

**California Academy of Family Physicians
2020 Resolutions Submitted to the CAFP Board of Directors**

- Resolutions may be submitted to the CAFP Board of Directors (BOD) at any time during the year. This DASHBOARD includes action on those heard at the 2020 All Member Advocacy Meeting (AMAM) and others submitted outside the AMAM timeframe as of 5.16.20.
- Resolutions submitted to the Board at the AMAM are designated “A,” as in Res. A-01-20 or ER for “emergency”, i.e., submitted after the deadline.
- Resolutions submitted too late for consideration by the Board at the current year’s AMAM are designated “B,” as Board.
- Resolutions will be tracked through the process and moved from Yellow to Red or Green as final actions are determined.
- The full resolutions are available for review on CAFP’s website, www.familydocs.org. Resolutions must be posted on CAFP’s website for at least one month prior to a Board meeting at which they will be considered to allow sufficient time for member comment.

YELLOW: Resolutions Referred/Submitted by the CAFP Board of Directors for Action 5/16/2020	
Resolution #/Title/Date Submitted	A-01-20 – Advocacy for Closure of Detention Camps
Original RESOLVEDS:	<p>RESOLVED: That the CAFP issues an official statement calling for: (a) immediate end of the use of detention, to be replaced with well-established and effective alternatives to detention; (b) immediate end to separation of families (consistent with previous CAFP/AAFP positions); (c) immediate implementation of independent medical oversight of migrant detention centers to ensure standards of medical care are being met; and (d) immediate cessation of dangerous deportations, in which individuals are deported to life-threatening conditions in their countries of origin or are deported to settings in which they face life-threatening medical complications, and be it further</p> <p>RESOLVED: that the CAFP forwards the above statement to the Congress of Delegates for National Action.</p>
Recommended Actions and Progress Notes:	<p>BOD met on 5.16.20 and referred to the CAFP Committee on Health of the Public, with report back to the Board. Authors informed.</p> <p>BOD met on 7.22.20 and Adopted as amended below.</p> <p>AMENDED RESOLVED 1: That the CAFP issues an official statement calling for: (a) immediate end of the use of detention; (b) immediate end to separation of families (consistent with previous CAFP/AAFP positions); (c) immediate implementation of independent medical oversight of migrant detention centers to ensure standards of medical care are being met; and (d) immediate cessation of dangerous deportations, in which individuals are deported to life-threatening conditions in their countries of origin or are deported to settings in which they face life-threatening medical complications, and be it further</p> <p>AMENDED RESOLVED 2: Referral to the AAFP Congress of Delegates pending the approval of a position paper on detention camps written by the CAFP Committee on Health of the Public.</p> <p>Authors informed. Position paper underway.</p>
Final Action:	

Resolution #/Title/Date Submitted	
Resolution #/Title/Date Submitted	A-22-20- Resolution to End Police Brutality and Reinvest in Public Health (6-2020)
Original RESOLVEDS:	<p>RESOLVED: that CAFP develops policy, advocates, and lobbies for any and all local and state legislation that supports:</p> <ul style="list-style-type: none"> • divesting in police and re-investing in community resources, including schools, childcare and youth programs, safe and affordable housing, fair wages, food pantries, specialized case workers and first responders, mental health workers, and other social services • investing in programs that use crisis workers with mental health training to respond to emergency calls, modeled after programs that have successfully been implemented in Eugene, OR, Sacramento, CA and Oakland, CA, and increasing investment in the programs that have been implemented • demilitarization of the police, specifically no use of military-style raids, chemical weapons, or military-style gear and tactics against civilians, including protestors, medics, and journalists, and elimination of federal programs that provide military equipment to law enforcement • clear and appropriate use of the National Guard, and limiting their use in response to protests • ending the qualified immunity doctrine in federal law which prevents police from being held accountable when they violate the constitutional rights of citizens • partnering with local, grass-roots organizations who have been actively working on decarceration and abolition to create community-based public safety programs • investment in research evaluating the public health effects of police violence on communities of color, and be it further <p>RESOLVED: that the CAFP submit a resolution to the AAFP Congress of Delegates for the AAFP to create a taskforce, write a position paper, and lobby for federal policy in support of the above.</p>
Recommended Actions and Progress Notes:	BOD met on 9.12.20 and referred to the CAFP Committee on Health of the Public, with report back to the Board. Authors informed. Note: CAFP submitted a separate resolution on policing and public health to the 2020 Congress of Delegates.
Final Action:	
GREEN: Resolutions ADOPTED/AMENDED and ADOPTED by the CAFP Board of Directors	
Resolution #/Title/Date Submitted	A-02-20- Patient Protection of Information from Adverse Childhood Experiences (ACEs) Screening (3-14-20)
Original RESOLVEDS:	<p>RESOLVED: That the CAFP support the collection of information from the ACEs screening be subject to pre-existing conditions protections for health insurance, and be it further</p> <p>RESOLVED: That CAFP support the ACEs score as a tool for screening purposes only, and not diagnostic of the implied risk condition, and be it further</p> <p>RESOLVED: That CAFP refer to AAFP for national action.</p>
Recommended Actions and Progress Notes:	BOD met on 5.16.20 and Adopted as amended below.

	<p>RESOLVED: That the CAFP support the collection of information from the ACEs screening be subject to pre-existing conditions protections for health insurance, and be it further</p> <p>RESOLVED: That Adverse Childhood Experience (ACE) scores be used as a screening tool, not diagnostic of the implied risk condition, and be it further</p> <p>RESOLVED: That CAFP refer this resolution to AAFP for national action.</p>
Final Action:	<p>BOD met on 5.16.20 and adopted as amended. Authors informed. Resolution will be forwarded to the AAFP.</p> <p>Note: Due to an all virtual AAFP 2020 Congress of Delegates (COD), AAFP limited states to two resolutions. In addition, each resolution must be exigent in nature. This resolution will be considered for submission at the 2021 COD. Authors informed.</p>
Resolution #/Title/Date Submitted	A-03-20 - Advocating for state-level and national policies regarding climate change (3-14-20)
Original RESOLVEDS:	<p>RESOLVED: That the CAFP support legislation that addresses climate change and decreases the impact of the healthcare system on carbon emissions and waste, and be it further</p> <p>RESOLVED: That the CAFP lobby for physician representation in government agencies working on climate change and environmental issues, and be it further</p> <p>RESOLVED: That the CAFP establish a climate change committee to partner with other state and national medical organizations to (1) mitigate the health effects of climate change on our patients and institutions and (2) support health care organizations decreasing their impact on the environment, and be it further</p> <p>RESOLVED: That CAFP refer this to AAFP for national action.</p>
Recommended Actions and Progress Notes:	<p>BOD met on 5.16.20 and referred to the CAFP Legislative Affairs Committee, with report back to the Board. Authors informed.</p> <p>BOD met on 9.12.20 and Adopted as amended below:</p> <p>RESOLVED: That CAFP encourage physician representation on government advisory committees working on climate change and environmental issues.</p>
Final Action:	BOD met on 9.12.20 and adopted as amended. Authors informed.
Resolution #/Title/Date Submitted	A-05-20 - Improved Quality of Reproductive Health Care for Incarcerated People (3-14-20)
Original RESOLVEDS:	RESOLVED: that the CAFP will lobby and advocate for legislative efforts to improve access to quality reproductive health care for incarcerated people in California, both in jails and prisons, including AB732, and be it further

	<p>RESOLVED: that the CAFP will advocate for legislative efforts for incarcerated people in California that aim to improve access to timely but non-coercive abortion and that additionally address the accountability of correctional facilities in complying with existing reproductive health legislation, and be it further</p> <p>RESOLVED: that the CAFP will instruct its delegates to submit a resolution to the AAFP COD to update the position paper entitled “Incarceration and Health: A Family Medicine Perspective” to add more specific reproductive health data in incarcerated populations referencing data from Pregnancy Outcomes in US Prisons, 2016-2017, and be it further</p> <p>RESOLVED: that the CAFP will instruct its delegates to submit a resolution to the AAFP COD to advocate for national policy that helps to improve reproductive healthcare for incarcerated patients, including non-directive options counseling and access to timely abortion if desired.</p>
Recommended Actions and Progress Notes:	<p>BOD met on 5.16.20 and referred to the CAFP Legislative Affairs Committee, with report back to the Board. Authors informed.</p> <p>BOD met on 9.12.20 and Adopted as amended below:</p> <p>RESOLVED: that CAFP advocate for improved access to timely but non-coercive abortion for incarcerated people in California, and improved accountability of correctional facilities in complying with existing reproductive health law, and be it further</p> <p>RESOLVED: that CAFP submit a resolution to the AAFP COD to advocate for national policy that helps to improve reproductive health care for incarcerated patients, including non-directive options counseling and access to timely abortion, if desired.</p>
Final Action:	BOD met on 9.12.20 and adopted as amended. Authors informed. Resolution will be forwarded to the AAFP COD for national action.
Resolution #/Title/Date Submitted	A-06-20 - Removing Routine Ultrasound in Medication Abortion Protocols (3-14-20)
Original RESOLVEs:	<p>RESOLVED: that the CAFP support de-medicalization of early medication abortion by eliminating requirements for routine ultrasound in medication abortion provision, and be it further</p> <p>RESOLVED: that CAFP lobby for the unbundling of pre- and post- abortion ultrasound in the Medi-Cal reimbursement requirements for medication abortion, and be it further</p> <p>RESOLVED: that the CAFP support this resolution at the AAFP and work to unbundle ultrasound in medication abortion protocols for Medicaid reimbursement in all states.</p>

Recommended Actions and Progress Notes:	BOD met on 5.16.20 and referred to the CAFP Medical Practice Affairs Committee, with report back to the Board. Authors informed.
Final Action:	<p>BOD met on 7.22.20 and Adopted as amended below.</p> <p>RESOLVED: That the CAFP advocate for the elimination of barriers to abortion access resulting from ultrasound requirements that are not clinically indicated, and be it further</p> <p>RESOLVED: That CAFP support the unbundling of pre- and post- abortion ultrasound in the Medi-Cal reimbursement requirements for medication abortion, and be it further</p> <p>RESOLVED: That the CAFP support efforts by AAFP to unbundle ultrasound in medication abortion protocols for Medicaid reimbursement in all states.</p> <p>Authors informed.</p>
Resolution #/Title/Date Submitted	A-08-20 - Ensure Affordable Access to Medical Treatments Developed on University Campuses (3-14-20)
Original RESOLVEDS:	<p>RESOLVED: the CAFP work to its partners to develop continuing medical education and other educational materials so that all future and current CAFP members receive independent, evidence based education on the drug development and approval processes, and be it further</p> <p>RESOLVED: that the CAFP explore with its partners various ways from advocacy to legislation to ensure that universities make the medical treatments discovered or developed on their campuses, especially those developed with public funding, affordable and accessible to all patients, and be it further</p> <p>RESOLVED: the CAFP urge universities and academic medical centers to employ provisions in their licensing agreements with industry to allow for a non-exclusive license on medical treatments in low- and middle-income countries to ensure generic competition and therefore, affordable access to treatments, and be it further</p> <p>RESOLVED: the CAFP request universities commit to full sharing of all data and research findings to promote further research and scientific progress, including publishing all clinical trials, and be it further</p> <p>RESOLVED: the CAFP support policies that would ensure fair return on public investment including those that would tie affordability provisions to public funding for drug discovery and development through the National Institutes of Health and other government agencies.</p>
Recommended Actions and Progress Notes:	BOD met on 5.16.20 and referred to the CAFP Committee on Continuing Professional Development and Legislative Affairs Committees, with report back to the Board. Authors informed.

	<p>BOD met on 9.12.20 and Adopted as amended below:</p> <p>RESOLVED: that CAFP support efforts that ensure medical treatments derived from publicly funded ventures are affordable and accessible to all patients, and be it further</p> <p>RESOLVED: that CAFP support transparency in publicly funded pharmaceutical research and resultant data, including the publishing of all clinical trials.</p>
Final Action:	BOD met on 9.12.20 and adopted as amended. Authors informed.
Resolution #/Title/Date Submitted	A-09-20 - Promoting a Conflict-Free California Academy of Family Physicians (3-14-20)
Original RESOLVEDS:	<p>RESOLVED: that the CAFP works toward a complete ban on health care industry funding, particularly from pharmaceutical and medical device companies with possible exceptions being income from journal advertising, and be it further</p> <p>RESOLVED: that the CAFP provides educational programming around conflict of interest and its impact on medical education and health care advocacy for its membership, and be it further</p> <p>RESOLVED: that the CAFP ensures that any funds from health care industry contributors are truly unrestricted and not allocated towards any advocacy activities including programmatic events that might preclude the organization's ability to act on certain issues or relay a perceived conflict of interest, and be it further</p> <p>RESOLVED: that the CAFP establishes safeguards to ensure all conference programming including Continuing Medical Education activities are free from conflict-of-interest including through establishing a CME committee comprised of members without any industry to distribute unrestricted, educational grants from industry or seek other funding from independent foundations or public grants, and be it further</p> <p>RESOLVED: that the CAFP prohibits gifts and promotional materials including those intended for educational purposes from pharmaceutical and medical device companies to be distributed to its membership, and be it further</p> <p>RESOLVED: that the CAFP establishes clear conflict-of-interest guidelines for all speakers at all its events, regardless of CME eligibility or not, including a mandatory public disclosure of any financial or nonfinancial relationships with health care industries at the start of any presentation or talk, and be it further</p> <p>RESOLVED: that the CAFP examines best practices of other state and national professional medical associations in managing real and perceived conflicts of interests and provide a report to be presented to the CAFP Board of Directors and publicly available on its website.</p>

Recommended Actions and Progress Notes:	BOD met on 5.16.20 and referred to the CAFP Committee on Continuing Professional Development, with report back to the Board. Authors informed.
Final Action:	<p>BOD met on 7.22.20 and Adopted as amended below.</p> <p>AMENDED RESOLVED: that the California Academy of Family Physician provide to members information about conflict of interest (COI) resolution and management, including but not limited to CAFP policies and procedures and potential effects of COI.</p> <p>Authors informed.</p>
Resolution #/Title/Date Submitted	A-11-20 - Increase Education in Substance Use Disorder for Residency Programs
Original RESOLVEDS:	<p>RESOLVED: that CAFP seek additional grant funding and use funding from the CAFP budget if necessary to support the integration of addiction training into Family Medicine residency program curriculum through the California Primary Care Residency Program Collaborative, and be it further</p> <p>RESOLVED: that CAFP/AAFP write a letter to the Accreditation Council on Graduate Medical Education (ACGME) encouraging increased training in substance use disorder treatment for residency, and be it further</p> <p>RESOLVED: that CAFP offer x-waiver trainings (as long as a data 2000 waiver continues to be required to treat opioid use disorder) at major conference events such as the All Member Advocacy Meeting, Family Medicine Clinical Forum and Student +FM Resident Summit, and be it further</p> <p>RESOLVED: that the California Academy of Family Physicians delegation to the American Academy of Family Physicians submit a resolution to the AAFP Congress of delegates requesting the AAFP to write a letter to the Accreditation Council on Graduate Medical Education (ACGME) encouraging increased training in substance use disorder treatment for residency, and be it further</p> <p>RESOLVED: that the California Academy of Family Physicians delegation to the American Academy of Family Physicians submit a resolution to the AAFP Congress of delegates requesting the AAFP to offer x waiver trainings (as long as a data 2000 waiver continues to be required to treat opioid use disorder) at major conference events such as the FMX Experience, and National Conference for Family Medicine Residents and Medical Students.</p>
Recommended Actions and Progress Notes:	<p>BOD met on 5.16.20 and referred to the CAFP California Residency Network and Committee on Continuing Professional Development, with report back to the Board. Authors informed.</p> <p>BOD met on 11.12.20 and adopted as amended below:</p>

	<p>RESOLVED: that the California Academy of Family Physicians use available grant funding to support the integration of addiction training into family medicine residency program curriculum through the California Primary Care Residency Program Collaborative.</p> <p>RESOLVED: that CAFP/AAFP write a letter to the Accreditation Council on Graduate Medical Education (ACGME) encouraging increased training in substance use disorder treatment for residency, and be it further</p> <p>RESOLVED: that CAFP offer x-waiver trainings (as long as a data 2000 waiver continues to be required to treat opioid use disorder) at major conference events such as the All Member Advocacy Meeting, Family Medicine Clinical Forum and Student +FM Resident Summit, and be it further</p> <p>RESOLVED: that the California Academy of Family Physicians delegation to the American Academy of Family Physicians submit a resolution to the AAFP Congress of delegates requesting the AAFP to write a letter to the Accreditation Council on Graduate Medical Education (ACGME) encouraging increased training in substance use disorder treatment for residency, and be it further</p> <p>RESOLVED: that the California Academy of Family Physicians delegation to the American Academy of Family Physicians submit a resolution to the AAFP Congress of delegates requesting the AAFP to offer x waiver trainings (as long as a data 2000 waiver continues to be required to treat opioid use disorder) at major conference events such as the FMX Experience, and National Conference for Family Medicine Residents and Medical Students.</p>
Final Action:	BOD met on 11.12.20 and adopted as amended. Resolution was not sent to AAFP COD because due to an all virtual AAFP 2020 COD, AAFP limited states to two resolutions. In addition, each resolution must be exigent in nature. This resolution will be considered for submission at the 2021 COD. Authors informed.
Resolution #/Title/Date Submitted	A-13-20 - Annual Influenza Vaccine Mandate Among Required Vaccinations for School
Original RESOLVEDS:	<p>RESOLVED: The CAFP work with state senator Dr. Richard Pan and other state legislators to add the annual influenza vaccine to the list of required immunizations in order to attend public and private elementary and secondary schools, child care centers, family day care homes, nursery schools, day nurseries, and developmental centers (pre-kindergarten facilities) according to the California Health and Safety Code, Sections 120325-120375.</p> <p>Students who decline the annual influenza vaccine must be required to wear a mask at school from October 1 to April 30. Exceptions to the requirement include medical contraindications to the influenza vaccine such as a documented severe allergic reaction to any component of the vaccine or to a previous dose of any influenza vaccine.</p>
Recommended Actions and Progress Notes:	BOD met on 5.16.20 and referred to the CAFP Legislative Affairs Committee, with report back to the Board. Authors informed.

	<p>BOD met on 9.12.20 and adopted a substitute resolution as written below:</p> <p>RESOLVED: That CAFP support efforts to increase annual influenza vaccine adherence in children, through such efforts as required vaccination for school or childcare enrollment, with appropriate medical exemptions.</p>
Final Action:	BOD met on 9.12.20 and adopted as amended. Authors informed.
Resolution #/Title/Date Submitted	A-15-20 - Creating a Buprenorphine exemption from the Controlled Substances Act (3-14-20)
Original RESOLVEDS:	<p>RESOLVED, That CAFP engage in advocacy efforts for (1) the exemption of buprenorphine from the Controlled Substances Act, and in turn, (2) remove the mandatory 8-hour X-waiver training, as it prohibits access to safe, effective and evidence-based treatment for opioid use disorder during a national crisis.</p> <p>RESOLVED: That the CAFP refer this to AAFP for national action.</p>
Recommended Actions and Progress Notes:	<p>BOD met on 5.16.20 and referred to the CAFP Legislative Affairs Committee, with report back to the Board. Authors informed.</p> <p>BOD met on 9.12.20 and Adopted a substitute resolution as amended below:</p> <p>RESOLVED: That CAFP support efforts to increase patient access to safe, effective and evidence-based treatment for opioid use disorder, such as reducing physician training requirements for prescribing buprenorphine.</p>
Final Action:	BOD met on 9.12.20 and adopted as amended. Authors informed.
Resolution #/Title/Date Submitted	A-16-20 - Working Toward Zero Waste (3-14-20)
Original RESOLVEDS:	<p>RESOLVED: The CAFP recognize the opportunity to make a statement in support of improving the environmental health of our patients and our planet by requesting all future conference and meeting sites make every attempt to reduce waste by avoiding waste, and be it further</p> <p>RESOLVED: Alert CAFP members that future events will make increasing efforts to be Zero-Waste or “Green,” and encourage participants to bring their own water bottles, travel coffee mugs, utensils (reusable “sporks,” and/or food containers (“Tupperware”)), and be it further</p> <p>RESOLVED: Request conference host sites not use disposable silverware, cups, napkins, beverage containers, etc., and be it further</p> <p>RESOLVED: Consider a site's ability or willingness to avoid waste-generation when contracting for meetings and conferences, and be it further</p>

	<p>RESOLVED: Rather than boxed lunches with individually plastic wrapped internals, request creative solutions like 2-3 room buffets or table buffets, and be it further</p> <p>RESOLVED: If CAFP “swag” is considered necessary, consider reusable (water bottles, coffee mugs, utensils) or biodegradable items for future “swag” rather than items that are highly likely to be disposed of at home, and be it further</p> <p>RESOLVED: The CAFP will carry out an audit of its carbon footprint – from its energy emissions and transport to the staff canteen, and consider committing to reducing its carbon emissions, moving to net zero.³⁸, and be it further</p> <p>RESOLVED: That CAFP refer this to AAFP for national action and for all national conferences.</p>
<p>Recommended Actions and Progress Notes:</p>	<p>BOD met on 5.16.20 and Adopted as amended below.</p> <p>RESOLVED: The CAFP support improving the environmental health of our patients and planet by requesting all future conference and meeting sites reduce waste, and be it further</p> <p>RESOLVED: That CAFP alert members that future events will attempt to significantly reduce waste, and encourage participants to bring their own reusable items , and be it further</p> <p>RESOLVED: That CAFP request conference host sites not use disposable silverware, cups, napkins, beverage containers, etc. unless they are compostable, and be it further</p> <p>RESOLVED: That CAFP consider a site's ability or willingness to avoid waste-generation when contracting for meetings and conferences, and be it further</p> <p>RESOLVED: That CAFP “swag” seek to be reusable (water bottles, coffee mugs, utensils) or biodegradable items, and be it further</p> <p>RESOLVED: That safety practices be considered in environmental stewardship, and be it further</p> <p>RESOLVED: That CAFP refer a resolution to AAFP for national action asking for the same considerations.</p>
<p>Final Action:</p>	<p>BOD met on 5.16.20 and adopted as amended. Authors informed. Resolution may be forwarded to the AAFP.</p> <p>Note: Due to an all virtual AAFP 2020 Congress of Delegates (COD), AAFP limited states to two resolutions. In addition, each resolution must be exigent in nature. This resolution will be considered for submission at the 2021 COD. Authors informed.</p>
<p>Resolution #/Title/Date Submitted</p>	<p>A-20-20 - Hospital and Clinic Exemption from PG&E Public Safety Power Shut Off Events (3-14-20)</p>

Original RESOLVEDS:	<p>RESOLVED: That CAFP develop and advocate for legislation in which hospitals and clinics be exempt from PG&E power outages in order to continue to provide needed patient care, and be it further</p> <p>RESOLVED: That CAFP publicize to clinic settings that may not have generator infrastructure resources for funding sources to pay for such equipment, and be it further</p> <p>RESOLVED: That CAFP support legislation that prioritize limiting the duration of PG&E outages in hospital and clinic settings.</p>
Recommended Actions and Progress Notes:	<p>BOD met on 5.16.20 and referred to the CAFP Legislative Affairs Committee, with report back to the Board. Authors informed.</p> <p>BOD met on 9.12.20 and Adopted a substitute resolution as written below:</p> <p>RESOLVED: that CAFP support efforts that ensure health facilities can continue to provide needed patient care during planned power outages.</p>
Final Action:	BOD met on 9.12.20 and adopted as amended. Authors informed.
Resolution #/Title/Date Submitted	A-21-20 - Eliminate the use of race-based medicine (3-14-20)
Original RESOLVEDS:	<p>RESOLVED: That the California Academy of Family Physicians end the practice of using race as a proxy for biology or genetics in their educational events and literature, and require race be explicitly characterized as a social construct when describing risk factors for disease, and be it further</p> <p>RESOLVED: That the California Academy of Family Physicians advocate for estimated glomerular filtration rate to be reported without regard to race at health care institutions and laboratories within California.</p>
Recommended Actions and Progress Notes:	BOD met on 5.16.20 and referred to the CAFP Medical Practice Affairs Committee and Committee on Continuing Professional Development, with report back to the Board. Authors informed.
Final Action:	<p>BOD met on 7.22.20 and Adopted as amended below, noting that as a result of two 2019 AAFP resolutions, AAFP is currently studying the use of race in reporting glomerular filtration rates with a report expected shortly.</p> <p>RESOLVED: That CAFP eliminate the use of race as a proxy for biology and genetics, and develop policies to ensure this is communicated in CAFP education.</p> <p>Authors informed.</p>
RED: Resolutions NOT ADOPTED by the CAFP Board of Directors	
Resolution #/Title/Date Submitted	A-04-20 - Resident Bill of Rights
Original RESOLVEDS:	RESOLVED: That the California Academy of Family Physicians in collaboration with the CAFP Resident Council develop a universal Resident's Bill of Rights which could be applicable across training sites; and be it further resolved

	RESOLVED: That the California Academy of Family Physicians will strongly encourage all family medicine residency programs in the state to implement an endorsed Resident Bill of Rights in order to better ensure equal protections and improved working conditions for all family physicians in training.
Recommended Actions and Progress Notes:	BOD met on 5.16.20 and referred to the CAFP California Residency Network, with report back to the Board. Authors informed.
Final Action:	BOD met on 11.12.20 and did not adopt the resolution as they felt the resolution needed additional clarity. In addition, several similar bills of rights already exist. Authors informed.
Resolution #/Title/Date Submitted	A-07-20 - Support Single-Payer Health Insurance (3-14-20)
Original RESOLVEDS:	RESOLVED: that CAFP express its support for universal access to comprehensive, affordable, high- quality health care through a single-payer national health program, starting with single-payer health insurance at the state level in California.
Recommended Actions and Progress Notes:	
Final Action:	BOD met on 5.16.20 and did not adopt the resolution. CAFP has adopted Principles of Health System Reform in response to previous resolutions calling for single-payer health systems, and circumstances have not changed significantly enough to reconsider our existing position. Authors informed.
Resolution #/Title/Date Submitted	A-10-20 - Support for Long-Term Care (3-14-20)
Original RESOLVEDS:	RESOLVED: That CAFP create a task force to review existing policies and proposals to support long-term care and provide a recommendation for future efforts to support long-term care back to the CAFP, and be it further RESOLVED: That this resolution be sent to the AAFP Congress of Delegates to be discussed on a national level in order to consider updating the AAFP Long-Term Care Policy to address the need for home care worker and family caregiver support.
Recommended Actions and Progress Notes:	
Final Action:	BOD met on 5.16.20 and did not adopt the resolution. The Board noted this has not been a central part of our advocacy, education and policy efforts, and is not a part of our strategic plan. Developing new policy in this area would require a significant output of resources as we would need to establish a new task force and develop knowledge in this area. Authors informed.
Resolution #/Title/Date Submitted	A-12-20 - Tapering Regimens for Patients on Long Term Opioid Therapy (3-14-20)
Original RESOLVEDS:	RESOLVED: that the CAFP create policy that adopts the recommendations and language of the HHS opioid tapering guidelines in order to support creation of tapering plans 1) only after weighing risks and benefits of opioid therapy, 2)

	<p>via shared decision making with patients to create an individualized tapering plan, and 3) without misapplication of the current CDC Guideline in ways that cause inappropriately rapid opioid tapering, and be it further</p> <p>RESOLVED: that this resolution be sent to the COD to be discussed on a national level in order to consider including the language of the HHS guidelines in AAFP’s position paper “Chronic Pain Management and Opioid Misuse: A Public Health Concern” (which currently does not include recommendations regarding opioid tapering) in line with the resolution as above.</p>
Recommended Actions and Progress Notes:	BOD met on 5.16.20 and referred to the CAFP Committee on Health of the Public, with report back to the Board. Authors informed.
Final Action:	BOD met on 7.22.20 and did not adopt. This resolution is current CAFP policy, A-10-2019. Authors informed.
Resolution #/Title/Date Submitted	A-14-20 - X the X Waiver (3-14-20)
Original RESOLVEDS:	<p>RESOLVED: that the CAFP write a policy paper recommending the deregulation of Buprenorphine administration by replacing the X waiver with Continued Medical Education requirements, and be it further</p> <p>RESOLVED: that the CAFP under Tools and Resources of their educational webpage include a database of online, local, and live training sessions for MOUD, and be it further</p> <p>RESOLVED: that the CAFP bring this resolution to the National Congress of Delegates for consideration and support on a national level.</p>
Recommended Actions and Progress Notes:	BOD met on 5.16.20 and referred to the CAFP Committee on Continuing Professional Development (CCPD), with report back to the Board. Authors informed.
Final Action:	BOD met on 7.22.20 and did not adopt. The Board shared CCPD’s concerns that mandatory CME was not appropriate and felt that development of policy to increase addiction services in primary care should be broad. Authors informed.
Resolution #/Title/Date Submitted	A-17-20 - Promote the Development of Hospital-Based Violence Mitigation Programs (3-14-20)
Original RESOLVEDS:	<p>RESOLVED: That CAFP support the development of comprehensive violence mitigation programs across the state, and be it further</p> <p>RESOLVED: That such programs be modeled after the San Francisco Wraparound Project to provide evidence-based, resilience training and trauma-informed care for victims of violence in vulnerable populations across the state, and be it further</p> <p>RESOLVED: That CAFP work with the California legislature to advocate for funding for the San Francisco Wraparound Project and the development of new hospital-based violence mitigation programs throughout the state.</p>
Recommended Actions and Progress Notes:	BOD met on 5.16.20 and referred to the CAFP Legislative Affairs Committee, with report back to the Board. Authors informed.

Final Action:	BOD met on 9.12.20 and did not adopt the resolution. While CAFP has existing policy on mitigating violence, it is not clear how the San Francisco Wraparound Project, a trauma surgery policy, would translate to family medicine. Authors informed.
Resolution #/Title/Date Submitted	A-18-20 - Develop Ergonomics Curriculum for the Workplace (3-14-20)
Original RESOLVEDS:	<p>RESOLVED: That the CAFP work in conjunction with employers develop an ergonomics curriculum in workplaces to prevent workplace injury and lower workplace cost, and be it further</p> <p>RESOLVED: That the CAFP advocate for more data reporting regarding workplace injuries, compensation, ergonomics programs and their efficacy, and be it further</p> <p>RESOLVED: That CAFP refer this to AAFP and advocate for national action through collaboration with OSHA, BLS, CDC, and national agencies to develop curriculums & studies given the limited resources available currently.</p>
Recommended Actions and Progress Notes:	BOD met on 5.16.20 and referred to the CAFP Medical Practice Affairs Committee, with report back to the Board. Author informed.
Final Action:	BOD met on 7.22.20 and did not adopt. The Board shared the MPAC's conclusion that this was outside of CAFP's expertise and would require extensive resources. It is not included as a new area of focus in CAFP's strategic plan. The Board directed CAFP staff to take advantage of opportunities that may arise to add family medicine expertise to the discussion and development of a workplace ergonomic curriculum. Authors informed.
Resolution #/Title/Date Submitted	A-08-18 - Requiring an Evidence-Based Nutrition Curriculum for US Medical Schools (3-2018)
Original RESOLVEDS:	<p>RESOLVED: that the California Academy of Family Physicians (CAFP) advocate for the American Academy of Family Physicians (AAFP) to work with the Liaison Committee on Medical Education (LCME) and Commission on Osteopathic College Accreditation (COCA) to improve the nutrition curriculum for US medical schools through the following curricular changes:</p> <ol style="list-style-type: none"> 1. Increase clinical nutrition education from the current 25-30 hours <i>recommendation</i> to a <i>requirement</i> of 50-60 hours (still less than two percent of estimated total lecture hours); 2. Recommend nutrition instruction in both preclinical <i>and</i> clinical settings with a focus on historical nutrition trends and current evidence using an integrated format with lectures, problem-based learning¹, online self-learning modules, and clinical practice; 3. Recommend teaching motivational interviewing and mindfulness training; 4. Consider other creative innovations such as the establishment of teaching kitchens and self-care curriculums with elective laboratory instruction in nutrition and food preparation⁵; 5. Consider incorporating healthy diet and weight loss counseling cases in the National Objective Structured Clinical Exam (OSCE); and

	Require that the United States Medical Licensing Exam (USMLE) evaluate students' knowledge of current evidence-based nutrition.
Recommended Actions and Progress Notes:	This resolution was previously referred to both California Residency Network and Committee on Health of the Public, neither of whom felt they had the expertise to provide a recommendation.
Final Action:	BOD met on 5.16.20 and did not adopt the resolution. Authors informed.
Resolution #/Title/Date Submitted	A-19-20 - Provide CME and Continue to Oppose Title X Regulation Prohibiting Funding Recipients from Referring Patients for Abortion Care (3-14-20)
Original RESOLVEDS:	<p>RESOLVED: the CAFP include a session at a future Family Medicine Clinical Forum about the Title X regulations and how clinics receiving Title X funding can navigate providing services, and be it further</p> <p>RESOLVED: the CAFP continue to support physician voices speaking out against the regulations by publishing a blog post or article on the topic.</p>
Recommended Actions and Progress Notes:	BOD met on 5.16.20 and referred to the CAFP Committee on Continuing Professional Development, with report back to the Board. Authors informed.
Final Action:	BOD met on 7.22.20 and did not adopt. The Board concurred with CCPD that current CAFP policy supports Title X and that it is not necessary to adopt such specific directives on educational content in order for CAFP to support members perspectives. Authors informed.