

BOR Action on BOG Resolutions Now Available

A summary of Board of Regents (BOR) actions on Board of Governors (BOG) resolutions debated at the November 2019 ACP Board of Regents (BOR) meeting is available below. Resolutions initiated by ACP members and endorsed by a chapter council and the BOG become ACP policy when adopted by the BOR.

If you have an idea you'd like to suggest to ACP, consider submitting a resolution to your Governor or local ACP chapter. Visit your [ACP chapter website](#) for more information on how to contact your Governor or chapter staff about proposing a resolution.

Board of Regents Actions Taken on BOG Resolutions, November 2-3, 2019, Meeting

Adopted and referred for implementation (See lines 25-62 and 73-158):

12-F18. Developing Policy to Improve the Safety of Electronic Prescribing

17-S19. Opposing Non-Competency Based Fast Track Medical Education

1-F19. Creating a Toolkit to Optimize Physician-Led Care Teams with Advanced Practice Providers

2-F19. Establishing a Work Group to Improve Care Coordination between Hospital and Ambulatory Care

6-F19. Recognizing Obesity as a Chronic Disease and Advocating for Insurance Coverage of Evidence-based Treatments

7-F19. Engaging Stakeholders to Reduce Violence and Teach Conflict Resolution

8-F19. Developing Policy on Excessive Heat Protection

11-F19. Studying the Frequency and Impact of Drug Recalls and Shortages

13-F19. Advocating for CMS to Ease the Burdens of Risk Adjusted Factor Scoring on Physicians

14-F19. Reviewing Literature on the Impact of Informal Caregiving on Healthcare Outcomes

15-F19. Updating Ethical Guidance on Medical Professional Online Endorsements as Social Media Influencers

16-F19. Opposing the Misuse of Conscience Clauses

Adopted as a reaffirmation (See lines 65-70):

5-F19. Researching and Recognizing Gender Expectations for Female Physicians

The Board of Regents

Voted: to approve, as a Consent Calendar, recommendations regarding the disposition of the following resolutions adopted at the Fall 2019 Board of Governors Meeting:

Resolution 12-F18. Developing Policy to Improve the Safety of Electronic Prescribing

(Adopted and referred to the Medical Practice and Quality Committee for implementation with input from the Medical Informatics Committee):

RESOLVED, that the Board of Regents develops policy aimed at improving the safety of the electronic prescribing process, including, but not limited to: ensuring the appropriate use of auto-refill and auto-renewal, preventing unauthorized requests for new medication and/or DME, preventing dispensing of discontinued medications or doses, maintaining accurate lists of medications and allergies, and allowing for easier and more intuitive discontinuation of medications; and be it further

RESOLVED, that the Board of Regents studies and develops a plan to implement these policy recommendations.

Resolution 17-S19. Opposing Non-Competency Based Fast Track Medical Education

(Adopted and referred to the Education Committee for implementation with input from the

40 **Health and Public Policy Committee):**

41 *RESOLVED, that the Board of Regents develop policy that opposes non-competency based fast*
42 *tracking through medical school of any individuals or groups; rather, the same prerequisite*
43 *requirements, curriculum requirements, and demonstration of competencies should be required of*
44 *all students in any medical school program in order to assure basic competency.*

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47 **Resolution 1-F19. Creating a Toolkit to Optimize Physician-Led Care Teams with Advanced**
48 **Practice Providers**
49 **(Adopted and referred to the Patient and Interprofessional Partnership Committee for**
50 **implementation, engaging other staff as appropriate)**

51 *RESOLVED, that the Board of Regents create a toolkit to share best practices and specific real-life*
52 *examples of successful team-based clinical care models that include internal medicine physicians*
53 *working with advanced practice practitioners.*

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56 **Resolution 2-F19. Establishing a Work Group to Improve Care Coordination between Hospital**
57 **and Ambulatory Care**
58 **(Adopted and referred to the Council of Subspecialty Societies for implementation)**

59 *RESOLVED, that the Board of Regents establish a collaborative work group for ACP to work with*
60 *specialty societies to establish principles and recommendations to help improve the coordination*
61 *of care between hospital care teams and ambulatory care clinicians/care teams to improve the*
62 *care of patients and the experience of clinicians.*

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65 **Resolution 5-F19. Researching and Recognizing Gender Expectations for Female Physicians**
66 **(Adopted as reaffirmation of College policy)**

67 *RESOLVED, that the Board of Regents research gendered expectations of female physicians and*
68 *its contribution to their work burden and wellness; and be it further*

69 *RESOLVED, that the Board of Regents propose and advocate for mechanisms to recognize and*
70 *address the differential clinical burden placed on female physicians by patient expectations.*

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73 **Resolution 6-F19. Recognizing Obesity as a Chronic Disease and Advocating for Insurance Coverage of**
74 **Evidence-based Treatments**
75 **(Adopted and referred to the Medical Practice and Quality Committee for implementation with input**
76 **from the Clinical Guidelines Committee):**

77 *RESOLVED, that the Board of Regents should advocate for all insurers to recognize that obesity is a*
78 *chronic disease and to cover evidence-based treatments for obesity.*

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81 **Resolution 8-F19. Developing Policy on Excessive Heat Protection**
82 **(Adopted and referred to the Health and Public Policy Committee for implementation):**

83 *RESOLVED, that the Board of Regents studies data on illnesses caused by excessive heat exposure*
84 *and develops appropriate policy on excessive heat exposure.*

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87 **Resolution 11-F19. Studying the Frequency and Impact of Drug Recalls and Shortages**
88 **(Adopted and referred to the Health and Public Policy Committee for implementation with input from**
89 **the Medical Practice and Quality Committee):**

90 *RESOLVED, that the Board of Regents studies the frequency and impact of drug recalls and*
91 *shortages, and advocates for reasonable solutions.*

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94 **Resolution 13-F19. Advocating for CMS to Ease the Burdens of Risk Adjusted Factor Scoring on**
95 **Physicians Practicing in Accountable Care Organizations**
96 **(Adopted and referred to the Medical Practice and Quality Committee for implementation with input**
97 **from the Medical Informatics Committee):**

98 *RESOLVED, that the Board of Regents lobby CMS to develop policies that minimize the burdens*
99 *that RAF scoring has placed on clinicians and maximize the accuracy of risk adjustment scoring by*
100 *leveraging automated data collection technologies in the EHR that capture and store clinical data*
101 *to accurately account for severity, comorbidities, sociodemographic and other risk factors*
102 *contributing to patient health outcomes without relying on clinicians and clinic staff to re-enter this*
103 *data at each clinical encounter; and be it further*

104 *RESOLVED, that the Board of Regents study how value-based medicine is affecting patient*
105 *outcomes, cost, the patient experience, and the physician experience.*

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108 **Resolution 14-F19. Reviewing Literature on the Impact of Informal Caregiving on Healthcare Outcomes**
109 **(Adopted and referred for implementation as follows:**

110 **1st Resolved: Health and Public Policy Committee with input from the Clinical Guidelines Committee and**
111 **Ethics, Professionalism, and Human Rights Committee**

112 **2nd Resolved: Education Committee**

113 **3rd Resolved: Patient & Interprofessional Partnership Committee with input from Medical Practice staff)**

114 *RESOLVED, that the Board of Regents review the literature regarding family and informal home-*
115 *based caregiving as it impacts health outcomes, and summarize the evidence regarding caregiver*
116 *education and training, well-being, and the impact of findings on patient outcomes; and be it*
117 *further*

118 *RESOLVED, that the Board of Regents develop a strategy to inform and educate internists on the*
119 *importance of and best ways to support family and informal caregivers, including existing*
120 *certification programs and education; and be it further*

121 *RESOLVED, that the Board of Regents develop guidance, best practices and tools for physicians to*
122 *use in consultation with patients and their caregivers that aligns with patient and caregiver needs.*

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125 **Resolution 15-F19. Updating Ethical Guidance on Medical Professional Online Endorsements as Social**
126 **Media Influencers**

127 **(Adopted and referred to the Ethics, Professionalism, and Human Rights Committee for**
128 **implementation):**

129 *RESOLVED, that the Board of Regents review and update current ethical guidance for medical*
130 *students' and physicians' relationships with companies for the purposes of marketing/endorsing*
131 *products in the context of the current promotional environment including online and social media*
132 *platforms with particular attention to social media influencers.*

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BOG Resolutions extracted from the Consent Calendar:

Resolution 7-F19. Engaging Stakeholders to Reduce Violence and Teach Conflict Resolution

The Board of Regents extracted Resolution 7-F19 from the Consent Calendar to discuss. Following discussion, the Board of Regents

Voted: to adopt and refer Resolution 7-F19 to the Health and Public Policy Committee for implementation with input from the Education Committee.

RESOLVED, that the Board of Regents engage appropriate stakeholders to deescalate violence and teach conflict resolution.

Resolution 16-F19. Opposing the Misuse of Conscience Clauses

The Board of Regents extracted Resolution 16-F19 from the Consent Calendar to discuss. Following discussion, the Board of Regents

Voted: to adopt and refer Resolution 16-F19 to the Ethics, Professionalism, and Human Rights Committee for implementation with input from the Education Committee and the Health and Public Policy Committee on the final resolved clause.

RESOLVED, that the Board of Regents oppose the misuse of conscience clauses to justify limiting access to care in a manner that discriminates against individuals or groups of individuals; and be it further

RESOLVED, that the Board of Regents reviews current ACP Policy to determine if additional policy guidance should be provided on conscience clauses; and be it further

RESOLVED, that the Board of Regents create specific resources for education and advocacy related to conscience clauses.