

2023 Agenda for the Reference Committee on Organization and Finance

National Conference of Constituency Leaders

| <u>Item No.</u> | | Resolution Title |
|-----------------|---------------------|---|
| 1. | Resolution No. 4001 | Spotlighting The Scope of Practice of Family Medicine on The American Academy of Family Physicians Website to Increase Medical Student Interest |
| 2. | Resolution No. 4002 | Leadership Toolkit |
| 3. | Resolution No. 4003 | Working Group on Determining Medical Stakeholders Perceptions on the Future Value of Family Physicians |
| 4. | Resolution No. 4004 | Elected Representative from National Conference of Constituency Leaders to the American Academy of Family Physicians Board of Directors |
| 5. | Resolution No. 4005 | Transparency for Visa Support in Family Physician Job Postings |
| 6. | Resolution No. 4006 | Words Matter: Changing Minority Caucus to BIPOC Caucus |
| 7. | Resolution No. 4007 | Promoting and Increasing Native American Representation in Family Medicine at All Levels |
| 8. | Resolution No. 4008 | Serving All Members Better by Understanding Intersectional Identities of Attendees of NCCL and AAFP Members |
| 9. | Resolution No. 4009 | AAFP to Provide Advocacy Recommendations and Resources to All Members |

Spotlighting The Scope of Practice of Family Medicine on The American Academy of Family Physicians Website to Increase Medical Student Interest

Introduced by: Tambetta Ojong, MD, IMG

Macy Rupprecht, DO, Women

WHEREAS, A shortage of more than 52,000 primary care physicians by 2025 has been predicted, and

WHEREAS, only 12% all United States (US) students or graduates matched in 2023 and most of the various groups' percentages were on a downtrend (i.e., 8.1% of all US MD seniors vs 8.4% in 2022, 22.2% of DO seniors vs 22.4% in 2022 and 23.6% of US IMG vs 25.1% in 2022), and

WHEREAS, medical students may not be exposed to the wide practice scope of family medicine, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians use their website to spotlight, biography and interview family medicine physicians and their wide scope of practice to provide greater opportunity and interest in family medicine for medical students.

Leadership Toolkit

Introduced by: Sarah Ledger, DO, Women

Melody Jordahl-Iafrato, MD, General Registrant

Suben Naidu, MD, IMG

Claudia Rey, MD, General Registrant

WHEREAS, The American Academy of Family Physicians has stated "it is crucial to the future of the United States healthcare system that family physicians take a leadership role in advanced primary care practices and evolving health care system" (American Academy of Family Physicians. Recommended Curriculum Guidelines for Family Medicine Residents: Leadership. October 2022.), now, therefore, be it

RESOLVED, That the American Academy of Family Physicians expand their centralized list of resources for leadership development to include other resources such as articles, books, and podcasts, and be it further

RESOLVED, That the American Academy of Family Physicians develop a leadership-focused performance improvement project that would be recognized by the American Board of Family Medicine to meet the requirements for the Performance Improvement portion of Maintenance of Certification.

Working Group on Determining Medical Stakeholders Perceptions on the Future Value of Family Physicians

Introduced by: Michelle Prentice, MD, MS, New Physician

Raghuveer Vedala, MD, New Physician Emmeline Ha, MD, New Physician Tabatha Davis, MD, New Physician Patrick Williams, MD, New Physician

WHEREAS, The American Academy of Family Physicians (AAFP) has made extensive efforts to define and advocate for family physicians' value within the health care system, and

WHEREAS, this included the Future of Family Medicine (FFM) Project (2004), developed to define "strategies to renew and transform the discipline of family medicine to meet the needs of patients in a changing health care environment", and

WHEREAS, perceptions of the role and value of family physicians within the community and health care systems vary amongst health care stakeholder groups, and

WHEREAS, some stakeholders are increasingly equating family physician value to that of other health care practitioners using data similar to that provided by the Medical Group Management Association (MGMA) without appropriate context, and

WHEREAS, these misconceptions are affecting family physician practice opportunities, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians conduct longitudinal assessments of stakeholder perceptions on the future role of family physicians within health care, and be it further

RESOLVED, That the American Academy of Family Physicians incorporate stakeholders from public and private sectors at both the state and federal levels into longitudinal assessments, and be it further

RESOLVED, That American Academy of Family Physicians use the outcomes from these assessments to develop a rebuttal and negotiation toolkit for new family physicians to utilize in the face of any misconceptions, including those perpetuated by Medical Group Management Association (MGMA) data.

Elected Representative from National Conference of Constituency Leaders to the American Academy of Family Physicians Board of Directors

Introduced by: L. Latéy Bradford, MD, PhD, New Physician

Xi Nuo Gao, MD, New Physician Octavia Amaechi, MD, Minority Kelly Thibert, DO, LGBTQ+

WHEREAS, The American Academy of Family Physicians (AAFP) has embedded all strategic aims in an overarching philosophy of diversity, equity and inclusion (DEI), and

WHEREAS, the National Conference of Constituency Leaders (NCCL) represents a highly diverse community of family physicians around the country, and

WHEREAS, an NCCL elected representative would reflect the diversity of all its member constituencies, and

WHEREAS, an NCCL elected representative would highlight and provide institutional guidance around DEI on the Board of Directors, and

WHEREAS, the newly created Commission on Diversity, Equity and Inclusiveness in Family Medicine helps inform the work of the AAFP but does not have a position on the Board of Directors, and

WHEREAS, NCCL constituents have not had a direct path to organizational leadership on the Board of Directors, and

WHEREAS, students and resident physicians have a direct path to leadership on the Board of Directors, now, therefore, be it

RESOLVED, That the National Conference of Constituency Leaders should elect a representative to serve as a Board Member on the American Academy of Family Physicians Board of Directors.

Transparency for Visa Support in Family Physician Job Postings

Introduced by: Shruti Javali, MD, IMG

Kento Sonoda, MD, IMG

Erika Roshanravan, MD, General Registrant

Sai Swapnika Guttikonda, MD, IMG

WHEREAS, The American Academy of Family Physicians (AAFP) CareerLink website is a valuable resource for job searches for family physicians, and

WHEREAS, due to lack of transparency, non-US citizen family physicians may face significant challenges in finding out which jobs offer visa sponsorship, and

WHEREAS, these challenges can result in time delays and present a financial burden on these family physicians, and

WHEREAS, this lack of transparency causes significant delays in getting family physicians in the areas where they are most needed, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians CareerLink website update its job filters to include visa sponsorship as a required field for potential employers on job postings.

Words Matter: Changing Minority Caucus to BIPOC Caucus

Introduced by: LaTasha Perkins, MD, Minority

Stephanie Purnell, MD, MPH, Minority

WHEREAS, The US Census Bureau projects the nation will become a majority minority population for the first time in 2043. Non-Hispanic whites will remain the largest single group, and no group will make up a majority, and

WHEREAS, all current minorities are projected to compose 57% of the US population in 2060, and

WHEREAS, a minority group is defined as a population subgroup (e.g. age, disabled community, ethnic, gender, racial, religious, sex orientation, social, and other group) with differential power than those deemed to hold the majority power in the population, and

WHEREAS, the relevance of the term minority is outdated and has changed as the demographics of the population change, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians change the term "minorities" to be in line with some of the changes happening in the medical community, and be it further

RESOLVED, That the American Academy of Family Physicians adopt the term BIPOC (Black, Indigenous, and People of Color), which is used to "highlight the unique relationship to whiteness that Indigenous and Black (including African American) people have, which shapes the experience of and relationship to white supremacy for all people of color in the US context," and, ultimately, update our language to become and remain linguistically, mathematically, and historically responsible.

Promoting and Increasing Native American Representation in Family Medicine at All Levels

Introduced by: Frank Animikwam, MD, Minority

Cybill Oragwu, MD, New Physician Robin Mitchell, MD, General Registrant

Denise Octaviani, DO, Minority Stacy Jefferson, MD, Minority Carmen Echols, MD, Minority

WHEREAS, According to a 2018 American Medical Association (AMA) Council on Medical Education report, 3,400 physicians identified as American Indian/Alaskan Native (Al/AN), which is 0.065% of the total Al/AN population (roughly 5.7 million) at that time, 0.4% of the total physician workforce, which is not reflective of the 1% of Al/AN population nationally, and

WHEREAS, the term American Indians/Alaskan Natives is a Federal designation for statistical purposes, and

WHEREAS, Native American is a more acceptable term among Native American Communities, and

WHEREAS, Native American's have some of the higher rates of disease and mortality, and

WHEREAS, many family medicine physicians not practicing in Native American communities do not know where to look for accurate data, and

WHEREAS, there are no formal partnerships between the American Academy of Family Physicians (AAFP) and any Native American health organizations that promote the health and wellbeing of Native Americans, and

WHEREAS, the AAFP does not have formal relationships with Tribal Nations, who exercise their sovereignty, self-determining what their healthcare looks like, and

WHEREAS, the AAFP's Policy on Diversity in the Workforce (2005) (September 2020 Congress of Delegates (COD)), promotes going beyond diverse representation to embrace, support, and promote diversity in all forms, allowing all family medicine physicians to provide improved care to address health disparities, and

WHEREAS, the (COD) has adopted resolution No. S1-102 and No. 212, and

WHEREAS, the AAFP(COD), AAFP National Conference, and AMA do land acknowledgments at the start of their conferences, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians identify and explore partnerships with Tribal Nations and organizations such as, the Indian Health Services, the Association of American Indian Physicians, and Tribal Epidemiology Centers, who have networks and historical relationships with Native American Communities, to be better informed on health disparities impacting Native Americans, and be it further

RESOLVED, That the American Academy of Family Physicians maintain and expand upon Culturally, Linguistic, Appropriate Services toolkits, that includes supporting the creation of a Native American Healthcare Member Interest Group, and other resources to highlight Native American health, and be it further

RESOLVED, That the American Academy of Family Physicians' Annual Chapter Leader Forum and National Conference of Constituency Leaders do land acknowledgements at the start of their conferences.

Serving All Members Better by Understanding Intersectional Identities of Attendees of NCCL and AAFP Members

Introduced by: Christopher Murphy, MD, LGBTQ+

Bright Zhou, MD, LGBTQ+
Patricia Chico, MD, Minority
Jessica McColley, DO, LGBTQ+
Nader Silver, MD, LGBTQ+
Cramer McCullen, MD, LGBTQ+
Jesse Nieuwenhuis, MD, LGBTQ+

WHEREAS, The 2020 United States (U. S.) Census and other recent national polls demonstrate a growing diversity in the American population with regards to race, ethnicity, sexual orientation and gender expression, and

WHEREAS, 3.2% of American Academy of Family Physicians (AAFP) members identify as gay, bisexual, or uncertain, which is below the 4.5% Lesbian, Gay, Bisexual, Transgender, Queer (LGBTQ+) figure reported in a national Gallup poll, which demonstrates an underrepresentation in AAFP membership and/or reluctance to self-identify, and

WHEREAS, intersectionality refers to the interconnected nature of social categorizations, such as race, class, or gender as they apply to a given individual or group, which can be regarded as creating overlapping and interdependent systems of discrimination or disadvantage, and

WHEREAS, the AAFP in 2019 passed a resolution to promote intersectional collaboration between National Conference of Constituency Leaders (NCCL) and in 2021, approved the formation of the Intersectionality in Healthcare Member Interest Group, which are both important steps in bolstering the diversity of our family medicine workforce, and

WHEREAS, there is opportunity to further characterize both the demographic and intersectional identity of our members with regards to currently existing constituencies in women, LGBTQ+, International Medical Graduates (IMG), new physicians, and minorities, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians evaluate existing demographic data of its National Conference of Constituency Leaders (NCCL) attendees to assess the intersectionality of its constituencies and report the data back to NCCL members once the data has been analyzed, and be it further

RESOLVED, That the American Academy of Family Physicians investigate available demographic data for other relevant identities, which may include ability status, socioeconomic background (i.e. class), geographic practice, and intersectionality within medicine and report the data back to National Conference of Constituency Leaders (NCCL) members once the data has been analyzed.

AAFP to Provide Advocacy Recommendations and Resources to All Members

Introduced by: Anisha Gill, MD, Women

Sarah Ledger, DO, Women Kevin Wang, DO, LGBTQ+

Martha Simmons, MD, General Registrant

Kelly Thibert, DO, LGBTQ+

Nicole Brokloff, MD, New Physician

WHEREAS, The American Academy of Family Physicians (AAFP) currently creates and distributes resources related to current legislative advocacy directly to the AAFP chapter Executive Vice President (EVP) and staff, and

WHEREAS, members pay dues to both AAFP and local chapters which support the creation of these resources, and

WHEREAS, it is currently per discretion of the EVP and staff to distribute these resources to their members, and

WHEREAS, individual members will find themselves in the position to directly engage with their local lawmakers, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians (AAFP) Board of Directors examine the relationship between the national academy and individual chapters to ensure that the needs of members are met equally in regards to educational and advocacy resources, and be it further

RESOLVED, That the American Academy of Family Physicians (AAFP) explore ways to safely expand access to advocacy resources such as legislative toolkits for all members.