and Other Security Holders Owning or Holding 1 Percent or More of Total Amount of Bonds, Mortgages, or Other Securities. If none, check box: None

12. Tax Status (For completion by nonprofit organizations authorized to mail and receive mail at nonprofit rates. Check one):
 Has Not Changed During Preceding 12 Months
 Has Changed During Preceding 12 Months (Publisher must submit explanation of change with this statement)

13. Extent and Nature of Circulation

	Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date
a. Total Number of Copies (Net press run)	304,591	303,856
b. Paid and/or Requested Circulation (Sum of 1 through 5)	13,799	13,781
1. Sales Through Dealers and Carriers, Street Vendors, Counter Sales, and Other Paid or Requested Circulation Channels (USPS®)	-	-
2. Paid or Requested Circulation Outside the US (Foreign Sales)	-	-
3. Paid or Requested Circulation Outside the US (Foreign Sales)	-	-
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c. Total Distribution (Sum of 1 through 6)	13,799	13,781
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e. Total (Sum of a and c) (If you are mailing a separate issue, give the 10 of page 1 if you are not mailing a separate issue, see page 11 of page 1)	304,591	303,856
f. Copies Not Distributed (Sum of 7 through 10)	75	86
g. Total (Sum of f and g)	304,591	303,856
h. Paid and/or Requested Circulation (Do not check this box unless you are mailing a separate issue, see page 11 of page 1)	45.3%	45.3%

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