

California Academy of Family Physicians

2025 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 2025 All Member Advocacy Meeting (AMAM) and others submitted outside the AMAM timeframe
- Resolutions submitted to the Board at the AMAM are designated “A,” as in Res. A-01-25 or ER for “emergency”, i.e., submitted after the deadline.
- Resolutions submitted outside of AMAM deadlines 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 in the AMAM Handbook 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.
- All 2025 Resolutions were sent to committees for review and recommendation prior to AMAM. The committee recommendations were presented as a consent calendar at AMAM, and Delegates were provided the opportunity to extract resolutions on which members wished to offer additional testimony. Committee recommendations and testimony were then presented to the Board for their consideration.

YELLOW: Resolutions Referred/Submitted by the CAFP Board of Directors for Action 5.11.25	
Resolution #/Title/Date Submitted	A-14-25- Medication Assisted Treatment for Minors with Nicotine Dependence
Original RESOLVEDS:	RESOLVED: That CAFP tasks the legislative affairs committee with creating and implementing a strategy to influence our law makers in the State Assembly and State Senate to pass a law allowing minors access to nicotine replacement therapy for the treatment of nicotine dependence without parental consent.
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and Approved the committee recommendation to Refer back to the Legislative Affairs Committee (LAC) for further discussion and a recommendation. Author informed.
Final Action:	
Resolution #/Title/Date Submitted	B-02-25 - Increasing Access to Care for Patients with Mobility Disabilities
Original RESOLVEDS:	<p>RESOLVED: that CAFP encourage and advocate for medical schools and residencies to provide education to their trainees on how to adapt physical exam maneuvers to meet individuals’ abilities,</p> <p>RESOLVED: that CAFP advocate to the state to encourage and regulate accessible exam rooms and exit/entry routes of appropriate size and entry in all clinics to accommodate various types of equipment, including hospital beds,</p> <p>RESOLVED: that CAFP advocate for implementation of mobility equipment such as portable/ceiling mounted lifts and accessible</p>

	<p>exam tables and scales, in clinics,</p> <p>RESOLVED: that CAFP advocate for increased appropriate training for clinic staff to ensure adequate training on operation of available medical equipment as well as assistance with transfer and lifts.</p> <p>RESOLVED: that CAFP make it a legislative priority to improve billing for home visits to empower physicians to provide care for patients with mobility limitations.</p>
Recommended Actions and Progress Notes:	This resolution was received after the AMAM deadline. The BOD met on 5.11.25 and Referred to the Justice, Equity, Diversity and Inclusion (JEDI) Committee for initial review. Author informed.
Final Action:	
GREEN: Resolutions ADOPTED/AMENDED and ADOPTED by the CAFP Board of Directors	
Resolution #/Title/Date Submitted	A-01-25 – Resolution Supporting Standardized Licensure for US and International Medical School Graduates (IMGs) in California
Original RESOLVEDS:	<p>RESOLVED: Advocate for allowing IMGs to obtain an unrestricted medical license after one year of residency and</p> <p>RESOLVED: Engage in advocacy efforts to raise awareness among policymakers, organizations, and the public about the importance of diversifying the physician workforce and reducing barriers.</p> <p>RESOLVED: That CAFP will work collaboratively with relevant stakeholders, including the Medical Board of California (MBC), residency program directors, and other medical organizations, to advocate for the implementation of this policy change, recognizing the significant contributions that IMGs can make to the healthcare workforce in California; and</p> <p>RESOLVED: That CAFP will actively engage in efforts to promote diversity, equity, and inclusion within the medical profession, including supporting initiatives to recruit and retain physicians from underrepresented backgrounds, including IMGs.</p>
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and Approved the committee recommendation to Refer back to the Medical Practice Affairs Committee (MPAC), for discussion and a recommendation. Author informed.
Final Action:	<p>The BOD met on 8.9.25 and Adopted as Amended below. The Original Resolved clauses 2 and 4 were reaffirmed as existing policy. Author informed.</p> <p>RESOLVED: Advocate for allowing IMGs to be eligible to obtain an unrestricted medical license after one year of residency and</p>

	RESOLVED: That CAFP will work collaboratively with other medical and community organizations, to advocate for the implementation of IMGs being eligible to obtain an unrestricted medical license after one year of residency, recognizing the significant contributions that IMGs can make to the healthcare workforce in California.
Resolution #/Title/Date Submitted	A-03-25 - Safe Social Media Use in Youth, Young Adults, and Adults
Original RESOLVEDS:	<p>RESOLVED: That California Academy of Family Physicians (CAFP) support policies that strengthen safety & privacy standards for social media platforms, enhance systemic social media literacy, and fund research on the impact of social media on youth, young adults, and adults.</p> <p>RESOLVED: That CAFP engage in efforts to equip family physicians with the tools to help parents and their children model and establish healthy and safe relationships with social media, mitigating its harms and reaping its benefits.</p>
Recommended Actions and Progress Notes:	<p>The BOD met on 5.11.25, Approved the committee recommendation to Adopt as Amended, and provided additional language amending the first resolved:</p> <p>RESOLVED: That the California Academy of Family Physicians (CAFP) support policies that fund research, strengthen safety and informed engagement with social media, and enhance systemic social media literacy for youth, young adults, and adults.</p> <p>RESOLVED: That the CAFP engage in efforts to equip family physicians with the tools to help parents and their children model and establish healthy and safe relationships with social media, mitigating its harms and reaping its benefits.</p>
Final Action:	The BOD met on 5.11.25, and Adopted as Amended. Author informed.
Resolution #/Title/Date Submitted	A-04-25 - The National Latino Physician Crisis
Original RESOLVEDS:	<p>RESOLVED: that CAFP acknowledges the Latino Physician crisis in California and nationwide, and be it further</p> <p>RESOLVED: that CAFP recognizes NLPD on October 1st through a press release on the CAFP website created by the Justice, Equity, Diversity & Inclusion (JEDI) Committee, and be it further</p> <p>RESOLVED: that CAFP starts an affinity group dedicated to National Latino Physician Day and creates a space for Latino and Latinas in healthcare to gather during annual events, for example, at the CAFP Family Medicine POP and at the All Member Advocacy Meeting, and be it further</p>

	<p>RESOLVED: that CAFP advocates for creation and continuation of Hispanic/Latinx structural policies that help improve the number of Latino/Latina Physicians, such as, the Primary Care Residency (PCR) of Song- Brown Healthcare Workforce Training Program and the California Medicine Scholars Program, and be it further</p> <p>RESOLVED: that California Academy of Family Physicians bring resolved clause 4 to the AAFP Congress of Delegates for national action.</p>
Recommended Actions and Progress Notes:	<p>The BOD met on 5.11.25 and Approved the committee's recommendations. The resolution was Adopted as Amended below:</p> <p>RESOLVED: that the CAFP recognizes that Latino physicians are underrepresented in the California workforce and supports efforts to address the disparity, and be it further</p> <p>The following resolved is reaffirmed as existing policy:</p> <p>RESOLVED: that the CAFP advocates for creation and continuation of Hispanic/Latinx structural policies that help improve the number of Latino/Latina Physicians, such as the Primary Care Residency (PCR) of Song- Brown Healthcare Workforce Training Program and the California Medicine Scholars Program.</p>
Final Action:	The BOD met on 5.11.25 and Adopted as Amended. Author informed.
Resolution #/Title/Date Submitted	A-05-25 - Indigenous Health Care
Original RESOLVEDS:	<p>RESOLVED: The California Academy of Family Physicians (CAFP) commits to actively supporting initiatives aimed at enhancing Indigenous health access and outcomes in California;</p> <p>RESOLVED: Be it further, the CAFP will collaborate with relevant stakeholders, governmental agencies, tribal leaders, and community organizations to support strategies, with the ultimate goal of improving the health and well-being of Indigenous communities across California.</p> <p>RESOLVED: This resolution shall be communicated to relevant policymakers, healthcare organizations, and community partners to encourage collaborative efforts and support for initiatives aimed at enhancing Indigenous health access and equity.</p>
Recommended Actions and Progress Notes:	<p>The Board Approved the committee recommendations. The resolution was Adopted as Amended below:</p> <p>RESOLVED: The California Academy of Family Physicians (CAFP) supports efforts to enhance Indigenous health access and outcomes in California.</p>
Final Action:	The BOD met on 5.11.25 and Adopted as Amended. Author informed.

Resolution #/Title/Date Submitted	A-07-25 - Ambulatory Clinical Pharmacist Care Across State Lines
Original RESOLVEDS:	<p>RESOLVED: That CAFP supports strategies that allow effective and sustainable integration of clinical pharmacist services into ambulatory clinical settings; and</p> <p>RESOLVED: That CAFP supports insurance coverage of clinical pharmacist services in ambulatory clinical settings (not just in pharmacies, as is current policy); and</p> <p>RESOLVED: That CAFP supports alternative payment models that incorporate clinical pharmacist services into ambulatory clinical settings.</p>
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and did not accept the committee recommendation. The BOD voted to Refer to MPAC for further discussion and a recommendation. Author informed.
Final Action:	<p>The BOD met on 8.9.25 and Adopted as Amended below. Author informed.</p> <p>RESOLVED: That CAFP supports strategies that allow effective and sustainable integration of clinical pharmacist services into ambulatory clinical settings with collaborative practice agreements with physicians; and</p> <p>RESOLVED: That CAFP supports insurance coverage and alternative payment models that incorporate clinical pharmacist services into ambulatory clinical settings with collaborative practice agreements with physicians.</p>
Resolution #/Title/Date Submitted	A-08-24 - Promoting health equity for American Indian and Alaska Native populations
Original RESOLVEDS:	<p>RESOLVED: The California Academy of Family Physicians supports Medi-Cal and Medicare coverage of traditional healing services provided at Indian Health Service, Tribal, and Urban Indian Health Programs to compliment allopathic treatment modalities.</p> <p>RESOLVED: The CAFP strongly encourages tribal consultation in the development of best practices, culturally appropriate data collection, safety monitoring, payment methodologies, credentialing, and tracking of traditional healing services utilization within Indian Health Service, Tribal, and Urban Indian Health Programs.</p> <p>RESOLVED: The CAFP will advocate for graduate medical education funding for family medicine rotations at Indian Health Service, Tribal and Urban Indian Health Programs with interested parties.</p> <p>RESOLVED: That California Academy of Family Physicians support this resolution at the AAFP Congress of Delegates for national action</p>

Recommended Actions and Progress Notes:	<p>The BOD met on 5.11.25 and Approved the committee recommendations. The resolution was Adopted as Amended below:</p> <p>RESOLVED: The California Academy of Family Physicians (CAFP) supports Medi-Cal and Medicare coverage of evidence-based traditional healing services provided through Indian Health programs to compliment allopathic medicine.</p> <p>RESOLVED: The CAFP supports tribal consultation in the development of best patient care practices, and culturally appropriate data collection within Indian Health Programs.</p> <p>RESOLVED: The CAFP supports the inclusion of Family Medicine rotations in graduate medical education at Indian Health Services, Tribal and Urban Indian Health Programs.</p> <p>RESOLVED: That CAFP will refer for national action.</p>
Final Action:	The BOD met on 5.11.25 and Adopted as Amended. Author informed.
Resolution #/Title/Date Submitted	A-10-25 - Including Environmental Racism in Environmental Health Policy Support Environmental Justice in Environmental Health Policy
Original RESOLVEDS:	<p>RESOLVED: The CAFP and AAFP support policies that invest in supporting culturally vibrant, sustainable and resilient communities in which every person has safe, clean and affordable options for housing, energy and transportation</p> <p>RESOLVED: The CAFP and AAFP support research opportunities that amplify tangible strategies for advancing environmental justice and ways to integrate environmental justice into clinical care</p> <p>RESOLVED: The CAFP and AAFP support policies that keep corporations accountable for cleaning and managing the consequences of toxic waste sites.</p>
Recommended Actions and Progress Notes:	<p>The BOD met on 5.11.25 and Approved the committee recommendations. The Board also voted to change the title. The resolution was Adopted as Amended below:</p> <p>“Support Environmental Justice in Environmental Health Policy”</p> <p>RESOLVED: The CAFP support policies and research that invest in environmental justice through supporting culturally vibrant sustainable and resilient communities in which every person has safe, clean and affordable options for housing, energy and transportation</p> <p>RESOLVED: Refer for National Action at AAFP.</p>
Final Action:	The BOD met on 5.11.25 and Adopted as amended. Author informed.

Resolution #/Title/Date Submitted	A-12-25 - Rapid Response to New Policy When at Odds with CAFP Policy
Original RESOLVEDS:	<p>RESOLVED: That California Academy of Family Physicians (CAFP) establishes a rapid response protocol or working group to monitor emerging federal government policies at odds with CAFP policy; and be it further</p> <p>RESOLVED: That the working group regularly announces to CAFP members whether and how existing CAFP policy addresses such threats and how members can speak up; and be it further</p> <p>RESOLVED: That CAFP and its members more frequently make public statements (such as OpEds, social media posts or media interviews) on behalf of the organization when state or federal government policies are at odds with CAFP policy.</p>
Recommended Actions and Progress Notes:	<p>The BOD met on 5.11.25 and Approved the committee recommendation to Adopt Substitute language. The Board also Adopted additional resolved statements:</p> <p>RESOLVED: That CAFP supports educating family physicians about emerging governmental health policies and facilitates their participation in policy discourse.</p> <p>RESOLVED: That CAFP will ensure the policy compendium is easy for members to find and search; and</p> <p>RESOLVED: That CAFP will prioritize, within our work with AAFP, emerging federal policy concerns that conflict with CAFP policy.</p>
Final Action:	The BOD met on 5.11.25 and Adopted as Amended. Author informed.
Resolution #/Title/Date Submitted	A-13-25 - Medi-Cal Audit Exemption to Improve Access to Care
Original RESOLVEDS:	<p>RESOLVED: That the CAFP strongly urges the California State Legislature and the Department of Health Care Services to consider the following:</p> <ol style="list-style-type: none"> 1. Exemption of physician-owned primary care medical clinics from Medi-Cal audits: These clinics should be exempted from the routine audit processes that are more suited to larger, institutional healthcare systems. 2. Promotion of simplified compliance guidelines: For clinics that wish to remain in the Medi-Cal program, there should be a more streamlined, transparent compliance framework that recognizes the unique characteristics of small, independent, physician-owned practices. 3. Incentive programs to support primary care clinics: To maintain high rates of access to quality medical care, Medi-Cal should reduce claim denials and improve reimbursement for physicians who accept Medi-Cal patients.

	4. Expansion of resources and support for private clinics: Allocate state resources to provide assistance in expedient credentialing, navigating Medi-Cal regulations, assisting small practices with compliance, and preventing penalties that result from lack of administrative capacity.
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and Approved the committee recommendations to Adopt Substitute language: RESOLVED: That the CAFP continue to support: <ul style="list-style-type: none"> • Simplified compliance guidelines to provide services to Medi-Cal patients • Incentive programs and other resources to support primary care clinics to see Medi-Cal patients
Final Action:	The BOD met on 5.11.25 and Adopted as Amended. Author informed.
Resolution #/Title/Date Submitted	A-18-25 - Transforming Access to Nourishment: Physicians for Food Security
Original RESOLVEDS:	RESOLVED: That California Academy of Family Physicians (CAFP) advocate for the continued development and use of evidence-based practices to strengthen follow-up care for patients experiencing food insecurity, including primary-care integrated referral pathways to both local and national resources to ensure comprehensive care and support. RESOLVED: That California Academy of Family Physicians (CAFP) work to provide family 75 physicians with comprehensive training on screening and addressing food insecurity, including practical resources such as Continuing Medical Education (CME) opportunities, toolkits, and guides.
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and Approved the committee recommendations. The resolution was Adopted as Amended below: RESOLVED: That the California Academy of Family Physicians (CAFP) advocate for the continued development and use of evidence-based practices to strengthen follow-up care for patients experiencing food insecurity, including primary-care integrated referral pathways to both local and national resources to ensure comprehensive care and support.
Final Action:	The BOD met on 5.11.25 and Adopted as Amended. Author informed.
Resolution #/Title/Date Submitted	B-01-25 - Public School Vaccine Education
Original RESOLVEDS:	RESOLVED: That CAFP supports policies that formalize and implement a school curriculum that includes vaccine education and preventative counseling for students in grades 7-12 RESOLVED: That CAFP refer this for national action so that the AAFP supports policies that formalize and implement a nationally implementable school curriculum that includes vaccine education and preventative counseling for students in grades 7-12.

Recommended Actions and Progress Notes:	This resolution was received after the AMAM deadline. The BOD met on 5.11.25 and Referred to the Committee on Public Health and Equity (CPHE) for initial review. Author informed.
Final Action:	The BOD met on 8.9.25 and Adopted as Amended below. Author informed. RESOLVED: That CAFP supports policies that formalize and implement a school curriculum that includes evidenced-based vaccine education.
RED: Resolutions NOT ADOPTED by the CAFP Board of Directors	
Resolution #/Title/Date Submitted	A-02-25 - Revising Family Leave for Family Medicine Residents Resolution to Adjust the 40-Week Continuity Requirement for Family Medicine Residency Graduation
Original RESOLVEDS:	RESOLVED: That California Academy of Family Physicians (CAFP) advocate to AAFP COD for ABFM to revise its 40-week continuity requirement to provide greater flexibility for residents taking parental or medical leave, ensuring that such leave does not automatically result in delayed graduation if leave does not fall within 40-week continuity clinic window. RESOLVED: That CAFP work with the AAFP and ABFM to ensure that any revised policies also address the downstream impacts of delayed graduation, such as fellowship eligibility and career advancement opportunities, to promote equity and support for family medicine residents.
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and Approved the committee recommendation to Not Adopt. The Board passed a directive to the California Residency Network (CRN) to explore ways to educate residents and faculty about the 40-week continuity clinic requirement.
Final Action:	The BOD met on 5.11.25 and did Not Adopt. Author informed.
Resolution #/Title/Date Submitted	A-06-25 - Promoting Health for Immigrants
Original RESOLVEDS:	RESOLVED: That CAFP legislative affairs committee prioritizes in its agenda any state legislation that strengthens access to health care for immigrants (eg: Medi-Cal expansion, maintaining healthcare facilities as protected space from Immigration and Customs Enforcement) or improves health outcomes for immigrants (eg: opposing forced family separation).
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and Approved the committee recommendation to Not Adopt.
Final Action:	The BOD met on 5.11.25 and did Not Adopt. Author informed.

Resolution #/Title/Date Submitted	A-09-25 - Resolution to Equip and Facilitate General Medical Education and Training of Disabled Veterans in Medical Schools and Residency Programs
Original RESOLVEDS:	<p>RESOLVED: The California Academy of Family Physicians (CAFP) supports and promotes initiatives to:</p> <ul style="list-style-type: none"> • Increase Awareness, Outreach, and Data Collection: Advocate for the recruitment and retention of disabled veterans in medical schools and residency programs across California, with targeted outreach, recruitment, and outcomes-oriented data collection efforts from the California Department of Veterans Affairs (CalVet), the U.S. Department of Veterans Affairs (VA), and medical schools. • Expand Support Systems and Accommodations: Encourage medical schools and residency programs to provide necessary accommodations for disabled veterans, including physical, mental health, and academic support services, in compliance with the Americans with Disabilities Act (ADA). Develop mentorship programs that connect disabled veterans with practicing physicians, especially those who have overcome similar challenges, to foster a supportive and understanding community. • Provide Financial Support and Scholarships: Advocate for additional scholarships, fellowships, and funding specifically for disabled veterans pursuing medical degrees, in partnership with public and private entities including veterans' organizations, foundations, and healthcare providers. • Create Pathways for Transition into Medicine: Work with medical schools to create specialized pathways that make it easier for disabled veterans to transition into medical education programs, such as pre-medical support programs, career counseling, and assistance with navigating the admissions process. • Promote Inclusive Curriculum Design: Advocate for the development of inclusive, adaptive technical requirements, curriculum materials, and teaching methodologies that accommodate the needs of students with disabilities, without compromising the educational quality or rigor of the program. • • Address Neurological, Mental Health, and Wellness Needs: Recognize and address the unique neurological and mental health challenges faced by veterans, particularly those with service-connected exposures and/or trauma, by incorporating robust neurological awareness, mental health support, and resilience training into medical education, ensuring disabled veterans have access to the neurologic and mental health resources they need to succeed. • Partner with VA and Other Veteran Services: Strengthen collaborations with the U.S. Department of Veterans Affairs (VA) and other veteran service organizations to streamline the transition process from military service to medical education, ensuring that veterans have access to the tools, support, and resources necessary to thrive in medical training programs. • Encourage Research and Advocacy: Support research on the challenges disabled veterans face in entering and progressing through medical education, and advocate for policies that ensure equal opportunities and better outcomes for disabled veterans in the healthcare workforce. <p>RESOLVED: That California Academy of Family Physicians will work collaboratively with state and national medical associations, the VA, educational institutions, and veteran organizations to implement these measures and ensure that disabled veterans have a clear and supported pathway into the medical profession.</p> <p>RESOLVED: That this resolution be distributed to the California Medical Association (CMA), the American Academy of Family</p>

	Physicians (AAFP), California medical schools, VA hospitals, and relevant state and federal agencies, to raise awareness of the need for systemic changes to support disabled veterans in pursuing careers in medicine.
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and did not accept the committee recommendation. The Board voted to Not Adopt.
Final Action:	The BOD met on 5.11.25 and did Not Adopt. Author informed.
Resolution #/Title/Date Submitted	A-11-25 - Establish CAFP Planetary Health Task Force
Original RESOLVEDS:	<p>RESOLVED: That CAFP will immediately establish a Planetary Health Task Force with the goal of identifying opportunities for CAFP and its membership to contribute to sustainable solutions for planetary health from our unique perspective and position in California.</p> <p>RESOLVED: That potential opportunities for contribution include: identifying best opportunities for organizational collaboration on planetary health; advocating for policies to mitigate human health effects of environmental change in California; imagining and advocating for climate resilient healthcare systems in California; creating opportunities for climate-concerned family physicians to share ideas and solutions; training family physicians in how to speak to the press and/or public about planetary health.</p> <p>RESOLVED: That the Planetary Health Task Force will be charged with drafting a strategic plan to be reviewed by the Board no later than January 2026.</p> <p>RESOLVED: That CAFP membership will be updated on progress.</p>
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and Approved the committee recommendation to Not Adopt.
Final Action:	The BOD met on 5.11.25 and did Not Adopt. Author informed.
Resolution #/Title/Date Submitted	A-15-25 - Increasing Regulation and Education regarding Supplement Usage
Original RESOLVEDS:	<p>RESOLVED: That CAFP support updated policies regarding regulation and surveillance of nonmedication health-related products and dietary supplements, especially those that are or have been exempted out of FDA premarket review.</p> <p>RESOLVED: That CAFP support studies regarding dietary supplement efficacy, possible medication interactions, and adverse effects.</p>

	<p>RESOLVED: That CAFP advocate for supplement companies to make more available information regarding manufacturing, benefits, efficacy, related studies, adverse effects, and recalls regarding their products.</p> <p>RESOLVED: That CAFP support resource allocation (by encouraging curricular change) toward education on supplements, recommended usage, and their interactions, including within medical schools and physician residency training.</p>
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and Approved the committee recommendation to Not Adopt.
Final Action:	The BOD met on 5.11.25 and did Not Adopt. Author informed.
Resolution #/Title/Date Submitted	A-16-25 - In Support of the Establishment of Universal Cash Transfer Program in Pregnancy
Original RESOLVEDS:	<p>RESOLVED: That CAFP should support the establishment of universal cash transfer programs for all pregnant individuals in order to improve birth outcomes which in turn has been shown to reduce incidence of cardiovascular disease in adulthood as well as promote the advancement of health equity.</p> <p>RESOLVED: That CAFP should refer this issue to AAFP.</p>
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and Approved the committee recommendation to Not Adopt.
Final Action:	The BOD met on 5.11.25 and did Not Adopt. Author informed.
Resolution #/Title/Date Submitted	A-17-25 - Standardized POCUS Training in Family Medicine Residencies
Original RESOLVEDS:	<p>RESOLVED: That California Academy of Family Physicians (CAFP) advocate for the inclusion of standardized POCUS training as a core competency of all family medicine residency programs in California; and</p> <p>RESOLVED: That CAFP work with the AAFP to encourage Accreditation Council for Graduate Medical Education (ACGME) to require POCUS curricula in family medicine residencies.</p> <p>RESOLVED: That the CAFP collaborate with the AAFP and other relevant organizations to promote the development and dissemination of, evidence-based POCUS curricula for family medicine residencies.</p>
Recommended Actions and	The BOD met on 5.11.25 and Approved the committee recommendation to Not Adopt.

Progress Notes:	
Final Action:	The BOD met on 5.11.25 and did Not Adopt. Author informed.
Resolution #/Title/Date Submitted	A-19-25 - Opposition to Artificial Turf Bans
Original RESOLVEDS:	RESOLVED: Be it so resolved that CAFP opposes legislation banning artificial turf athletic fields.
Recommended Actions and Progress Notes:	The BOD met on 5.11.25 and Approved the committee recommendation to Refer back to the Committee on Public Health and Equity (CPHE) for further discussion and a recommendation. Author informed.
Final Action:	The BOD met on 8.9.25 and did Not Adopt. Author informed.