MMS Committees: FY19 and FY20 Activities and Initiatives

Special Committees

1 2		SSACHUSETTS MEDICAL SOCIETY REPORT ON ACTIVITIES AND INITIATIVES
3 4		
5 6 7	Code: Title:	Report 17 FY19 Goals/Activities (2018-2019) FY20 Activities and Initiatives (2019-2020)
8 9 10	Committee:	Committee on Accreditation Review Jacob Karas, MD, Chair
11	Committee Purpose or Miss	ion
12 13 14 15 16 17	To oversee and serve as a health care organizations se compliance with nationally r	statewide resource for hospitals, specialty societies, and eeking to offer continuing medical education. To monitor ecognized continuing medical education (CME) standards ality education for physicians throughout Massachusetts and
18		FY19 Report on Goals/Activities
19		
20 21 22 23 24		with the Accreditation Council for Continuing Medical Recognition Requirements: Markers of Equivalency.
25 26 27 28 29	The purpose of the Ma decisions and process Accreditors are equiva	rkers of Equivalency is to ensure that the accreditation es used by the ACCME and Recognized State lent and that ACCME-accredited and state-accredited d based on the same rules.
30 31 32 33 34 35 36 37 38	participate in their audit Equivalency. The data of equivalency, enabling th applying the national sta process. The ACCME of decision made by the M	the MMS as one of the Recognized State Accreditors to process to ensure compliance with the Markers of collection/audits are quality assurance tools to support the ACCME to determine if Recognized Accreditors are andards for accreditation decisions and the accreditation conducted an audit of materials from a recent accreditation MS to assess our interpretation and adherence to the and agreed with the MMS compliance findings.
39 40 41 42 43 44	accomplished the delive 2018 Annual Report dat fees, submission of acc	ers of Equivalency requirements, the MMS facilitated and ery of data or information to ACCME as requested, including: a for all accredited providers, collection of the 2019 annual reditation findings and/progress report decisions, and Medical Societies (SMS) recognized accreditor monthly

- 1 2. Goal/Activity
- 2 To continue to review and update all MMS accreditation policies and procedures to ensure 3 equivalency with ACCME's policies, standards, and criteria.
- 4 5
 - <u>Status</u>

The MMS Recognized Accreditor Program maintains up to date accreditation policies and
procedures. New information is disseminated by way of the MMS website, Annual Accreditation
Conference, CME Accreditation Orientation Webinar Series, informational emails, quarterly
webinars, and one-on-one and group training sessions for providers, surveyors, and Committee
on Accreditation Review (CAR) members to ensure that all stakeholders are applying the same
national standards and processes.

13 3. Goal/Activity

To effectively manage the accreditation process ensuring providers, surveyors, and CME staff are adopting revised accreditation criteria and requirements including the new menu of criteria Accreditation with Commendation.

17 18 Status

One of the roles of the CAR is to review MMS accredited providers for compliance with the
 ACCME's and the MMS's CME standards and regulations. As of June 1, 2019, there are 41
 MMS-accredited providers, including 32 hospitals/systems, four specialty societies, one
 government/military organization, and four other health care organizations.

From June 2018 to May 2019, the CAR made six accreditation decisions: one provider received Accreditation with Commendation, which confers a six-year term of accreditation; five providers received Accreditation conferring a four-year accreditation term, of which one provider was required to submit a progress report. The CAR also reviewed two progress reports both which demonstrated compliance with ACCME and MMS requirements that were previously found not in compliance.

For CY2018, MMS-accredited providers offered 1,212 CME activities yielding 56,000 collective physician interactions and 36,000 non-physician interactions, for a total of 98,000 interactions. Over the year, accredited providers presented more than 6,000 hours of accredited educational activities designed to change physician competence, performance, or patient outcomes.

As of November 2019, if MMS accredited providers choose to seek Accreditation with
 Commendation, they will be required to submit documentation for compliance using the new
 menu of Accreditation with Commendation criteria. MMS staff provided ongoing education to our
 state-accredited providers at the Annual Accreditation Conference, and during quarterly
 webinars. A separate training session was offered to committee members and surveyors. We
 will continue to provide education and training on the new Accreditation with Commendation
 Criteria during quarterly webinars.

- 44 4. Goal/Activity
- 45 To educate CME staff at MMS-accredited organizations on methods to achieve compliance with 46 the MMS accreditation criteria and requirements.
- 47 48 Status

49 The Annual Accreditation Conference: "Leading and Designing for Change", co-sponsored by

50 the MMS and Rhode Island Medical Society (RIMS), was held on June 6, 2019. Dr. Jeffrey

- 51 Drazen, Editor-in-Chief, *New England Journal of Medicine*, presented the "23rd Annual Ralph C.
- 52 Monroe, MD, Memorial Lecture" tracing the rise of high-quality evidence that is used by the

1 medical profession to make decisions about treatment. Other presentations included; Aligning 2 Your CME Programs with Continuing Certification (MOC) presented by Susie Flynn, Director of 3 Certification Standards and Programs, American Board of Medical Specialties; and an update 4 from the Massachusetts Board of Registration in Medicine presented by George Zachos, 5 Executive Director, Mass. Board of Registration in Medicine and Brendan Abel, Director of State 6 Government/Legislative Counsel, MMS. Also included was a review of the ACCME's Menu of 7 Criteria for Accreditation with Commendation presented by Henry Tulgan, MD, Director of 8 Medical Education, Baystate Wing Hospital; Danna Muir, Director of Accreditation & 9 Recognition, MMS/NEJM Group and Nancy Marotta, Manager, Recognized Accreditor Program, 10 MMS/NEJM Group.

11

The conference had 52 attendees including 16 physicians. Participants had positive reviews,
 sighting Dr. Drazen's presentation as a highlight, as well as having a better understanding of the
 ACCME's new criteria for accreditation with commendation and interest in applying for
 commendation during their next reaccreditation.

16

Quarterly webinars focusing on CME Accreditation are conducted with the RI Medical Society
 (RIMS) to offer providers including DMEs, CME Coordinators, and others involved in CME, the
 opportunity to get feedback to their accreditation queries, and gain insight and information on
 recurring issues, and changes to the accreditation processes/requirements, as well as share
 best practices and strategies.

Individual trainings and teleconference consultations were conducted with MMS accredited
 providers who were either new to their CME roles or needed clarification on accreditation
 criteria.

27 5. <u>Goal/Activity</u>

To improve compliance rates and reduce the number of MMS-accredited providers required to
 submit progress reports.

31 <u>Status</u>

Fewer MMS Accredited Providers were required to submit a progress report in 2018-2019. MMS staff continued to work with Accredited Providers to assist with questions on compliance. Reaccreditation decisions letters are followed up with email communication or conference calls to address issues of non-compliance and how these issues may be resolved. Quarterly Accreditation Webinars and targeted emails also focus on recurring issues of non-compliance. The MMS website together with the ACCME website offer resources to providers to assist in strengthening understanding for compliance with these recurring issues.

40 6. Goal/Activity

Increase the MMS surveyor pool and train both new surveyors and committee members on the
 ACCME's accreditation policies, standards, and criteria.

- 43 44 Status
- 45 Several MMS Committee on Medical Education members expressed interested in becoming
- 46 MMS surveyors. Invitations to ACCME and MMS trainings were extended to these members
- 47 and follow-up training opportunities will continue to be available.

1	FY19 Committee Budget
2	\$ 2,084
3	
4	FY19 Actual Committee Expenditures
5	\$ 361
6	
7	FY19 Estimated Cost of Committee Staff Support
, 8	\$ 3,000
9	\$ 5,000
10	Number of Appointed Members and Number of Advisors
11	12 members, 1 advisor
12	
13	FY19 Number of Meetings and Percentage of Appointed Member Attendance
14	4 meetings with an average attendance of 69%
15	
16	FY19 Number of Meetings at which a quorum was met: 4 meetings
17	
18	FY20 Activities and Initiatives
19	
20	Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024 Strategic
21	Plan. Focusing on initiatives prioritized as critical or immediate, develop activities for
22	initiatives to which your committee can make a significant contribution in FY'20 and describe the
23	nature of that contribution. Include initiatives, if any, for which your committee is listed on a
24	Strategic Initiative Plan.

Activity	Related Initiative (from Strategic Plan)
To maintain compliance with the ACCME Recognition Requirements: Markers of Equivalency in order to provide MMS Accreditation to organizations throughout Massachusetts.	MMS/#6/Intermediate : Develop a strategy to increase MMS brand recognition, profile, and communication with target audiences.
Engagement with 41 MMS Accredited Institutions increases the MMS brand recognition and profile providing accredited CME activities to physicians.	
To review and update all accreditation policies and procedures and effectively manage the accreditation process ensuring providers and surveyors are adopting all revised accreditation criteria and requirements including the new menu of criteria Accreditation with Commendation.	MMS/#6/Intermediate : Develop a strategy to increase MMS brand recognition, profile, and communication with target audiences.
Review the MMS Accreditation process maintaining high standards to promote the MMS brand recognition.	

To review all MMS reaccreditation and progress report submissions to determine compliance in order to maintain MMS Accreditation. Review MMS Recognized Accreditor Program to optimize revenue and support the NEJM Group Strategy. This program contributes revenue to NEJM Group.	MMS #5 Critical: Ensure the financial strategy support NEJM Group's sustainability.
To share best practices on developing continuing medical education activities with MMS-accredited providers which fosters greater access to quality continuing medical education throughout the Commonwealth of Massachusetts. Increase MMS branding through MMS Recognized Accreditor Program and its 41 providers. Provide MMS Accreditation to hospitals and other health care organizations throughout Massachusetts reaching a diverse population of physicians and healthcare teams. Oversee MMS Accredited Providers to ensure the availability of quality accredited education for physicians to address issues of concern within their institutions, medical specialty, and communities. Continue to provide educational outreach to accredited providers through grand rounds on such important topics as the social determinants of health, physician burnout, opioid use disorder, etc.	 MMS #6 Intermediate: Develop a strategy to increase MMS brand recognition, profile, and communication with target audiences. MMS #7/Intermediate: Create strategies that will engage various member constituent groups and increase engagement, diversity, and trust in MMS. MMS # 8 Immediate: Expand advocacy efforts in collaboration with key stakeholders on issues deemed critical to physicians and patients.

2 **Instructions**: *Please list information below for any/all adopted resolution(s)/report assigned to your*

- 3 committee. For resolutions/reports from I-18, you may leave the second column area blank.
- 4

REPORTS DUE	TO HOD IN FY20 (at I-19 or A-20) o	or to BOT for Decision
Resolution or Report	Related Goal/Initiative Number	/Report Due (or in
Code/Title	Priority from Strategic Plan	Consultation)

- 5
 - FY20 Committee Budget
- 6 <u>FY20 C</u> 7 \$2,032

- 9 FY20 Estimated Cost of Committee Staff Support
- 10 \$3,000

1 Special Committee Due for Renewal

2

Instructions: If your special committee is due for renewal in FY'20, please indicate how
the work of the committee aligns with the Strategic Plan. In addition, please review the
Strategic Initiative Priority Grid and indicate how the committee can support MMS (Goal
C) Strategic Initiatives 1-3.

7

8

Alignment with Strategic Plan (in 100 words or less):

9 The MMS Committee on Accreditation Review (CAR) continues to support the 10 Mission of the Massachusetts Society to advance medical knowledge and to promote 11 medical institutions formed on liberal principles for the health, benefit and welfare of 12 the citizens of the Commonwealth. The CAR oversees and serves as a statewide 13 resource for hospitals, specialty societies, and health care organizations seeking to 14 offer continuing medical education. The CAR monitors compliance with nationally 15 recognized continuing medical education standards and guidelines in order to ensure 16 quality education for physicians throughout Massachusetts and its contiguous states.

17 10

18 Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less):

19 The CAR has a unique role in supporting the MMS strategic plan with its

20 engagement of the 41 MMS accredited providers throughout the Commonwealth of

21 MA. It is perfectly positioned to continue to support and promote the MMS brand,

profile, and communication with targeted audiences and to increase engagement,

23 diversity, and trust in the MMS with the accredited organizations.

1 2 3	MASSACHUSETTS MEDICAL SOCIETY COMMITTEE REPORT ON ACTIVITIES AND INITIATIVES
4 5 6 7 8 9 10	Code:Report 18Title:FY19 Goals/Activities (2018-2019)FY20 Activities and Initiatives (2019-2020)Committee:Committee on Continuing Education ReviewHenry Tulgan, MD, Chair
11 12 13 14 15 16 17 18 19 20 21 22	<u>Committee Purpose or Mission</u> The mission of the Committee on Continuing Education Review (CCER) is to: provide counsel to the MMS regarding continuing education activities; serve in an advisory role to organizations wishing to jointly provide educational activities with the Massachusetts Medical Society (MMS); review proposed activities submitted to the MMS, oversee and assist in the development of these educational activities, ensure that each activity is in compliance with the Accreditation Council for Continuing Medical Education (ACCME) Updated Accreditation Criteria; determine if these proposed activities contribute to improvements in physician competence, performance, and/or patient outcomes, are based on valid content, independent of commercial interest, and support the strategic priorities of the Massachusetts Medical Society.
23 24	FY19 Report on Goals/Activities
24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39	 <u>Goal/Activity</u> To assist physicians in improving patient care by developing high quality, evidence- based continuing education. To meet the educational needs of the MMS membership, as outlined in the MMS strategic priorities, and successfully address identified gaps in knowledge and/or competence. This may include educational didactic activities; multiple format home study programs, on-line programming, Journal-based CME, manuscript review, performance improvement CME, as well as national and international symposia, when appropriate. To continue to work with the coordinators of NEJM Weekly CME Online Program, NEJM Interactive Medical Cases, NEJM Review CME Program, NEJM Knowledge+ Internal Medicine Board Review, NEJM Knowledge+ Family Medicine Board Review, NEJM Knowledge+ Pediatric Medicine Board Review, NEJM Manuscript Review, Journal Watch General Medicine Print, as well as other educational activities as they develop.
39 40 41 42 43 44 45 46 47 48 49	For the 2018 ACCME Annual Report, the MMS accredited more than 300 directly and jointly provided educational activities resulting in approximately 142,000 physician interactions and 23,000 interactions with other health care professionals. The Committee on Continuing Education Review met six times during the fiscal year to review and discuss proposed directly and jointly provided educational activities to be accredited by the MMS. Educational activities may be initiated by several sources including resolutions that are adopted from the MMS House of Delegates, Board of Trustees, MMS leadership, committees, district medical societies, members, state-mandated education requirements, national trends, etc. All educational activities are carefully reviewed to ensure that they:

1		•	are aligned with the MMS organizational goals and priorities, strategic plan
2			and MMS CME mission statement,
3		•	address educational needs and practice gaps for the target audience,
4 5		•	incorporate adult learning principles into the instructional design of the
6		•	activity, are designed to change learner competence, performance and/or patient
7		•	outcomes,
8		•	use the appropriate learning formats based on the desired expected results,
9		•	are independent and free of commercial influence,
10		•	are compliant with the Accreditation Council for Continuing Medical
11			Education (ACCME)'s Accreditation Criteria and policies and all other
12			applicable education standards and policies.
13		•	Promote and support safe, effective, and quality patient care.
14 15	ть		ditation to an works closely with all departments within the MMC NE IM and
15 16			ditation team works closely with all departments within the MMS, NEJM, and oup to develop directly provided activities and with external organizations and
17			b develop jointly provided activities.
18	μa		develop joinity provided activities.
19	2.	<u>Goal/A</u>	ctivity
20			luate each MMS accredited activity to be certain it is in compliance with the
21			E, AMA, BORIM, and MMS standards governing continuing medical
22		educat	tion. To work continuously to assure that all MMS-provided and jointly provided
23		educat	tional activities meet the highest standards for content and objectivity.
24			
25		<u>Status</u>	
26			CER conducts a comprehensive review of all proposed educational activities to
27			redited by the MMS to ensure compliance with the ACCME Accreditation
28			a and policies, with special attention given to the ACCME's CME Clinical
29			nt Validation Policy, guidance on Dealing with Controversial Topics in Your
30 31			Program, as well as the The Standards for Commercial Support: Standards to
32			e Independence in CME Activities SM . In addition to the ACCME requirements, es are reviewed for compliance with the American Medical Association (AMA)
32 33			equirements for CME activities. Activities are also reviewed to ensure that they
34			compliance with the MA BORIM state-mandated education and other state
35			ion requirements for physician licensure. Recommendations are then made to
36			ivity planners based on the CCER review. Committee members review
37			ed relevant financial relationships for activity planners to resolve conflicts of
38			t and are often called upon to review educational content for MMS accredited
39			es to ensure that they are compliant with all ACCME and MMS requirements.
40			
41	3.		
42			p abreast of current information from the ACCME, AMA, AAFP, ABMS, MA
43		BORM	and other continuing education entities to assess the impact of any changes

BORM, and other continuing education entities to assess the impact of any changes
 on the MMS as a provider of continuing medical education, specifically as it applies
 to MMS-provided programs.

1 Status

2 The CCER continues to be engaged in all areas related to continuing medical education and is 3 provided information on changes in rules or standards that may impact the MMS CME program. 4 This past year, they provided feedback on proposed revisions on the ACCME Standards for Commercial Support: Standards to Ensure Independence in CME ActivitiesSM and the American 5 6 Board of Medical Specialties (ABMS) Continuing Board Certification: Vision for the Future Draft Report for Public Comment.

7 8

9 In addition, CCER members are invited to participate in the MMS Annual Accreditation

10 Conference where they can enhance their knowledge and expertise on matters related to CME. 11 They also participate in the Annual Education Committees Retreat where they review and

- 12 discuss the MMS portfolio of educational activities and assess whether the MMS is meeting its 13 CME mission.
- 14

17

18

15 4. Goal/Activity 16

To build bridges with other stakeholders through collaboration and cooperation to enhance the patient-physician relationship and improve quality medical practice and access to care.

Status

19 20 The work that the CCER does provides support for all the collaborations that occur in 21 MMS/NEJM Group accredited CME activities. Members' collective knowledge and expertise 22 elicit valuable recommendations for partners, faculty, content and help enhance the quality of 23 the CME activities that are approved for accreditation by the MMS. 24

25 5. Goal/Activity

26 To oversee and assist in the development of jointly provided programs submitted from MMS 27 district medical societies, MMS contracted specialty societies, and other health organizations of 28 close working relationship with the MMS. To review such program proposals and make 29 determinations as to the quality of the offering. To lend support to these outside groups in the 30 development of program content, objectives, faculty, and location and to be certain they are in 31 compliance with the mission of the Society, its strategic plan, and applicable national education 32 standards. To evaluate available resources necessary to support proposed joint providership or 33 collaborative arrangements. To encourage joint providership activities that are compatible with 34 the MMS's overall business and education missions. 35

36 Status

37 The MMS has developed strong collaborative relationships with its joint providership partners. 38 In its 2018 report to the ACCME, the MMS indicated that it jointly provided 139 educational 39 activities on such important topics as physician burnout, safe prescribing and dispensing to 40 prevent overdoses in pediatric patients, hepatitis management, and enhanced recovery after 41 surgery to name a few topics. Through a new collaboration with the NEJM Group, the MMS 42 accredited the educational activities hosted on the Airway Management Education Center 43 advanced learning platform. In addition, new information was posted on the MMS website to 44 encourage organizations seeking to accredit their educational activities to contact the Accreditation team. 45

- 46
- 47 FY19 Committee Budget
- 48 \$2,224

- 1 FY19 Actual Committee Expenditures
- 2 0 (conference calls) 3
- 4 FY19 Estimated Cost of Committee Staff Support
- 5 \$9,000 (6 meetings)
- 6
- 7 Number of Appointed Members and Number of Advisors
- 8 7 members and 1 advisor 9
- 10 FY19 Number of Meetings and Percentage of Appointed Member Attendance
- 11 6 meetings with an average attendance of 62% percent
- 12

16

13 FY19 Number of Meetings at which a quorum was met: 4

FY20 Activities and Initiatives

- 17 Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024
- 18 Strategic Plan. Focusing on initiatives prioritized as critical or immediate,
- 19 develop activities for initiatives to which your committee can make a significant
- 20 contribution in FY'20 and describe the nature of that contribution. Include initiatives, if
- 21 any, for which your committee is listed on a Strategic Initiative Plan.
- 22

Activity	Related Initiative (from Strategic Plan)
Review, provide feedback, and accredit educational activities identified as part of the road map and support for education on the social determinants of health.	Patients/#2/Critical: Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health
Work with MMS and NEJM Group activity planners to ensure that proposed educational activities are aligned with the MMS strategic plan.	MMS/#2/Immediate: Narrow focus and prioritize activities to align with MMS strategic plan.
In conjunction with MMS and NEJM Group activity planners, assist on developing a financial strategy for the accredited educational activity when appropriate.	MMS/#5/Critical: Ensure the financial strategy supports NEJM Group's sustainability.
Advise and assist MMS staff in ways to support and promote the MMS brand, profile and communication for all educational activities with appropriate target audiences.	MMS/#6/Intermediate: Develop a strategy to increase MMS brand recognition, profile, and communication with targeted audiences.
Develop and implement quality continuing medical education activities for physicians and other health care professionals that improve patient care.	MMS/#7/Intermediate: Create strategies that will engage various member constituent groups and increase engagement, diversity, and trust in MMS.
Review, provide feedback, and accredit educational activities to support and	Physicians/#3/Critical: Provide leadership development offerings for physicians and physician-led teams.

promote education on leadership	
development.	

1 Instructions: Please list information below for any/all adopted resolution(s)/report

- 2 assigned to your committee. For resolutions/reports from I-18, you may leave the second
- 3 column area blank.
- 4

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision

Resolution or Report	Related Goal/Initiative Number/	Report Due (or in
Code/Title	Priority from Strategic Plan	Consultation)

5

- 6 FY20 Committee Budget
- 7 \$1,000
- 8 (Funding will most likely be used for physician representation/travel for the national
- 9 ACCME meeting)
- 10

11 FY20 Estimated Cost of Committee Staff Support

- 12 \$18,000 (6 meetings)
- 13

14 Special Committee Due for Renewal

15

Instructions: If your special committee is due for renewal in FY'20, please indicate how
the work of the committee aligns with the Strategic Plan. In addition, please review the
Strategic Initiative Priority Grid and indicate how the committee can support MMS (Goal
C) Strategic Initiatives 1-3.

20 21

Alignment with Strategic Plan (in 100 words or less):

22 The MMS Committee on Continuing Education Review plays a vital role in supporting 23 the Society's overall mission to "The purposes of the Massachusetts Medical Society 24 shall be to do all things as may be necessary and appropriate to advance medical 25 knowledge, to develop and maintain the highest professional and ethical standards 26 of medical practice and health care, and to promote medical institutions formed on 27 liberal principles for the health, benefit and welfare of the citizens of the 28 *Commonwealth.*" Every educational activity is designed to advance medical 29 knowledge and improve learner competence. The CCER is responsible for the 30 review and approval of all MMS accredited educational activities and ensuring that 31 the highest quality, evidence-based education is available to physicians and other 32 health care professionals with the goal of improving patient care. The CCER 33 supports the Strategic Plan as outlined in the above grid under Activities and 34 Initiatives.

- 35
- 36 Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less):

The MMS Committee on Continuing Education Review's primary responsibility is to review all proposed educational activities to ensure that they are aligned with the MMS organizational goals and priorities, strategic plan and MMS CME mission statement and address practice gaps and educational needs of the target audience. The CCER's work is essential to support the Society's mission to advance medical

42 knowledge and it is strongly recommended that the CCER is granted a renewal.

1 2	СОММІ	MASSACHUSETTS MEDICAL SOCIETY TTEE REPORT ON ACTIVITIES AND INITIATIVES
2	COMMAN	THE REPORT ON ACTIVITIES AND INTRATIVES
4 5 6	Code: Title:	Report 19 FY19 Goals/Activities (2018-2019)
7 8 9	Committee:	FY20 Activities and Initiatives (2019-2020) Committee on Diversity in Medicine Simone Wildes, MD, Chair
10		
11	Committee Purpose of	
12 13 14 15 16 17	medical care for minor awareness of cultural more diversity within the	mmittee on Diversity in Medicine (CDM) is to increase access to ity populations and other underrepresented groups, heighten practices and barriers through education, create opportunities for ne medical profession, and be proactive in advocating for federal ction to eliminate disparities in health care.
18		FY19 Report on Goals/Activities
19 20 21	1. <u>Goal/Activity</u>	
22 23 24	To work to promote health disparities in	e increased attention to diversity within the medical profession and n Massachusetts.
25 26 27	Activity 1: Engage underrepresented	with the community to encourage careers in medicine for minorities.
28 29 30 31	facilities, or other e	opportunities to engage with medical schools, health care entities to discuss strategies and barriers for underrepresented al schools and in medicine.
32 33 34		opportunities for MMS engagement in promoting attention to the d how it affects physicians and patients.
35	<u>Status</u>	
36	Ongoing.	ing with Harvard Medical School, and faculty from Harvard
37 38 39	Medical School, Tu	ufts School of Medicine, Boston University School of Medicine, and shool, the Committee hosted an event for underrepresented
40		tudents from all four Massachusetts medical schools. There were
41	0	he event. Through formal presentations, questions and answers,
42 43		sions and informal networking, faculty and students shared their norities in medical school, and in health care facilities, and offered
43 44		ng with racism, bias and other barriers they encountered in their
45	medical careers.	
46 47	Feedback from att	endees was overwhelmingly positive. Attendees were appreciative
48		ortunity to connect with other underrepresented minority medical
49 50		ty from the different medical schools, to share challenges and
51 52 53		ntinues to discuss racism, affecting both physicians and patients, nding the issue, and continues to explore the idea of offering
54		S members on the topic.

1 2. Goal/Activity

To serve as a resource to MMS and promote MMS engagement in efforts to increase diversity
in medicine and reduce health care disparities.

Activity 1: Engage with MMS Committee on Public Health and the MMS Minority Affairs Section and other groups to highlight opportunities to reduce health care disparities.

Activity 2: Work to develop a policy recommendation related to the role of social determinants of
 health in health outcomes.

Activity 3: Provide input, as needed, on policy and communications activities addressing health
 care disparities and diversity in medicine.

- 13 14 Status
- 15 Ongoing.

16 The Committee wrote a report for I-18 recommending health policy recognizing social 17 determinants of health as playing a key role in health outcomes and health disparities, and that 18 addressing social determinants is critical to patient health and a sustainable, effective health 19 care system. The policy was adopted by the House of Delegates. Social determinants of health 20 are now a strategic focus of the MMS. 21

The policy served as the basis for the social determinants of the May issue of *Vital Signs*, focusing on social determinants of health, and is a guiding element of the Access to Care Strategic Initiative Plan.

25

5

6

7

26 The committee also reviews and makes recommendations related to proposed HOD policies 27 and policies scheduled for sunsetting, including a report last year collection of race and ethnicity 28 data using census categories. The committee has representation on the Minority Affairs Section 29 and has provided input regarding issues of underrepresented minorities in medicine. The 30 committee actively engages with the Committee on Public Health (CPH) through representation 31 at CPH meetings. The Committee on Diversity in Medicine chair now also serves as the 32 Committee on Public Health vice chair, further promoting opportunities for alignment of 33 activities, and advising on areas of committee expertise, such as health equity and social 34 determinants of health. 35

The committee also administers the Society's Reducing Health Disparities award, an annual
 award instituted by the MMS to recognize individuals who are actively working to reduce health
 care disparities in Massachusetts.

- 40 FY19 Committee Budget
- 41 \$3,107
- 42
- 43 FY19 Actual Committee Expenditures
- 44 \$1,408, including 5 committee meetings and one medical student networking event
- 45
- 46 FY19 Estimated Cost of Committee Staff Support
- 47 \$6000, for 5 meetings and one event48
- 49 Number of Appointed Members and Number of Advisors
- 50 16 members*, 2 advisors
- 51 *includes one member appointed partway through the year and six members who have never
- 52 attended/replied.

1 FY19 Number of Meetings and Percentage of Appointed Member Attendance

- 2 5 meetings with an average attendance of 41 percent
- 3 *Of members who have ever attended: 72.6%4
 - FY19 Number of Meetings at which a quorum was met: 0

FY20 Activities and Initiatives

- 8
 9 Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024 Strategic
- 10 Plan. Focusing on initiatives prioritized as critical or immediate, develop activities for
- 11 initiatives to which your committee can make a significant contribution in FY'20 and describe the
- 12 nature of that contribution. Include initiatives, if any, for which your committee is listed on a
- 13 *Strategic Initiative Plan.* 14
 - Activity **Related Initiative (from Strategic Plan)** Advise MMS on issues of health equity, health Patients/#2/Critical: Assess vulnerable disparities, and social determinants of health, populations and determine where the MMS through engagement on the Strategic Initiatives, can have the strongest impact on access to and with the Committee on Public Health appropriate care, including social determinants of health and health disparities. Patients/#2/Critical: Assess vulnerable With available resources, explore opportunities to promote awareness among members and/or populations and determine where the MMS patients, of social determinants of health. can have the strongest impact on access to appropriate care, including social determinants of health and health disparities. Explore opportunities to educate MMS Patients/#2/Critical: Assess vulnerable members about racism, in support of MMS populations and determine where the MMS strategic initiatives. can have the strongest impact on access to appropriate care, including social determinants of health and health disparities. Physicians 3/Immediate Provide leadership development offerings for physicians and physician led teams. Patients/#2/Critical: Assess vulnerable Hold a medical student networking event to support underrepresented minority medical populations and determine where the MMS students in Massachusetts. can have the strongest impact on access to appropriate care, including social determinants of health and health disparities. Physicians/#3/Intermediate: Create a physician community that includes opportunities for networking

5

- **Instructions**: *Please list information below for any/all adopted resolution(s)/report assigned to your*
- 2 committee. For resolutions/reports from I-18, you may leave the second column area blank.

		e Number/ Report Due (or in
Code/Title	Priority from Strategic	
CDM Report I-18 A-4		I-19
Social Determinants of		
Health		
Y <u>20 Committee Budget</u> 2,883		
Y20 Estimated Cost of Cor	nmittee Staff Support	
6,000		
pecial Committee Due fo	r Renewal	
structions: If your special	committee is due for rene	wal in FY'20, please indicate how the work
e committee aligns with th	e Strategic Plan. In additio	on, please review the Strategic Initiative
riority Grid and indicate ho	<i>w</i> the committee can supp	ort MMS (Goal C) Strategic Initiatives 1-3.
	ic Plan <i>(in 100 words or</i>	
		issues of underrepresented minority
		rities related to race and ethnicity. In additio
to the strategic priorities	notod abovo tho l'ammitt	
•		
strategic initiatives on wh	nich the committee has ins	tee is a resource for the MMS on the following sight, expertise, particularly pertaining to
•	nich the committee has ins	tee is a resource for the MMS on the followir sight, expertise, particularly pertaining to
strategic initiatives on wi underrepresented minor	ich the committee has ins ties in medicine:	ight, expertise, particularly pertaining to
strategic initiatives on wi underrepresented minor	nich the committee has ins ties in medicine: n mediate Provide leaders	
 strategic initiatives on whether with the strategic initiatives on whether whether with the strategic initiatives on whether whethe	nich the committee has ins ties in medicine: n mediate Provide leaders ms;	ight, expertise, particularly pertaining to
 strategic initiatives on whether with the strategic initiatives on the strategic initiatives on whether with the strategic initiatives on the strategic initiatives on whether with the strategic initiatives on the strategic i	nich the committee has ins ties in medicine: nmediate Provide leaders ms; nmediate Pursue options on of free medical education	sight, expertise, particularly pertaining to whip development offerings for physicians an to increase medical school affordability, on;
 strategic initiatives on whether with the strategic initiatives on the strategic initiatives on whether with the strategic initiatives on the strat	nich the committee has ins ties in medicine: nmediate Provide leaders ms; nmediate Pursue options on of free medical education ntermediate Identify factor	sight, expertise, particularly pertaining to whip development offerings for physicians an to increase medical school affordability, on; rs that contribute to satisfying work
 strategic initiatives on whether with the strategic initiatives	nich the committee has ins ties in medicine: nmediate Provide leaders ms; nmediate Pursue options on of free medical education termediate Identify factor d advocate with stakeholde	sight, expertise, particularly pertaining to whip development offerings for physicians an to increase medical school affordability, on; rs that contribute to satisfying work ers for action, where needed;
 strategic initiatives on whete underrepresented minor Physicians/#3/Irr physician-led tea Physicians/#6/Irr including the opti Physicians/#4/Irr environments and Physicians/#5/Irr 	nich the committee has ins ties in medicine: nmediate Provide leaders ms; nmediate Pursue options on of free medical education termediate Identify factor d advocate with stakehold itermediate Advocate for	sight, expertise, particularly pertaining to whip development offerings for physicians an to increase medical school affordability, on; rs that contribute to satisfying work ers for action, where needed; fair and equitable systems of compensation
 strategic initiatives on whete underrepresented minor Physicians/#3/Irr physician-led tea Physicians/#6/Irr including the option of the option	nich the committee has ins ties in medicine: nmediate Provide leaders ms; nmediate Pursue options on of free medical education termediate Identify factor d advocate with stakeholde termediate Advocate for diate Create strategies the	sight, expertise, particularly pertaining to whip development offerings for physicians an to increase medical school affordability, on; rs that contribute to satisfying work ers for action, where needed; fair and equitable systems of compensation at will engage various member constituent
 strategic initiatives on whete underrepresented minor Physicians/#3/Irr physician-led tea Physicians/#6/Irr including the option of the option	nich the committee has ins ties in medicine: nmediate Provide leaders ms; nmediate Pursue options on of free medical education termediate Identify factor d advocate with stakehold itermediate Advocate for	sight, expertise, particularly pertaining to whip development offerings for physicians an to increase medical school affordability, on; rs that contribute to satisfying work ers for action, where needed; fair and equitable systems of compensation at will engage various member constituent
 strategic initiatives on whether with underrepresented minor Physicians/#3/Irr physician-led tea Physicians/#6/Irr including the option of the	hich the committee has ins ties in medicine: nmediate Provide leaders ms; nmediate Pursue options on of free medical education termediate Identify factor d advocate with stakeholde termediate Advocate for diate Create strategies the ase engagement, diversity	sight, expertise, particularly pertaining to whip development offerings for physicians ar to increase medical school affordability, on; rs that contribute to satisfying work ers for action, where needed; fair and equitable systems of compensation at will engage various member constituent of and trust in MMS.
 strategic initiatives on whete underrepresented minor Physicians/#3/Irr physician-led tea Physicians/#6/Irr including the optition of the optimised of the optimised	nich the committee has ins ties in medicine: nmediate Provide leaders ms; nmediate Pursue options on of free medical education termediate Identify factor d advocate with stakeholde termediate Advocate for diate Create strategies the ase engagement, diversity C) Strategic Initiatives 1	sight, expertise, particularly pertaining to whip development offerings for physicians ar to increase medical school affordability, on; rs that contribute to satisfying work ers for action, where needed; fair and equitable systems of compensation at will engage various member constituent of and trust in MMS.
 strategic initiatives on whete underrepresented minor Physicians/#3/Irr physician-led tea Physicians/#6/Irr including the option of the option	hich the committee has institutes in medicine: nmediate Provide leaders nmediate Pursue options on of free medical education termediate Identify factor d advocate with stakeholder termediate Advocate for diate Create strategies the ase engagement, diversity <u>C) Strategic Initiatives 1</u> lan for the year, the comm	sight, expertise, particularly pertaining to whip development offerings for physicians ar to increase medical school affordability, on; rs that contribute to satisfying work ers for action, where needed; fair and equitable systems of compensation at will engage various member constituent or and trust in MMS.
 strategic initiatives on whunderrepresented minor Physicians/#3/Ir physician-led tea Physicians/#6/Ir including the opti Physicians/#4/Ir environments and Physicians/#5/Irt MMS/#5/Intermed groups and incres Support for MMS (Goal In developing its action paligned with the strategic	ties in medicine: nmediate Provide leaders nmediate Pursue options nmediate Pursue options on of free medical education termediate Identify factor d advocate with stakeholder termediate Advocate for diate Create strategies the ase engagement, diversity C) Strategic Initiatives 1 Ilan for the year, the comme plan and is especially for	sight, expertise, particularly pertaining to whip development offerings for physicians ar to increase medical school affordability, on; rs that contribute to satisfying work ers for action, where needed; fair and equitable systems of compensation at will engage various member constituent of and trust in MMS.

populations, access to care and improving social determinants of health, and the unio
 of underrepresented minority physicians in strategic priorities benefitting physicians.

		MASSACHUSETTS MEDICAL SOCIETY TEE REPORT ON ACTIVITIES AND INITIATIVES
C	ode:	Report 20
Ti	tle:	FY ['] 19 Goals/Activities (2018-2019) FY20 Activities and Initiatives (2019-2020)
C	ommittee:	Committee on Environmental and Occupational Health Heather Alker, MD, Chair
C	ommittee Purpose or I	Mission
То	o improve the health o	f the public by promoting professional understanding of and nental and occupational health issues.
		FY19 Report on Goals/Activities
1	Goal/Activity	
1.	To promote awarene	ess and understanding of environmental and occupational health other health care professionals, and the general public.
	•	with the development and dissemination of content and nree-year public health campaign directive adopted by the HOD
	Activity: To promote environmental and c	e awareness among and educate physicians on issues related to occupational health.
	activities. The commissue of <i>Vital Signs</i> ; engaged approximation health effects of climins practices in ways that climate change help the committee conver- change research, ec- invited, through the climate change and planning a short vide highlight the relation	tified climate change and its impact on health as the focus for its nittee guided and contributed to the content for the summer 2018 the full issue focused on the theme of climate change and tely a dozen physicians. Articles touched on the global and local nate change, effects on physician practices and other health care icians can take to reduce the environmental impact of their at save money, and how some physicians find activism on ful in countering the stresses of day to day practice. In the fall, ened a group of physicians interested and active in climate ducation, and advocacy. Because of this work, the MMS was committee, to participate in various national efforts related to health on the national scale. This spring, the committee began eo for use on MMS's social media channels, which aims to ship between climate change and health, how it affects patients production of the video will take place in the fall, with the video tion by December.
2.	To provide advice a	nd assistance to the MMS and external organizations on topical occupational health issues.
	-	and provide recommendations as needed for MMS and external nvironmental and occupational health.

1	Activity: Follow the roll out of legal cannabis in Massachusetts and keep abreast of
2	issues affecting occupational and environmental health.
3	Activity Encode with the MMC Committee on Dublic Lloolth through CEOU
4 5	Activity: Engage with the MMS Committee on Public Health through CEOH representation at Committee on Public Health meetings.
5 6	representation at Committee on Public Health meetings.
7	Status
8	The committee regularly engaged with the MMS Committee on Public Health through
9	representation at meetings and through CPH updates at CEOH meetings.
10	
11	The committee has kept abreast of the issue, and has been available as a resource,
12	specifically on occupational issues related to cannabis. Additionally, the committee
13	provided input on policy recommendations related to HIV testing in hospitals, noise
14	pollution, fossil fuels and climate change, antibiotic use in agricultural animals,
15	physical activity and sedentary behavior, and disability.
16	The committee also recommended reviewers for an LIOD directed CME on dischility
17 18	The committee also recommended reviewers for an HOD directed CME on disability
19	and return to work, reviewed and provided input on the scope of the activity, and on the content.
20	
21	FY19 Committee Budget
22	\$3,999
23	
24	FY19 Actual Committee Expenditures
25	\$928
26	
27	FY19 Estimated Cost of Committee Staff Support
28	\$6,000
29	Normalise of Anna Sinta d Manakana and Normalise of Advisions
30 21	Number of Appointed Members and Number of Advisors
31 32	10 members, 1 advisor
33	FY19 Number of Meetings and Percentage of Appointed Member Attendance
34	5 meetings with an average attendance of 60 percent.
35	o mooningo war ar avorago adonaanoo or oo poroona.
36	FY19 Number of Meetings at which a guorum was met: 4
37	
38	FY20 Activities and Initiatives
39	
40	Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024
41	Strategic Plan. Focusing on initiatives prioritized as critical or immediate,
42	develop activities for initiatives to which your committee can make a significant
43	contribution in FY'20 and describe the nature of that contribution. Include initiatives, if
44 45	any, for which your committee is listed on a Strategic Initiative Plan.
40	

Activity	Related Initiative (from Strategic Plan)
To promote awareness of the impacts of climate change on human health and vulnerable populations through continued implementation of the environmental health awareness campaign directive adopted by the HOD at A-17, including assisting with the development of content for MMS social media channels.	Patients/#2/Critical : Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.

Recognizing workers as vulnerable populations, and the workplace as a social determinant of health, advise and assist MMS on occupational health and environmental health issues.

Patients/#2/Critical: Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.

1 2

- Instructions: Please list information below for any/all adopted resolution(s)/report
- assigned to your committee. For resolutions/reports from I-18, you may leave the second column area blank.
- 4 5

3

	REPORTS DUE TO HOD IN FY20	(at I-19 or A-20) or to BOT for Decision
--	-----------------------------------	------------------	--------------------------

Resolution or Report	Related Goal/Initiative Number	Report Due (or in
Code/Title	Priority from Strategic Plan	Consultation)

6 7

FY20 Committee Budget

8 \$3.710

9

- 10 FY20 Estimated Cost of Committee Staff Support
- 11 \$4,500 for 5 meetings and 1.1 staff

12

Special Committee Due for Renewal 13

14 Instructions: If your special committee is due for renewal in FY'20, please indicate how 15 the work of the committee aligns with the Strategic Plan. In addition, please review the 16 Strategic Initiative Priority Grid and indicate how the committee can support MMS (Goal 17 C) Strategic Initiatives 1-3.

- 18 19

Alignment with Strategic Plan (in 100 words or less):

20 The committee provides advice and assistance to MMS on issues of environmental 21 and occupational health, with a particular focus on social determinants of health and 22 vulnerable populations (Patients 2/Critical). Workplaces are an important social 23 determinant of health, and climate change and other environmental health issues 24 disproportionately affect the physical and mental health of vulnerable populations. 25

- 26 In carrying out its activities, the committee has reached out to and developed 27 relationships with contacts at different medical schools, state agencies, and local and 28 national organizations, in order to leverage resources, while promoting the profile of 29 the MMS (MMS 6/Intermediate).
- 30
- 31 Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less): 32 In developing its activities for the year, the committee reviewed and discussed the 33 MMS's Strategic Initiatives, and the activities and priorities of the Committee on 34 Public Health and has focused its activities and resources to align with the MMS 35 strategic plan.
- 36 37

The committee is regularly called upon for advice on HOD resolutions and reports 38 related to complex environmental and occupational health issues, such as 39 recommendations regarding MMS advocacy related to perfluorocarbons or natural 40 gas pollution. It is the committee's practice to consider the strategic value to MMS 41 and its membership in making its recommendations (MMS/#1/Critical). The 42 committee is available to provide advice on how MMS can handle these matters 43 while narrowing focus and prioritizing activities to align with our strategic plan 44 (MMS/#2/Immediate) and to reform governance to accomplish the strategic goals

45 and objectives (MMS/#3/Immediate).

1			ACHUSETTS MEDICAL SOCIETY		
2 3		COMMITTEE F	REPORT ON ACTIVITIES AND INITIATIVES		
4					
5	Cod	de:	Report 21		
6	Title		FY19 Goals/Activities (2018-2019)		
7			FY20 Activities and Initiatives (2019-2020)		
8	Cor		Committee on Geriatric Medicine		
9			Asif Merchant, MD, Chair		
10					
11	_	mmittee Purpose or Missio			
12			e on Geriatric Medicine (CGM) is to provide advice and		
13 14			leadership related to geriatric health, specifically to include o the geriatric population, the physiology of aging		
14			ase prevention and health enhancement, education of the		
16			ssues pertaining to elders, health care policy as it applies		
17			ng-term care specifically for the geriatric population,		
18			t as liaison with organizations working in these areas; and		
19			nat may come before the committee pertaining to the		
20	qua	ality of life of elders.			
21					
22		<u>F</u>	(19 Report on Goals/Activities		
23 24	1				
24 25	1.	<u>Goal/Activity</u> Be a resource for the Soc	iety and the public and provide advice on ways to increase		
26			hose issues pertaining to the health and well-being of		
27	elders.				
28	 Provide expertise on geriatric issues to Society leadership, other committees, 				
29	and departments.				
30			ison efforts with outside organizations on geriatric		
31		programs and activitie			
32		,	esources pertaining to the health and well-being of elders		
33 34	for distribution to the membership and the public via various media.				
34 35	Status				
36			d and revised physician best practices for prescribing		
37			. Upon review by the Task Force on Opioid Therapy and		
38			e final document was uploaded on the Society's website.		
39		· · · · · · · · · · · · · · · · · · ·			
40			on with the MMS Alliance, secured speakers for two		
41			webinars on the ABIM Foundation's Choosing Wisely™		
42	campaign. Recordings occurred late June 2019 with experts in diabetes management				
43	and deprescribing. These online courses will be available on the Society's continuing				
44 45	education site in the fall.				
45 46	The Society's "Simple Measures for Successful Aging" series of brochures was				
47	condensed and updated. The new edition resides on the Society's website as a				
48		•	en promoted in <i>Vital Signs This Week</i> .		
49					
50	2.	Goal/Activity			
51			various aspects of end-of-life and palliative care, which		
52			ical education needs of physicians and other health care		
53		professionals.			

- 1 2
- 3 4
- 5
- 6
- 7
- 8 Status

•

direct patient care.

9 The committee is engaged in the work of the Massachusetts Coalition for Serious Illness 10 Care and Honoring Choices Massachusetts.

Identify educational needs, venue, media, and faculty on end-of-life care,

including communication, appropriate planning, and resources for providers of

Assist in notifying physicians and other health care professionals about end-of-

life and palliative care resources, programs, communications, and other

11

12 Committee members met with the co-chair of the MA Department of Public Health's 13 Palliative Care & Interdisciplinary Quality of Life Advisory Council, a sub-committee

14 designated to advance the current MOLST (Medical Orders for Life Sustaining

educational activities pertinent to patients and their families.

15 Treatment) medical form to conform with the national POLST (Physicians' Order for Life

16 Sustaining Treatment) paradigm. This meeting and subsequent conversations have

17 informed the response to the CGM Report A-18 B-9 [A-17 B-207] Recognition of Out-of-

18 State DNR/Physician Orders for Life Sustaining Treatment (POLST) Forms in

19 Massachusetts. The committee also remains informed regarding a national database of 20 completed MOLST/POLST forms.

21

22 In response to "An Act relative to Alzheimer's and related dementias in the

23 Commonwealth" signed into law in August 2018, the medical society adopted CME/CGM

24 Report I-18 A-1 Alzheimer's Disease and Dementia Education which provides direction 25 and funding for development of training and education for physicians. The law mandates

26 that physicians and other healthcare providers who work with an adult population

27 complete the continuing education requirement of a one-time course of training and

28 education on the diagnosis, treatment, and care of patients with cognitive impairments 29

including, but not limited to, Alzheimer's disease and dementia. The committee reviewed 30 language, outlining important aspects of the training, and considered appropriate

31 speakers. Staff from several departments also met with leadership of the MA/NH

- 32 Alzheimer's Association. Four modules have been developed and in process of being 33 recorded and uploaded to the Society's website.
- 34

35 Committee members provided recommendations of geriatricians willing to participate in 36 a poll exploring improving access to behavioral health services to support primary care 37 and community-based providers working with older adults. The request was from the 38 Executive Office of Elder Affairs and resulted in the June 2019 report on "Enhancing 39 Behavioral Health Supports of Elders in Massachusetts."

40

48

41 3. Goal/Activity

42 Provide advice and counsel to the Society and its leadership on regulatory and 43 legislative matters and Society policy pertaining to the health and well-being of 44 elders, including, but not limited to: protective services, guardianship, health care 45 proxy, long-term care, home care, impaired driving, pharmacy benefits, capitated 46 health care models, and assisted living. 47

- Invite representatives from regulatory groups to address the committee as appropriate.
- 49 • Provide testimony and other assistance on legislation relating to geriatric 50 medicine as required.
- 51 • Review Society policy and proposed regulations and legislation and make 52 recommendations as appropriate.

- 1 <u>Status</u>
- 2 The president of the Massachusetts Senior Care Association provided the committee 3 with an overview of the association and the state of skilled nursing facilities and longterm care advocacy in the Commonwealth. Members learned of those under 65 years 4 5 with substance use disorder who live in LTC and the need for staff skilled in behavior 6 management. Key points included the deteriorating financial conditions of the state's 7 nursing facilities; Medicare payments no longer compensating for Medicaid 8 underfunding; MassHealth underfunding which has contributed to closures and 9 workforce shortages; and, according to a poll, the opinion of the state's voters that 10 nursing home funding to be a state priority. 11 12 Committee members were also briefed on the Massachusetts Healthy Aging 13 Collaborative, which supports forty age-friendly communities in the Commonwealth. 14 Massachusetts has been designated as an Age-Friendly State. The Society was 15 welcomed to become involved in the collaborative. 16 17 The committee chair presented an overview of the committee and its work to the 18 Massachusetts Commission on Falls Prevention at their January meeting. Dr. Ish Gupta 19 is the MMS appointee to that commission. 20 21 The committee vice chair represented the Society during a panel discussion hosted by 22 the MA Executive Office of Public Safety and Security and the National Highway Traffic 23 Safety Administration. Panel members provided information on impaired driving and 24 older adults. 25 26 4. Goal/Activity 27 Promote the principles and practice of geriatrics in hospital settings and across the 28 continuum of care. 29 • Raise awareness of the needs of the geriatric population within hospitals and 30 other care settings, including support of hospitalists and the multidisciplinary 31 team. 32 33 Status 34 Two physicians from the Brigham and Women's Division of Aging provided information 35 to committee members on frailty, a new standard of practice with dramatic 36 consequences for older patients in January 2019. A frailty index can reflect true 37 biological age rather than chronological age. 38 39 5. Goal/Activity 40 Educate students and physicians in training about the specific needs of the geriatric 41 population. 42 Assist in publicizing programs such as the Summer Institute in Geriatric Medicine 43 and the Chief Resident Immersion Training Program in Geriatrics. 44 Promote the field of geriatrics. 45 46 Status 47 Members discussed how to create excitement about the field of geriatrics and promote it 48 as a career option. BUMC provides a brochure that was shared with the committee. In 49 addition, the GeriPal blog, a forum for geriatric and palliative care topics and 50 discussions, was disseminated to the committee members to share as appropriate. 51
- 52 FY19 Committee Budget
- 53 \$4,651

- 1
- 2
- FY19 Actual Committee Expenditures \$1,454
- 3
- 4 FY19 Estimated Cost of Committee Staff Support
- 5 \$4,500 for five meetings 6
- 7 Number of Appointed Members and Number of Advisors
- 8 There were 13 appointed members and 1 advisor in FY19. 9
- 10 FY19 Number of Meetings and Percentage of Appointed Member Attendance
- Five meetings with an average of 58 percent attendance. 11 12
- 13 FY19 Number of Meetings at which a quorum was met: 3 14

FY20 Activities and Initiatives

- 17 Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024
- 18 Strategic Plan. Focusing on initiatives prioritized as critical or immediate,
- develop activities for initiatives to which your committee can make a significant 19
- 20 contribution in FY'20 and describe the nature of that contribution. Include initiatives, if
- 21 any, for which your committee is listed on a Strategic Initiative Plan.
- 22

15

Activity	Related Initiative (from Strategic Plan)
Advise and assist on access to appropriate care including social determinants of health and health disparities relative to persons 65 years and older. Preventing dementia, improving food security, mitigating climate change, and enhancing the relevance of the MMS may be met by advocating for regulations and business practices that improve awareness and availability of a plant- based, whole foods diet. Solving the transportation crisis while maintaining safety and accessibility as well as inclusion of the disabled, many of whom are elders, are important factors in preventing dementia by maintaining social engagement.	Patients/#2/Critical: Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities
Encourage acknowledgment of the complexity of geriatric patients.	Patients/#4/Critical: Evaluate the establishment of an MMS principle that declares health in all its dimensions, including health care, as a human right.
Advocate for emergency department access, nursing home affordability, and age-friendly measures for older adults, including those with infirmities, dementias, and other physical and mental limitations.	Patients/#6/Immediate: Advocate for access, affordability, and quality of patient care to be the primary objectives of care integration

Advise on the burden of completing	Physicians/#1/Critical: Identify and
forms for every durable medical	implement three high-impact initiatives to
equipment use, every visiting nurse visit,	advocate for the reduction of
and limiting physicians' choices of where	unnecessary regulations and
and what type of medication to prescribe.	administrative burdens.
Interoperability of computer systems and enhancing the clinical utility of the EHR would greatly enhance the goals of mitigating physician burnout, reducing polypharmacy, and improving safety in transitions of care.	

Instructions: Please list information below for any/all adopted resolution(s)/report assigned to your committee. For resolutions/reports from I-18, you may leave the second 3 4 column area blank.

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision					
Resolution or Report Code/Title	Related Goal/Initiative Number/ Priority from Strategic Plan	Report Due (or in Consultation)			
CME/CGM Report I-18 A-1 Alzheimer's Disease and Dementia Education					
FY20 Committee Budget 64,315					
FY20 Estimated Cost of Committee Sta \$4,500 for five meetings	aff Support				
Special Committee Due for Renewal					
Strategic Initiative Priority Grid and indicate how the committee can support MMS (Goal C) Strategic Initiatives 1-3. <u>Alignment with Strategic Plan (in 100 words or less):</u> The committee is comprised of physician members knowledgeable and experienced in elder and/or palliative care. Members have proven knowledge and expertise in psychosocial issues, disease prevention, and proactive health that are unique to the geriatric population.					
 As the Society advances its 2020-2024 strategic initiative, committee members would welcome inquiries from committees, departments, and other stakeholders. In addition to the strategic priorities noted above, the Committee is a resource to the MMS regarding the particular and complex needs of the older patient: MMS/#1/Critical: Evaluate impact and relevance of member-related products, services, and activities, and initiate a plan to discontinue those that do not offer strategic value to the membership. MMS/#2/Immediate: Narrow focus and prioritize activities to align with our strategic plan. 					

- 1 MMS/#3/Immediate: Reform governance to accomplish the strategic goals ٠ 2 and objectives
- 3

4 <u>Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less):</u> The work of the committee in FY20 will support MMS Goal C, Initiatives 1 through 3 5 6 by consideration of the initiatives and projects completed over the past several years 7 with a focus on costs and impact to physicians and/or patients. Further, the 8 committee will pay close attention to work which will positively impact the strategic

- 9 plan. The committee stands ready to advise and assist Society leadership, other
- 10 MMS stakeholders, and peripheral agencies and organizations regarding its standing 11 as a special committee.

1		MASSACHUSETTS MEDICAL SOCIETY				
2		COMMITTEE REPORT ON ACTIVITIES AND INITIATIVES				
3						
4						
5		de:	Report 22			
6	Titl	le:	FY19 Goals/Activities (2018-2019)			
7			FY20 Activities and Initiatives (2019-2020)			
8	Co	mmittee:	Committee on Global Health			
9			Julia Benedetti, MD, Chair			
10						
11	<u>Co</u>	mmittee Purpose or N	lission			
12	The	e Committee on Globa	al Health (CGH) seeks to provide a benefit to the members of			
13			cal Society (MMS) and to the citizens of the Commonwealth by			
14	•	•	iding of global health issues and by promoting the active			
15	par	rticipation of members	in a variety of global health-related projects.			
16						
17			FY19 Report on Goals/Activities			
18						
19	1.	Goal/Activity				
20			nd advise Society members, staff, and the community on			
21		matters related to global health. This will primarily occur through outreach to medical				
22			ts, educational presentations throughout the year, as well as the			
23		promotion of global r	ealth events across the state.			
24 25		<u>Status</u>				
26			ive times over the course of FY19. The committee focused its			
27			Global Health Conference for Trainees: <i>An Introduction to Disaster</i>			
28			<i>umanitarian</i> Response, held on Thursday, January 24, 2019, from			
29		•	e Countway Library, featuring Ritu Sarin, MD, and Hilarie Cranmer,			
30		MD, MPH.				
31		,				
32		Eighty-one individual	s registered to attend in person at the Countway and thirteen to			
33			ar. Actual attendance was fifty-eight at the Countway and seven via			
34		webinar. Twenty-two	evaluations were received following the event, fifteen of those from			
35		medical students. Fo	urteen of the twenty-two respondents indicated they were "very			
36			ogram and seven were "somewhat satisfied." Twenty of the			
37			e time of the program as either "excellent" or "above average" and			
38			day of the week the program as either "excellent" or "above			
39		average."				
40	•					
41	2.		-tion and comite measures for MNO means and a base of			
42			ation and service resource for MMS members who have an			
43 44		interest in global nea	Ith and volunteerism.			
44 45		Status				
45 46			nued to promote the web mapping platform, launched in			
40 47			resource to anyone involved or interested in global health to			
48		•	embers currently working abroad. The platform is an interactive			
49			ing in real-time the location, activities, and participation of MMS			
50			involved in global health related projects. Visit <u>www.kartis.org</u> to			
51		sign up without fee a				

- 1 3. Goal/Activity
- To support and integrate priority consistent programs with the Society's Committee on Public
 Health focusing on the intersection between global health and public health and the impacts on
 community health and wellness.
- 5 6

8

9

<u>Status</u>

The committee's chair serves as a liaison to the Committee on Public Health and regularly reports the activities and goals of this committee to the Committee on Global Health.

- 10 We plan to continue to collaborate with this committee through the upcoming year.
- 11
- 12 4. Goal/Activity

To evaluate applications and recommend recipients for the Massachusetts Medical Society and
 Alliance Charitable Foundation (Foundation) International Health Studies grant program.

- 15
- 16 <u>Status</u>

17 The committee works closely with representatives from the Committee on Medical Education 18 and the Foundation to evaluate and determine grant recipients for the Foundation's International 19 Health Studies Grant Program. Each fiscal year, two committee members are selected to serve 20 on the grant review subcommittee to recommend international health study awards to the 21 foundation's board of directors. Through this program this past year, the foundation's board of 22 directors approved \$18,875 to be dispersed among 11 candidates: four medical students and 23 seven residents.

- 24 25 5. Goal/Activity
- 26 To actively consider new projects by which the committee might better fulfill its mission.
- 27
- 28 <u>Status</u>

29 Committee members have contributed to global medicine on a local and international level. 30 Collectively, the committee offers a unique perspective on the role of Massachusetts physicians 31 in global health activities and the importance of involvement in these activities, not only for 32 charitable causes, but also to aid in interactions with immigrants and patients from different 33 cultures in our diverse state.

- 34
- 35 FY19 Committee Budget
- 36 \$1,665
- 37
- 38 FY19 Actual Committee Expenditures
- 39 \$1,199
- 40
- 41 FY19 Estimated Cost of Committee Staff Support
- 42 \$7,250
- 43
- 44 <u>Number of Appointed Members and Number of Advisors</u>
- 45 16 members

FY19 Number of Meetings and Percentage of Appointed Member Attendance

5 meetings with an average attendance of 60%

FY19 Number of Meetings at which a quorum was met: 3

FY20 Activities and Initiatives

Activity	Related Initiative (from Strategic Plan)
Educate, assist, and advise Society members, staff, and the community on matters related to global health. This will primarily occur through outreach to medical students and residents, and educational presentations throughout the year, focusing on climate change and its impact on the environment and health.	Patients/#2/Critical: Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities. Patients/#4/Critical: Evaluate the establishment of an MMS principle that declares health in all its dimensions, including health care as a human right.
Provide information and resources for MMS members who have an interest in global health and volunteerism. This will occur through the dissemination of global health events across the state via <i>Vital Signs this Week</i> and appropriate social media channels.	Physicians/#2/Intermediate: Create a physician community that includes opportunities for networking.
Support and integrate priority consistent programs with the Society's Committee on Public Health (CPH) focusing on the intersection between global health and public health and the impacts on community health and wellness. The Chair of the Committee serves as the Liaison to the CPH and engages in regular dialogue on how to best align activities to support strategic initiatives.	MMS/#1/Critical: Evaluate impact and relevance of member-related products, services, and activities, and initiate a plan to discontinue those that do not offer strategic value to the membership.

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision				
Resolution or Report Code/Title		Report Due (or in Consultation)		

- FY20 Committee Budget \$1,353

- FY20 Estimated Cost of Committee Staff Support
- \$8,000

1 2 3			MASSACHUSETTS MEDICAL SOCIETY COMMITTEE REPORT ON ACTIVITIES AND INITIATIVES
4 5 6 7	Code: Title:		Report 23 FY19 Goals/Activities (2018-2019) FY20 Activities and Initiatives (2019-2020)
8 9 10	Co	mmittee:	Committee on History Alfred DeMaria, MD, Chair
11	Co		irpose or Mission
12 13		Protect, pr	omote, and preserve the heritage of the MMS.
14			FY19 Report on Goals/Activities
15 16 17 18 19 20 21 22	1.	Massachu a. b.	ity w ways to protect, promote, and preserve the heritage of the setts Medical Society: Organize and preserve MMS archives. Continue oversight of MMS Annual Oration project. Continue oversight of an MMS oral history program.
23 24 25 26 27 28 29 30 31 32			Initial review and inventory of the MMS archives has been accomplished, and communications with administrative staff is ongoing. Alongside the task of locating past annual orations, the committee considered an archival policy that would create a protocol for preserving all future orations. The oral history project is nearing completion with six past presidents awaiting filming.
33 34 35 36 37	2.	Medical St	ity ays to increase interest in and coordinate implementation of annual tudent Essay Award. Work to amend the language of the essay contest in to broaden the scope of the contest.
38 39 40 41 42 43 44 45 46		were the s prize to Ka History of deserving visibility of	ened contest scope brought in a crop of essays that the committee felt trongest yet. The committee reviewed six essays and awarded \$1,000 atherine Warren for her paper, "From Death Notice to the Cyber Obit: The the Overdose Obituary." The committee also recognized three essays honorable mention. The committee is exploring ways to enhance the the program and the essays that are produced (presentations, posters, on in other programs, etc.)
47 48 49	3.		<u>ity</u> versight to ensure that MMS honors members who have passed.
50 51		<u>Status</u> Each issue	e of Vital Signs includes information about the passing of MMS members.

1 4. Goal/Activity 2 Continue supporting the tradition of historical lobby exhibits at MMS headquarters initiated by Dr. Adam Moore. 3 4 5 Status 6 An exhibit about William Augustus Hinton replaced the astronomer physicians exhibit 7 in the MMS lobby. An exhibit about Henry Ingersoll Bowditch then replaced the 8 Hinton one. A future exhibit on partnerships between MMS and public health is being planned in recognition of the 150th anniversary of the Massachusetts Board of 9 10 Health. 11 12 FY19 Committee Budget 13 \$1.715 14 15 FY19 Actual Committee Expenditures 16 \$1,440 17 18 FY19 Estimated Cost of Committee Staff Support 19 \$2.250 20 21 Number of Appointed Members and Number of Advisors 22 10 members, 1 advisor 23 24 FY19 Number of Meetings and Percentage of Appointed Member Attendance 25 3 meetings with an average attendance of 78 percent 26 27 FY19 Number of Meetings at which a guorum was met: 3 28 29 FY20 Activities and Initiatives 30 31 Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024 32 Strategic Plan. Focusing on initiatives prioritized as critical or immediate, 33 develop activities for initiatives to which your committee can make a significant 34 contribution in FY'20 and describe the nature of that contribution. Include initiatives, if 35 any, for which your committee is listed on a Strategic Initiative Plan. 36

Activity	Related Initiative from Strategic Plan
1. Protect, promote, and preserve the	MMS/#1/Critical: Evaluate impact and
heritage of the MMS:	relevance of member-related products, services, and activities, and initiate a plan
a. Organize and preserve MMS archives.	to discontinue those that do not offer strategic value to the membership.
 b. Continued oversight of the MMS Annual Oration Project. 	MMS/#5/Critical: Ensure the financial
 c. Continuation of the MMS oral history program. 	strategy supports NEJM Group's sustainability.
d. Continuation of the tradition of historical lobby exhibits at MMS headquarters initiated by Dr. Adam Moore.	Patients/#2/Critical, Patients/#4/ Critical, Patients/#6/Immediate, MMS/#8/Immediate: Expand advocacy efforts in collaboration with key

-		
	e. NEJM 100 th Anniversary of MMS Ownership since 1921. Develop educational activities and	stakeholders on issues critical to patients and physicians.
	communications, through <i>Vital</i> <i>Signs</i> , to highlight the society's commitment to the advancement of knowledge through its publications.	Physicians/#3/Immediate : Provide leadership development offerings for physicians and physician-led teams.
2.	Continue the Annual History Essay Contest.	MMS/#7/Intermediate : Create strategies that will engage various member constituent groups and increase
3.	Continue honoring MMS members who have passed with	engagement, diversity, and trust in MMS.
	acknowledgment in <i>Vital Signs</i>	Physicians/#2/Intermediate : Create a physician community that includes opportunities for networking.

2 **Instructions**: *Please list information below for any/all adopted resolution(s)/report*

3 assigned to your committee. For resolutions/reports from 1-18, you may leave the second 4 column area blank.

5

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision			
	Related Goal/Initiative Number/	Report Due (or in	
Code/Title	Priority from Strategic Plan	Consultation)	

6

7 FY20 Committee Budget

8 \$1,591

9

10

11 FY20 Estimated Cost of Committee Staff Support

12 \$2,250

13

14 <u>Special Committee Due for Renewal</u>15

Instructions: If your special committee is due for renewal in FY'20, please indicate how
the work of the committee aligns with the Strategic Plan. In addition, please review the
Strategic Initiative Priority Grid and indicate how the committee can support MMS (Goal
C) Strategic Initiatives 1-3.

20 21

Alignment with Strategic Plan (in 100 words or less):

22 The Massachusetts Medical Society has a long and distinguished history of having a major impact on medicine, public health, and society that has given the MMS an 23 24 unequaled level of credibility with the profession, civic leaders and the public. This 25 recognition and credibility are precious assets and resources for the society that 26 should be preserved and treasured. Through elucidating, preserving, and promoting 27 the MMS heritage, we further enhance our standing with our patients, provide a 28 historical context for our members and their work, and maintain an underpinning of 29 the effectiveness of the organization.

- 1 Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less):
- MMS 1: Protecting, promoting and preserving the heritage of the MMS provides a
 historical context that increases the value of membership and enhances the
 credibility of the society. This historical context also provides lessons learned and a
 standard by which to measure value.
- 7 MMS 2: The lessons of history often help to define what does and does not provide
 8 value in the long run.
 9
- 10 MMS 3: The lessons of MMS history are replete with examples of experience with a
- 11 variety of forms of governance and models of leadership.

1 2 3			SACHUSETTS MEDICAL SOCIETY REPORT ON ACTIVITIES AND INITIATIVES
4	0-		Demark 04
5 6	Co Titl		Report 24 FY19 Goals/Activities (2018-2019)
7	i iu	с.	FY20 Activities and Initiatives (2019-2020)
8	Co	mmittee:	Committee on Information Technology
9	00		Randy Bak, MD, Chair
10			······································
11	Co	mmittee Purpose or Missi	on
12			to identify and evaluate major trends in information
13			cal practice including policy, education, devices, guidelines,
14	reg	ulations, and laws; and, p	romote physician autonomy and patient engagement. The
15	cor	nmittee will make recomm	nendations to the Board of Trustees, the House of
16			ship on important trends proactively. The committee also
17			tion technology development and support for medical
18	edı	ucation through its Studen	t and Resident awards program.
19	F **	and time a ta time a the accurate	sittee bests conferences and preduces decomposite to inform
20 21			hittee hosts conferences and produces documents to inform ut technologies of particular importance to clinical medicine.
22	uie	general membership abo	
23		F	Y19 Report on Goals/Activities
24	1.	Goal/Activity	
25			CIT Award Program including marketing, evaluation and
26		selection of winners.	
27			
28		<u>Status</u>	
29			was successfully completed for the 19 th year running. As
30			e CIT made a request to increase the award amount to
31 32		by BOT.	ward and this was approved by COA, COF, and ultimately
32 33		Dy DOT.	
34	2	Goal/Activity	
35	۷.		ant task forces, and the Committee on Legislation, help
36		2	se of health information technology though policy, advocacy,
37			outreach for the benefit of physicians and their patients.
38			
39		<u>Status</u>	
40			EHR Interoperability and Usability and Task Force on
41			Choice have ongoing representation on the CIT. The CIT
42			y successful conference to help members understand the
43			telligence on Medicine (May 11, 2018). This conference
44 45			pped into 2 CME on-demand programs. Working with the oped a CME recording, "Creating a Successful EHR," which
45 46			deos requested. It was hosted by Jitin Asnaani of
40 47		•	ting with task force to explore interoperability. The CIT
48			ough vetting potential partners for technical offerings. The
49			buse of Delegates report for the Annual Meeting.

1 3. Goal/Activity 2 Support the Society's Mac Users Group. 3 4 Status 5 The Society Mac Users Group held 7 successful meetings in 2018-19 including many quest 6 speakers on a wide array of topics regarding both Mac use and iOS/iPhone/iPad use, 7 photography, streaming video, and security. 8 9 FY19 Committee Budget \$21,200 10 11 12 FY19 Actual Committee Expenditures 13 \$17,553 (\$10,000 student and resident awards) 14 15 FY19 Estimated Cost of Committee Staff Support \$6,750 16 17 18 Number of Appointed Members and Number of Advisors 22 Members/9 Advisors 19 20 21 FY19 Number of Meetings and Percentage of Appointed Member Attendance 22 9 meetings with an average attendance of fifty percent. 23 24 FY19 Number of Meetings at which a quorum was met: 5 25 26 **FY20** Activities and Initiatives 27 28 Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024 Strategic 29 Plan. Focusing on initiatives prioritized as critical or immediate, develop activities for 30 initiatives to which your committee can make a significant contribution in FY'20 and describe the

31 nature of that contribution. Include initiatives, if any, for which your committee is listed on a

32 Strategic Initiative Plan.

Activity	Related Initiative (from Strategic Plan)
Coordinating with Legislation, the Quality of Medical Practice and Medical Education, respond to the A-19 resolution listed below regarding telehealth policy by organizing a conference and policy report by the end of	MMS/#8/Immediate: Expand advocacy efforts in collaboration with key stakeholders on issues deemed critical to physicians and patients.
2020 with interim report at A-20 and final report at I-20.	Patients/#1/Intermediate: Advocate for technology and communication tools that improve health literacy, price transparency, and increase patient engagement. Patients/#3/Intermediate: Advocate for
	affordability of care.
Study and educate members on how technology can increase price transparency and reduce barriers to care.	Patients/#2/Critical: Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.

Manage 20 th annual MMS HIT Student and Resident Award Program including marketing, review of applications, evaluation of final candidates and award of prizes.	Physicians /#6/Immediate: Pursue options to increase medical school affordability, including the option of free medical education.
	MMS/#6/Intermediate: Develop a strategy to increase MMS brand recognition, profile, and communication with targeted audiences.
Manage the Society Mac Users Group with regular meetings, guest speakers, and member-to-member activities to enhance technical knowledge.	Physicians/#2/Intermediate: Create a physician community that includes opportunities for networking.

- 1 2
- Instructions: Please list information below for any/all adopted resolution(s)/report assigned to your
- 3 committee. For resolutions/reports from I-18, you may leave the second column area blank.
- 4

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision			
•	Related Goal/Initiative Number/ Priority from Strategic Plan	Report Due (or in Consultation)	
Resolution A-19 B-209 Conference and Report on Telemedicine	Patients/#6/Immediate	A-20	

- 5 FY20 Committee Budget
- 6 \$17,210 (\$10,000 student and resident awards CIT and Mac User Group 18 mtgs/year)
- 78 FY20 Estimated Cost of Committee Staff Support
- 9 \$6,750
- 10

11 Special Committee Due for Renewal

12 13

18

19

20

21

22

23

24

Alignment with Strategic Plan (in 100 words or less):

- In modern medicine, technology is increasingly ubiquitous. The CIT examines a wide scope of
 technologies and provides strategic leadership and education to members: specifically
 addressing the following Goal/Initiatives:
- 17 Patients/#1/Intermediate;
 - Patients/#5/Intermediate
 - Patients/#6/Immediate;
 - Physicians/#4/Intermediate;
 - Physicians/#6/Immediate;
 - MMS/#4/Intermediate;
 - MMS/#6/Intermediate;
 - MMS/#8/Immediate
- 25 26 Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less): 27 For over 20 years, the CIT has been the only committee to focus on the increasingly critical role 28 of technology in the practice. Health Information Technology is at the forefront of change to 29 physician organizations and provides platforms on which many broad initiatives ride affecting 30 quality of patient care, physician engagement and membership value. The CIT continues to 31 address these changes through education and careful vetting of tech products, services, and 32 activities. CIT has re-aligned all 2020 initiatives to map completely to the plan, by narrowing 33 focus and ranking activities accordingly.

1 2 3	CC	MASSACHUSETTS MEDICAL SOCIETY OMMITTEE REPORT ON ACTIVITIES AND INITIATIVES
4		
5	Code:	Report 25
6	Title:	FY19 Goals/Activities (2018-2019)
7		FY20 Activities and Initiatives (2019-2020)
8	Committee:	Committee on Lesbian, Gay, Bisexual, Transgender and Queer
9		Health
10		Aditya Chandrasekhar, MD, MPH, Chair
11 10		Mission
12	Committee Purpose or	
13 14		edical Society's Committee on Lesbian, Gay, Bisexual, Transgender and rs will serve as a resource for advocacy, support, and education to broaden
15		h and provide advice and counsel on matters affecting LGBTQ physicians,
16		ents, and their families.
17	·····, p····	
18		
19		FY19 Report on Goals/Activities
20	1. <u>Goal/Activity</u>	
21		ans across the Commonwealth about the unique health care issues facing
22	LGBTQ patients.	
23		
24 25		address deficiencies across the Commonwealth in medical education acre by developing guidelines for medical school and graduate medical
26		online educational modules, modeling presentations for "Grand Rounds"
27		ubmitting periodic articles to the MMS publication <i>Vital Signs</i> .
28		
29		nformational booths at the Annual Meeting of the MMS House of Delegates
30		formation on the latest LGBTQ health research and to update the
31	membership on the	e committee's activities.
32 33	Status	
33 34		nowledged the unique health care needs of LGBTQ individuals and
35		e 2014, the MMS Committee on LGBTQ Matters has administered the MMS
36		Pilot Program. The pilot program provided \$16,000 in awards annually to
37		ents/fellows to encourage and incorporate cultural competency training early
38		on to make strides towards improving the health care quality, access, and
39		patients in the Commonwealth.
40		
41	Since its establishr	nent, the MMS LGBTQ Research Pilot Program has awarded \$47,810 to six
42		nd eight residents/fellows. Grant recipients have used funds to attended
43		nces, develop new curricula for their medical schools, residencies, and
44	•	pport novel LGBTQ health services and disparities research.
45	· - , • •	··· · · · · · · · · · · · · · · · · ·
46	Members of the Co	ommittee on LGBTQ Matters, composed of state and national experts in
47		minority health, have found the MMS LGBTQ Research Pilot Program to be
48	a worthwhile progra	am. As a result, the committee submitted the report, <i>Ensuring the Continued</i>
49	Success of the MN	IS LGBTQ Health Research Scholarship which passed at the most recent

- 1 MMS Annual Meeting. This report allows the MMS to continue this program by offering annual 2 scholarships related to LGBTQ health.
- The Committee on LGBTQ Matters continues to evaluate and revise the grant selection process
 to ensure diversity of student and resident/fellow support and sustainability of research and
 programming. An announcement regarding the 2020 grant cycle will be made in late summer.
- The committee continues to have an informational booth at the MMS Annual Meeting to
 distribute information on the latest research in LGBTQ health and contributes periodic articles
 and announcements to *Vital Signs* and *Vital Signs this Week*.
- 12 2. Goal/Activity

15

18

- To provide a dedicated forum for involvement, mentoring, and networking for LGBTQ physicians
 and medical students.
- Activity 1: Encourage physicians and health care organizations to employ LGBTQ staff, at all levels, to address the needs of these communities.
- Activity 2: Encourage members of the committee to serve as mentors to LGBTQ physicians
 seeking assistance with residency training or practice issues.
- Activity 3: Provide informal forums for professional networking, either in conjunction with
 planned educational programs, or as separate events.
- 25 Status

The committee hosted a dinner gathering/social event for all state-wide LGBTQ medical students and physicians at Club Café in Boston in October 2018. The event was the most successful yet with over 75 people in attendance. Dr. Yvonne Gomez-Carrion was honored as the 2018 recipient of the LGBTQ Health Award at this event.

- At the MMS Annual Meeting, The committee collaborated with the International Medical
 Graduates Section on the program, *Global Views on LGBT Acceptance and Respective Impact on Health* with speaker Suha Ballout, PhD, RN. The event was well-received.
- 34 35 3. Goal/Activity

To provide outreach to member and non-member LGBTQ physicians and medical associations to increase MMS membership and participation of physicians with an interest in LGBTQ issues.

Activity 1: Strengthen liaison with the Gay and Lesbian Medical Association (GLMA) and other
 interested groups by promoting the committee's activities, encouraging collaboration, and
 inviting representatives to attend committee meetings.

42

38

- 43 Activity 2: Maintain a relationship with the AMA Advisory Committee on LGBTQ Issues to 44 understand how to better promote shared agendas.
- 45

Activity 3: Work to help bridge efforts of medical school and residency/fellowship LGBTQ
 interest groups and promote LGBTQ curricula in medical schools and graduate medical
 education.

1 <u>Status</u>

On a national level, the committee keeps apprised of the latest initiatives of both the GLMA and
 the AMA's LGBTQ Advisory Committee through email communication as well as through
 members who attend the national meetings of each organization.

- 5 6 The committee's webpage on the MMS website is updated to include comprehensive 7 information on the activities and goals of the committee and to provide useful resources to 8 LGBTQ providers. The committee continues to collaborate with LGBTQ chapters at the 9 Massachusetts medical schools and residency/fellowship training programs to promote the 10 ideas and activities of the committee.
- 11 12 4. <u>Goal/Activity</u>
- To enhance MMS policy and advocacy on LGBTQ health and professional issues, with the
 understanding that any discussion regarding diversity is incomplete when omitting the topics of
 sexual orientation or gender identity.
- 17 Activity 1: Develop and submit resolutions to the MMS and AMA Annual and Interim Meetings. 18
- Activity 2: Provide testimony and expertise on legislation addressing the needs of LGBTQ
 populations as required.

Activity 3: Provide support for physicians across the Commonwealth to follow the AMA's
 recommendation to display a visible nondiscrimination statement for patient and staff awareness
 to ensure a greater level of comfort for all patients entering the physician's office.

26 <u>Status</u>

The committee continues to be active in submitting reports to the MMS Annual and Interim
Meetings to promote the interests of LGBTQ patients and physicians. At the 2018 Interim
Meeting, the committee submitted *Report I-18 A-2(b), Evidence-Based Care of Individuals Born with Differences in Sex Development (DSD)/Intersex.* The report was referred to the Board of
Trustees with report back due at the 2019 Interim Meeting.

32

16

The committee actively provides support for physicians across the Commonwealth to follow the AMA's recommendation to display a visible nondiscrimination statement for patient and staff awareness to ensure a greater level of comfort for all patients entering the physician's office. The committee has the nondiscrimination statement available for distribution at its booth at both the MMS Annual and Interim Meetings. The statement is also available on the committee's webpage.

- 39
- 40 5. Goal/Activity
- 41 Advocate for equitable access to competent care for LGBTQ patients. 42
- 43 Activity 1: Where appropriate, partner with private, academic, research, and public health 44 entities across the state to promote shared agendas.
- 45

Activity 2: Maintain a formal presence on the Committee on Public Health to help further the
 discussion of how the Society might take a more active role in promoting LGBTQ health in
 Massachusetts.

1 2 3	Activity 3: Research ways to increase medical student opportunities in training regarding LGBTQ health and encourage incorporation of LGBTQ issues in curricula at all the Massachusetts medical schools.
4 5	Status
6	The committee continues to have a seat on the Committee on Public Health to help
7	further the discussion of how the MMS might take a more active role in promoting
8	LGBTQ health in Massachusetts. Through the newly established "Medical
9	Student/Resident Research Grant of LGBTQ Matters," several grant topics
10	addressed increasing training opportunities for LGBTQ health.
11	5 5 11
12	FY19 Committee Budget
13	\$3,169
14	
15	FY19 Actual Committee Expenditures
16	Expenditures were \$3,942 which included 3 meetings, social event at Club Café and
17	educational program in conjunction with IMG Section at MMS Annual Meeting.
18	
19	FY19 Estimated Cost of Committee Staff Support
20	\$19.040
21	
22	Number of Appointed Members and Number of Advisors
23	The committee is comprised of 13 members including 1 resident/fellow representative, 2
24	medical students and 1 alliance representative.
25	
26	FY19 Number of Meetings and Percentage of Appointed Member Attendance
27	3 meetings with an average attendance of 69 percent
28	
29	FY19 Number of Meetings at which a quorum was met: 3
30	
31	FY20 Activities and Initiatives
32	
33	Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024
34	Strategic Plan. Focusing on initiatives prioritized as critical or immediate,
35	develop activities for initiatives to which your committee can make a significant
36	contribution in FY'20 and describe the nature of that contribution. Include initiatives if

- 37 38 any, for which your committee is listed on a Strategic Initiative Plan.

Activity	Related Initiative (from Strategic Plan)
Address ways to reduce inequities in LGBTQ health care through advocacy and education.	Patients/#2/Critical : Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.
Explore ways to promote and protect the health of LGBTQ patients as a human right.	Patients/#4/Critical : Evaluate the establishment of an MMS principle that declares health in all its dimensions, including health care, as a human right.

- 1 **Instructions**: *Please list information below for any/all adopted resolution(s)/report*
- 2 assigned to your committee. For resolutions/reports from I-18, you may leave the second
- 3 column area blank.
- 4

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision			
Resolution or Report Code/Title	Related Goal/Initiative Number Priority from Strategic Plan	/Report Due (or in Consultation)	
Report I-18 A-2(b)		I-19	
Evidence-Based Care of			
Individuals Born with			
Differences in Sex			
Development			
(DSD)/Intersex			

FY20 Committee Budget

7 \$2,919

8

9 FY20 Estimated Cost of Committee Staff Support

\$19,000 (Staff estimates 8hrs/week x 35 weeks/year)

12 Special Committee Due for Renewal

13

Instructions: If your special committee is due for renewal in FY'20, please indicate how
the work of the committee aligns with the Strategic Plan. In addition, please review the
Strategic Initiative Priority Grid and indicate how the committee can support MMS (Goal
C) Strategic Initiatives 1-3.

18 19

<u>Alignment with Strategic Plan (in 100 words or less):</u>

The Committee aligns with the Society's Strategic plan in that it provides a critical perspective on health issues and disparities that disproportionately or uniquely affect LGBTQ patients. The expertise on the committee offers the MMS first-hand experience about LGBTQ patients and ailments that are essential for identifying and addressing relevant and emerging issues related to LGBTQ patient's overall health and advancing knowledge in this field.

26 27

Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less):

The Committee supports the MMS Strategic Initiatives through continually
 contributing to "advancing medical knowledge and the medical profession to improve
 patient care and outcomes" as it relates to LGBTQ health. Through its work, the
 committee has served as a resource for advocacy, support and education to broaden
 MMS member outreach and provide advice and counsel on matters affecting LGBTQ

33 physicians, medical students, patients, and their families.

1		MASSACHUSETTS MEDICAL SOCIETY
2	COMMI	TEE REPORT ON ACTIVITIES AND INITIATIVES
3		
4		
5	Code:	Report 26
6	Title:	FY19 Goals/Activities (2018-2019)
7		FY20 Activities and Initiatives (2019-2020)
8	Committee:	Committee on Maternal and Perinatal Welfare
9		Sara Shields, MD, MS, FAAFP, Chair
10		
11	Committee Purpose or	Mission
12	The mission of the Cor	nmittee on Maternal and Perinatal Welfare (CMPW) is to: provide
13	advice and counsel to t	he Society and its leadership in matters relating to maternal and
14	perinatal welfare and re	elated issues that may arise; sponsor the annual John Figgis
15		nd actively investigate broad issues in maternal and perinatal care
16		y so as to ensure patients in the Commonwealth receive the
17	highest quality of medie	cal care.
18		
19		FY19 Report on Goals/Activities
20		
21	1. <u>Goal/Activity</u>	
22	Provide advice and	counsel to the Society and its leadership on regulatory and
23		and Society policy relating to maternal and perinatal welfare.
24	 Remain app 	rised of ongoing regulatory and legislative issues pertaining to
25	maternal we	elfare including MMS' approach to the opioid crisis, family leave,
26	maternal an	d infant mortality data, maternal breastfeeding, the intersection of
27		health equity, and the social determinants of health in
28	Massachus	etts and how that relates to maternal and perinatal welfare.
29		iety policy and proposed state and federal regulations and
30	•	nd make recommendations to Society leadership as appropriate.
31		ne MMS Committee on Legislation to recommend positions on
32	•	elevant to maternal and perinatal health.
33		imony and other assistance on legislation relating to maternal and
34	perinatal we	lfare as warranted.
35		
36	<u>Status</u>	
37	Maternal M	•
38		PW discussed and voted to unanimously support House bill 1949
39		Senate bill 1334, An Act to Reduce Racial Disparities in Maternal
40		Ith filed by Representatives Kay Khan and Liz Miranda and
41		ator Becca Rausch. This bill establishes a special commission to:
42		ssess current research and identify potential gaps or limitations; 2)
43 44		uate the extent to which implicit bias, racism, and discrimination
		ct maternal mortality; 3) assist the Department of Public Health in
45 46		essing federal funding to support these efforts; and 4) recommend
46 47		y. W drafted and sent a letter to the Chairs of the federal House
47 48		imittee on Ways & Means in response to the Committee's
40 49		ing, "Overcoming Racial Disparities and Social Determinants of
49 50		th in the National Maternal Mortality crisis" and underscored data
50	nca	and the reaction in material mortality those and understooled data

1 2 3 4 5 6 7 8 9		 from the CDC's latest report on racial disparities in maternal morality and urging attention and action on this important issue. CMPW voted to support The Healthy MOMMIES Act, federal legislation that, among other things, would expand Medicaid coverage for pregnancy pathways from 60 days postpartum to 365 days and would ensure comprehensive coverage for new mothers, as well as increase Medicaid minimum reimbursement rates for maternal and obstetric services for people in underserved areas. Title X: The committee provided expert opinion on the MMS's comments and
10 11 12 13		coalition letter to the Department of Health and Human Services regarding opposition to the rulemaking under Docket No.: HHS-OS-2018-0008;42 CFR Part 59; RIN 0937-ZA00 Compliance with Statutory Program Integrity Requirements as the rulemaking would significantly change the Title X
14 15 16 17		program and compromise patients' access to health care fundamentally compromising one of the most vital tenets of medical ethics governing the patient - physician relationship: trust built on open communication between physicians and patients.
18 19		• Family Leave for Early Child Care: The committee approved the informational report due for I-18 on family leave for early child-care.
20 21 22 23 24 25		 Other Legislation: The committee discussed and declined to take a position legislation titled, <i>An Act Prohibiting non-consensual pelvic examinations</i>; while supporting the spirit of the legislation, the committee sought further information related to other states' experience and language used in other states.
26 27 28		 The committee reviewed and voted to continue support for other legislation, consistent with MMS policy, including: An Act Relative to Conducting Fetal and Infant Mortality
29 30		ReviewAn Act Relative to Female Genital Mutilation
31 32	2.	<u>Goal/Activity</u>
33 34		Actively investigate timely issues in maternal and perinatal care on behalf of the Society, its members and our patients. Advise on established protocols, guidelines,
35 36		 and mandates and provide definitions of practice for proposed standards. Obtain data relating to maternal and perinatal care in Massachusetts from
37 38		available sources within the Commonwealth with a specific focus on the state's maternal mortality review committee and more comprehensive data
39		for infant mortality review.
40 41		 Encourage patient and physician education on maternal and perinatal care topics.
42 43		Status
44 45 46 47		• Maternal Mortality: The committee stayed abreast of information and reports from the state Maternal Mortality and Morbidity Review Committee (MMMRC), including report outs from 3 CMPW members who are on the MMMRC. Committee members were also interviewed and participated in the
48 49 50 51 52		former staff liaison's writing of an article titled <i>Why Do So Many US Women</i> <i>Die from Pregnancy-Related Causes?</i> , publicizing the issues of rising maternal mortality rates among marginalized groups and the need for more resources for MMMMR due to an increase in volume of cases associated with the current opioid crisis.

1		
2	3	Goal/Activity
3	0.	Collaborate with other state and local level organizations and coalitions, including the
4		Massachusetts Department of Public Health, the Massachusetts Chapter of the
5		American Congress of Obstetrics and Gynecology, the Massachusetts Perinatal
6		Quality Collaborative, the Perinatal-Neonatal Quality Improvement Network of
7		Massachusetts (PNQIN), other MMS committees and entities, and other appropriate
8		organizations and agencies to address issues affecting maternal and perinatal
9		welfare.
10		 Invite leadership from organizations and coalitions to meetings to share
11		knowledge and strategize regarding potential collaborative efforts in maternal
12		and perinatal welfare.
13		 Advocate for comprehensive, integrated care and improved reimbursement
14		for medical services for women of reproductive age with substance use
15		disorders.
16		 Discuss and educate physicians, other health care professionals, and the
17		public on issues related to perinatal women and their infants.
18		 Identify and advocate for additional funding for the Perinatal-Neonatal Quality
19		Improvement Network of Massachusetts (PNQIN).
20		
21		Status
22	•	Maternal Mortality: The committee assisted in writing a letter submitted to DPH on
23	•	behalf of MMS addressing the lack of timely and accurate data available to the
24		MMMRC and advocating for additional resources to support the efforts of the
25		MMMRC.
26		
27	4.	Goal/Activity
28		Sponsor the annual John Figgis Jewett, MD, Lecture and other educational programs
29		that meet the continuing medical needs of physicians and other health care
30		professionals on emerging issues in maternal welfare.
31		 Identify educational needs, venue, and faculty to carry out the Jewett
32		Lectureship for providers of obstetrical and gynecological services.
33		 Assist in notifying physicians and other health care professionals about the
34		Jewett Lecture and other educational activities pertinent to maternal and fetal
35		health.
36		
37		Status
38		The committee sponsored the 2018 John Figgis Jewett, MD, Memorial Lecture on
39		November
40		16, 2018 at the University of Massachusetts Medical Center during the Annual Griffin
41		Memorial
42		Symposium in Worcester. The topic of the lecture was Microbe – Human
43		Interactions Beginning
44		in Infancy given by Dr. Juliette C. Madan, Associate Professor of Pediatrics &
45		Epidemiology in
46		the Division of Neonatology at the Dartmouth Hitchcock Medical Center.
47		
48	FY	<u>19 Committee Budget</u>
49		,379
-	* *	•

- 1 FY19 Actual Committee Expenditures
- 2
- \$1,068 3
- FY19 Estimated Cost of Committee Staff Support 4
- 5 \$6,000
- 6 7
 - Number of Appointed Members and Number of Advisors
- 8 18 members 9

10 FY19 Number of Meetings and Percentage of Appointed Member Attendance

- 4 meetings with an average attendance of 55% percent 11
- 12

14 15

16

13 FY19 Number of Meetings at which a quorum was met: 3

FY20 Activities and Initiatives

17 Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024 Strategic 18 Plan. Focusing on initiatives prioritized as critical or immediate, develop activities for 19 initiatives to which your committee can make a significant contribution in FY'20 and describe the nature of that contribution. Include initiatives, if any, for which your committee is listed on a 20 21 Strategic Initiative Plan.

Activity	Related Initiative (from Strategic Plan)
Active participation in the ROE Coalition to advocate for legislation based on adoption of A- 19, A-101, Support for Modern Abortion Laws and Access.	Patients/2/Critical: Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities. MMS/8/Immediate: Expand advocacy efforts in collaboration with key stakeholders on issues deemed critical to physicians and patients.
Participation in ACOG-sponsored provider lobby day in support of legislative initiatives supported by MMS that address health disparities.	Patients/2/Critical: Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities. MMS/8/Immediate: Expand advocacy efforts in collaboration with key stakeholders on issues deemed critical to physicians and patients.
Active participation in the state Maternal Mortality + Morbidity Coalition to support legislation establishing a commission to study and recommend ways to reduce racial disparities in MMM.	Patients/2/Critical : Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.

	MMS/8/Immediate: Expand advocacy efforts in collaboration with key stakeholders on issues deemed critical to physicians and patients.
Provide advice and counsel to MMS and its leadership on regulatory and legislative matters, at both the state and federal level, and MMS policy relating to maternal and perinatal welfare and coordinate & collaborate with relevant state or federal stakeholders, including advocacy groups, other MMS committees, entities, and specialty societies.	MMS/8/Immediate: Expand advocacy efforts in collaboration with key stakeholders on issues deemed critical to physicians and patients.
Develop and disseminate educational materials for physicians and other health care professionals on the use of mifepristone in the management of early pregnancy loss.	[compliance with MMS Directive]
Research and review existing provider resources relative to standards of care during and after childbirth to promote health equity and address racial disparities in maternal mortality and morbidity; determine extent to which CMPW/MMS can support/promote these resources or if there are ways to	Patients/2/Critical : Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.
collaborate/improve upon them.	MMS/8/Immediate: Expand advocacy efforts in collaboration with key stakeholders on issues deemed critical to physicians and patients.
Develop committee recommendations for consideration at A-20 relative to policies or directives that will enable MMS to advocate for racial equity in maternal and perinatal health.	Patients/2/Critical : Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.
Sponsor the annual John Figgis Jewett, MD, Lecture and other educational programs that meet the continuing medical needs of physicians and other health care professionals	Physicians/2/Intermediate: Create a physician community that includes opportunities for networking.
on emerging issues in maternal welfare with a specific focus on health equity and reducing racial disparities in maternal mortality & morbidity.	MMS/7/Intermediate: Create strategies that will engage various member constituent groups and increase engagement, diversity, and trust in MMS.

- 1 **Instructions**: *Please list information below for any/all adopted resolution(s)/report*
- 2 assigned to your committee. For resolutions/reports from I-18, you may leave the second
- 3 column area blank.
- 4

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision				
Resolution or Report Code/Title	Related Goal/Initiative Number/ Priority from Strategic Plan	Report Due (or in Consultation)		
Resolution A-19, A-101	Patients/#2/Critical	August 28, 2019 (BOT for		
Support for Modern Abortion Laws and Access	MMS/8/Immediate	Decision}		
OFFICERS Report A-19 C-4 (Section C) Policy Sunset Process (Policies Reaffirmed for 1 Year) HOSPITALS 5c Neonatal Outcomes and Care	N/A	A-20		
Resolution A-19 A-102 Mifepristone Use in Early Pregnancy Loss Management (Item 3)	N/A	A-20		
LGBTQ Report I-18 A-2(b) Evidence-Based Care of Individuals Born with Differences in Sex Development (DSD)/Intersex	Patients/#2/Critical	I-19		

- 5 FY20 Committee Budget
- 6 \$1,279
- 7
- 8 FY20 Estimated Cost of Committee Staff Support
- 9 \$7,500
- 10

11 Special Committee Due for Renewal

12

Instructions: If your special committee is due for renewal in FY'20, please indicate how
the work of the committee aligns with the Strategic Plan. In addition, please review the
Strategic Initiative Priority Grid and indicate how the committee can support MMS (Goal
C) Strategic Initiatives 1-3.

17 18

Alignment with Strategic Plan (in 100 words or less):

19 The work of CMPW is well-aligned with the strategic plan, particularly with respect to 20 the Patient-2 initiative, assessing vulnerable populations and determining where the 21 MMS can have the strongest impact on access to appropriate care, especially as it 22 relates to health disparities. Much of the CMPW's work will focus on addressing 23 disparities in access to sexual and reproductive health care and racial disparities in 24 maternal mortality and morbidity. The planned activities involve coalition work with 25 key stakeholders, which will necessarily support the MMS-8 initiative to expand 26 advocacy efforts in collaboration with key stakeholders on issues deemed critical to 27 physicians and patients.

- Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less): 1
- 2 The exercise of completing this action plan itself has supported MMS strategic initiatives 1-3, in-particular 2. CMPW has thoughtfully approached our goals and
- 2 3 4 activities for the upcoming fiscal year to align those activities accordingly with the
- 5 strategic plan. CMPW's narrowed focus on coalition work and other activities to
- 6 address health disparities in access to sexual and reproductive health care and racial
- 7 disparities in maternal mortality and morbidity prioritizes activities aligned with the
- 8 strategic plan, particularly regarding Patients-2 and MMS-8.

1			MASSACHUSETTS MEDICAL SOCIETY	
2			COMMITTEE REPORT ON ACTIVITIES AND INITIATIVES	
3				
4				
5	Со	de:	Report 27	
6	Titl	le:	FY19 Goals/Activities (2018-2019)	
7			FY20 Activities and Initiatives (2019-2020)	
8	Со	mmittee:	Committee on Men's Health	
9			Arnold Robbins, MD (Acting) Chair	
10				
11	Со	mmittee F	Purpose or Mission	
12	Мо	nitors ong	going and evolving health issues affecting men; promotes awareness of	
13	me	en's health	issues; seeks to improve the overall health of men through education and	
14			or physicians and other healthcare providers, researchers, and the public;	
15			the MMS, supports Federal and State government organizations to	
16		•	id act on men's health issues.	
17	106			
18			FY19 Report on Goals/Activities	
19				
20	1	Goal/Acti	ivity	
21	••		n growing an active and engaged committee membership that includes	
22			tation from a wide variety of demographics and includes representation and	
23		participation of outside groups in order to promote well-balanced discussions and		
24		assist in engaging the medical community at large in promotion of men's health		
25		topics.		
26		_		
27		<u>Status</u>		
28		I wo new	medical students and one new member joined the committee.	
29 30	2.	Gool/Acti	ivity	
31	Ζ.		access to relevant and timely information on men's health. This will be	
32		achieved		
33			romoting education for physicians and other health care professionals	
34			egarding major issues related to the physical and mental health problems of	
35			nen.	
36		b) P	resenting the 17th MMS Symposium on Men's Health with a focus on	
37		íin	creasing attendance and reach of the educational material.	
38			incouraging grand rounds presentations on men's health issues for delivery	
39		at	t Massachusetts hospitals.	
40			laintaining liaison with national and international men's health organizations,	
41			ssociations, and scholarly publications.	
42			laintaining awareness of research funding for issues specific to men's	
43		h	ealth.	
44 45		Status		
45 46		<u>Status</u>	mittee hosted a presentation at NMS titled "The First Danila Transplant:	
40 47			mittee hosted a presentation at MMS titled, "The First Penile Transplant: geons and Patient Report," which featured Dicken S.C. Ko, MD and Curtis L.	
47			Jr., MD, both of MGH, as speakers. In addition, committee member	
40			a Maapaw MD recorded a CME presentation on airling sofety	

49 Theodore Macnow, MD recorded a CME presentation on airline safety.

1 2 3 4 5 6 7		moving includi topics commi	ommittee also discussed a new approach to this goal, which would involve g toward online lectures/livestreaming and focusing on topical matters ng diet, male longevity, and physician burnout. Additionally, because program generally interest primary care and internal medicine practitioners, the ttee wondered if the medical society would consider offering nurse oner/mid-level provider CME credits, which could boost attendance.
8 9 10 11 12 13 14	3.	and so a) F b) E	Activity and assist MMS response to key issues regarding men's physical, mental, ocial health. This will be achieved by: Reviewing new findings in men's health and gender studies. Being a resource to the MMS officers, Board of Trustees, and committees on assues related to men's health.
15 16		<u>Status</u> Ongoin	g
17 18 19 20	4.	to impi	e patient-oriented resources to physicians and other health care professionals rove preventive health care for men. This will be achieved by:
21 22		,	Promoting the latest findings on men's health to patients via social media and the Society's existing communications vehicles.
23 24		b)	Publishing information on issues for preventive care for men's health in <i>Vital Signs</i> .
25 26 27		c)	Reviewing and updating appropriate website links to preventive men's health resources on the committee's section of the MMS website.
28 29 30 31		<u>Status</u> As par Health	t of the MMS website audit, dead links were removed or updated on the Men's page.
32	5.	<u>Goal/A</u>	
33 34 35			r and inform Massachusetts and federal legislative and executive bodies to that attention is paid to men's issues of health and welfare. This will be ed by:
36 37		a)	Working with the MMS Committee on Legislation to recommend positions on legislation relevant to men's health as necessary.
38 39		b)	Providing expertise to the MMS in developing and delivering testimony on relevant
40 41 42 43		c)	legislation, as needed. Continuing advocacy for a National Office of Men's Health in the United States Department of Health & Human Services.
44 45		<u>atus</u> ngoing	
46 47	F١	/19 Com	nmittee Budget
48		,962	
49 50	F١	19 Actu	al Committee Expenditures
51		95	

- 1 FY19 Estimated Cost of Committee Staff Support
- 2 \$4,500
- 3
- 4 Number of Appointed Members and Number of Advisors
- 5 12 members
- 6 7

11 12

13

- FY19 Number of Meetings and Percentage of Appointed Member Attendance
- 8 6 meetings with an average attendance of 43 percent
- 10 FY19 Number of Meetings at which a quorum was met: 1

FY20 Activities and Initiatives

14 Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024

15 Strategic Plan. Focusing on initiatives prioritized as critical or immediate,

- develop activities for initiatives to which your committee can make a significant
 contribution in FY'20 and describe the nature of that contribution. Include initiatives, if
- any, for which your committee is listed on a Strategic Initiative Plan.
- 19

Activity	Related Initiative (from Strategic Plan)
Focus on growing an active and engaged committee membership that includes representation from many demographics to assist in engaging the medical community in the promotion of men's health topics.	Physicians/#2/Intermediate: Create a physician community that includes opportunities for networking.
 Increase access to relevant and timely information on men's health. This will be achieved by: a) Promoting education for physicians and other health care professionals regarding major issues related to the health problems of men and constituent vulnerable populations. b) Maintaining awareness of research funding for issues specific to men's health. 	Patients/#2/Critical: Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.
Advise and assist MMS response to key issues regarding men's physical, mental, and social health. This will be achieved by:	MMS/#7/Intermediate: Create strategies that will engage various member constituent groups and increase engagement, diversity, and trust in MMS.
 a) Reviewing new findings in men's health and gender studies. b) Being a resource to the MMS officers, Board of Trustees, and committees on issues related to men's health. 	

Provide patient-oriented reso	urces to	Patients/#2/Critical: Assess vulnerable
physicians and other health of		populations and determine where the
professionals to improve pre-		MMS can have the strongest impact on
health care for men. This will	be achieved	access to appropriate care, including
by:		social determinants of health and health
		disparities.
a) Promoting the latest findin	gs on men's	
health to patients via social n	nedia and	
the Society's existing commu	inications	
vehicles.		
b) Publishing information on	issues for	
preventive care for men's he		
Signs This Week.		

2 **Instructions**: *Please list information below for any/all adopted resolution(s)/report*

3 assigned to your committee. For resolutions/reports from I-18, you may leave the second 4 column area blank.

5

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision		
Resolution or Report	Related Goal/Initiative Number/	Report Due (or in
Code/Title	Priority from Strategic Plan	Consultation)

6 7

8 \$1,821

- 9
- 10 FY20 Estimated Cost of Committee Staff Support
- 11 \$2,250

12

13 Special Committee Due for Renewal

14

Instructions: If your special committee is due for renewal in FY'20, please indicate how
the work of the committee aligns with the Strategic Plan. In addition, please review the
Strategic Initiative Priority Grid and indicate how the committee can support MMS (Goal
C) Strategic Initiatives 1-3.

19

20

Alignment with Strategic Plan (in 100 words or less):

The MMS Strategic plan outlines an approach to engage disadvantaged people and improve their access to care, among other goals.

The Men's Health Committee provides educational programming for both physicians and patients about the health issues affecting men generally and vulnerable populations uniquely. As described in the FY 19 report above, the committee is reimaging how to circulate information and reach new audiences in a way that accords with the strategic plan, especially regarding **Patients/#2/Critical**. A men's

- health newsletter, online presentations involving committee members and
- 30 subspecialty experts, and focusing on topical matters including nutrition, obesity,
- 31 healthy aging, and physician burnout, are among the new plan-aligned initiatives.

FY20 Committee Budget

- 1 Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less):
- 2 Because last year's symposium suffered from low attendance, the committee
- 3 decided to cancel the in-person event and move toward online presentations.
- 4 Benefits include low production costs and ease-of-access for practicing physicians.
- 5 Additionally, the committee is developing educational programming related to
- 6 physician burnout, obesity, and other urgent health issues known to be of great 7 interest to MMS members, and discontinuing those known to be of little value.

1		MAS	SACHUSETTS MEDICAL SOCIETY
2		COMMITTEE	REPORT ON ACTIVITIES AND INITIATIVES
3			
4			
5		de:	Report 28
6	Titl	le:	FY19 Goals/Activities (2018-2019)
7			FY20 Activities and Initiatives (2019-2020)
8	Со	mmittee:	Committee on Nutrition and Physical Activity
9			Fatima Cody Stanford, MD, Chair
10			
11	<u>Co</u>	mmittee Purpose or Missi	<u>on</u>
12	То	provide advice and couns	el to the Society and its leadership in matters related to
13	nut	trition and physical activity	, specifically to include food safety, dietary supplements,
14	obe	esity treatment and the rol	e of nutrition and physical activity in the prevention of
15	chr	ronic disease. To act as lia	aison for other committees in the Society and appropriate
16	out	tside organizations workin	g in these areas to address nutrition- and physical activity-
17	rela	ated issues.	
18			
19		<u>F</u>	Y19 Report on Goals/Activities
20			
21	1.	<u>Goal/Activity</u>	
22			mong physicians and the public of matters related to
23		· ·	ivity, food insecurity, obesity prevention and treatment, and
24		the prevention of weight	stigma.
25			
26			es for physicians and physicians in training about weight
27		stigma and preventing we	eight stigma in the health care setting.
28			
29			embers and relevant healthcare organizations resources for
30		food insecurity screening	and referrals to food and nutrition assistance.
31			
32		<u>Status</u>	
33			husetts Chapter of the American Academy of Pediatrics, the
34			b-based informational tools to educate physicians about
35			udes links to resources to assess one's own bias, tools for
36			e environment for people with obesity, education about
37			ge, tools for working with pediatric patients, information
38			auses of obesity which go beyond diet and exercise; how
39			ality measures, and links to literature and organizations for
40		more information about w	eight stigma and bias.
41			
42		U 1	policy at A-18 recommending physicians screen for food
43		•	e on Nutrition and Physical Activity developed content for the
44			www.massmed.org/foodinsecurity, providing information for
45			about food insecurity, screening tools, and referral
46			cians who are working to address food insecurity in their
47		-	erim Meeting, the committee hosted a table dedicated to the
48			surrounding food and security in the Commonwealth of
49			mittee plans to continue efforts along these lines to
50			ess about food insecurity within the Commonwealth's
51		population.	

2.	<u>Goal/Activity</u>
	To serve as a resource to MMS on issues related to obesity, weight stigma physical
	activity, nutrition, and food insecurity and other social determinants of health.
	Activity: To assist MMS in advocating for legislative policies and institutional
	practices to prevent weight stigma.
	Activity: Serve as a resource to the MMS, its HOD, Committee on Public Health,
	communications team and others on matters related to obesity, weight stigma,
	physical activity, nutrition and food insecurity and other social determinants of health.
	Status
	The committee has representation on the Committee on Public Health.
	Food inconvertive has been identified as a key initiative of MMC. The committee vice
	Food insecurity has been identified as a key initiative of MMS. The committee vice
	chair attended Food Is Medicine meetings and is now is now representing MMS as the chair of the Food Is Medicine provider education task force, which is exploring
	ways to educate physicians and physicians in training about nutrition and food
	insecurity.
	The committee sponsored a report to the House of Delegates with recommendations
	about physical activity and sedentary behavior for all patients, including those with
	physical, socioeconomic, or other barriers. The policy was adopted.
	(19 Committee Budget
\$1	,336
	(19 Actual Committee Expenditures
\$5	85
	(40 Estimated Cost of Committee Ctaff Cumpant
	(19 Estimated Cost of Committee Staff Support
ФС	5,000
Ni	umber of Appointed Members and Number of Advisors
	2 members
14	
F١	(19 Number of Meetings and Percentage of Appointed Member Attendance
	meetings with an average attendance of 62 percent.
<u>F</u>	(19 Number of Meetings at which a quorum was met: 3
	EV20 Activities and Initiatives
	FY20 Activities and Initiatives
In	structions: Please review the strategic initiatives listed in the MMS FY2020-2024
	rategic Plan. Focusing on initiatives prioritized as critical or immediate,

- develop activities for initiatives to which your committee can make a significant contribution in FY'20 and describe the nature of that contribution. Include initiatives, if any, for which your committee is listed on a Strategic Initiative Plan.

Activity	Related Initiative (from Strategic Plan)
Represent the MMS in leading the Food Is Medicine Physician Education working group to address food insecurity awareness among physicians.	Patients/#2/Critical : Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.

Explore opportunities for MMS advocacy	Patients/#2/Critical: Assess vulnerable
for policies and programs that make	populations and determine where the
available regular, safe, physical activity for	MMS can have the strongest impact on
children and adults including those with	access to appropriate care, including
disabilities, older adults and those with	social determinants of health and health
socioeconomic barriers to activity.	disparities.

- 1
- 2 **Instructions**: *Please list information below for any/all adopted resolution(s)/report*
- 3 assigned to your committee. For resolutions/reports from I-18, you may leave the second
- 4 column area blank.
- 5

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision		
-	Related Goal/Initiative Number/ Priority from Strategic Plan	Report Due (or in Consultation)
CNPA Report A-19 A-2/ Promoting Physical Activity	Patients/#2/Critical	A-20

- 7 FY20 Committee Budget
- 8 \$1,240
- 9
- 10 FY20 Estimated Cost of Committee Staff Support
- 11 \$6,000 12

13 Special Committee Due for Renewal

14

Instructions: If your special committee is due for renewal in FY'20, please indicate how
the work of the committee aligns with the Strategic Plan. In addition, please review the
Strategic Initiative Priority Grid and indicate how the committee can support MMS (Goal
C) Strategic Initiatives 1-3.

19

20 Alignment with Strategic Plan (in 100 words or less):

21 In addition to those stated above, the committee serves as a resource to the MMS on 22 issues of nutrition and physical activity, which affect all patients, and are particularly 23 critical to vulnerable populations (Patients #2/Critical). The committee is taking a lead 24 role on food insecurity initiatives of the MMS, working with external partners, and is 25 reviewing opportunities to educate members about issues related to nutrition and 26 physical activity to support these efforts. The committee is exploring collaborations 27 (Patients #5/Intermediate) and other opportunities to educate physicians and 28 physicians in training about weight bias, the impact it has on patient health 29 outcomes, as well as opportunities to advocate for better access to nutrition and 30 physical activity opportunities for all patients (Patients #2/Critical, MMS 8 / 31 Immediate). 32

- Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less):
 In discussing its action plan for the year, the committee reviewed the strategic plan,
 and focused its activities to align with the MMS strategic plan, and support MMS
 and initiatives
- 36 goals and initiatives.

1		MASSACHUSETTS MEDICAL SOCIETY
2	COMMIT	TEE REPORT ON ACTIVITIES AND INITIATIVES
3		
4		
5	Code:	
6	Title:	FY19 Goals/Activities (2018-2019)
7	o <i>w</i>	FY20 Activities and Initiatives (2019-2020)
8	Committee:	Committee on Oral Health
9		Hugh Silk, MD, MPH, Chair
10		
11	Committee Purpose or Missie	
12		ee on Oral Health is to increase public awareness of the relationship
13		health to good physical health; promote prevention and improve oral
14	health literacy; and recomme	end ways to improve access to oral health care.
15		EV40 Dement on Ociale/Activities
16	1 Cool/Activity	FY19 Report on Goals/Activities
17 10	1. <u>Goal/Activity</u>	d continue to support organize Massachusette projecte such as the
18 19		d continue to support ongoing Massachusetts projects such as the are/Dental Providers Diversion program for MassHealth clients; the
20		ral health as a component of accountable care organizations; and
20		and online training program for physicians and qualified personnel to
22	apply fluoride varnish to eligi	
23	apply hubble variant to engli	
24	<u>Status</u>	
25		appraised of the MassHealth Emergency Room/Urgent Care Dental
26		which addresses the correlation between poor oral health and access
27		ribution of dentists, insurance coverage, and affordability. The program
28		g on the identification of oral health related conditions, the patient
29		sHealth member benefits and correct coding for billing oral health
30		reach every emergency room in the state.
31	5	, , ,
32	Following adoption by the H0	DD of COOH Report A-18 A-3, Ensuring Oral Health as a Component
33		ations, the committee published an article for Vital Signs. There was
34	also discussion with the chai	r of the Committee on the Quality of Medical Practice regarding that
35	committee's concerns that m	edical providers are not yet ready for this metric and prefer that the
36	metric continue as a "pay for	reporting" rather than change to "pay for performing" criteria. Oral
37	Health committee members I	believe the language should remain broad and that the oral health
38		hers. The PCP should provide an oral health screen and send a needs
39		is to whether the patient needs a dental home and/or urgent dental
40	care. MassHealth could ther	n make the dental referral, identifying those who need to be seen.
41		tal providers who accept that insurance. Due to concerns that PCPs
42		nation, members suggested a MassHealth portal be developed similar
43	to that of the emergency dep	artment oral health project.
44		
45		trainings are available to primary care physicians for eligible
46		aQuest. Additionally, Harvard trains its medical students in fluoride
47		s with its third-year medical students. There were 218 new providers
48		ning in FY2019, cumulating in a total of 1,164 providers trained. A total
49		have occurred. In addition to the varnish trainings, DentaQuest offers
50	onsite visits and retreshers a	s part of their TPA contract with MassHealth.

- 1 2. <u>Goal/Activity</u>
- 2 To develop information and training for primary care physicians and dentists on opioid prescribing
- 3 best practices and other/alternate interventions for dental pain, in concert with the MMS Task Force
- 4 on Opioid Therapy and Physician Communication.
- 5 6 <u>Status</u>
- 7 In concert with the Massachusetts Dental Society and DeltaDental, the committee offered a live
- 8 one-hour webinar on opioid management. The dental society provided the live taping and
- 9 presentation of the webinar for which they provided CE credit. The archived version is being
- 10 prepared for MMS enduring materials as part of online educational materials.
- 11
- 12 3. <u>Goal/Activity</u>
- Inform medical society members and other physicians and healthcare professionals on oral health
 best practices, including information for older/elder patients, dental pain management, and fluoride
 varnish.
- 16
- 17 <u>Status</u>
- An article titled, "Pay Attention to the Oral Health of Your Elderly Patients" was published in the May 2019 issue of Vital Signs. Prepared in collaboration with the Committee on Geriatric Medicine, the
- 20 article emphasizes the effect of poor oral health on one's health and social well-being.
- 21

The medical society, the MCAAP, and the MCAAFP shared information with their respective members regarding information on fluoride varnish training.

- 24
- 25 4. Goal/Activity

To continue to connect with other MMS committees as well as the Massachusetts Dental Society, Division 1 of the ACOG, the Massachusetts League of Community Health Centers, and the MA Department of Public Health to educate and inform healthcare professionals regarding perinatal quidelines for oral health.

- 29 y 30
- 31 Status

Relative to the Massachusetts Perinatal Guidelines, the chair worked with the Worcester District Medical Society for assistance in emphasizing the relationship between the obstetrics program and dental providers with oral health prompts for getting children in for dental care. Additionally, thirty providers attended the Perinatal Oral Health educational module during Yankee Dental. In Massachusetts, five health centers are involved in the perinatal oral health initiative with two more to be added. During these health center visits, patients' oral health history is obtained, they receive an examination and referral to a dentist. The initiative is funded through a grant from the

- 39 Massachusetts Department of Public Health. In addition, DentaQuest, in conjunction with the TPA
- 40 contract they hold with MassHealth, distributed via mail, regional dental provider trainings, and
 41 onsite visits, a collateral piece promoting the Smiling Stork Program and the Massachusetts
- 41 onsite visits, a conateral piece promotir 42 Perinatal Guidelines.
- 42 r 43
- 44 FY19 Committee Budget
- 45 \$1,308
- 46
- 47 FY19 Actual Committee Expenditures
- 48 \$733
- 49
- 50 FY19 Estimated Cost of Committee Staff Support
- 51 The estimated cost is \$4,500 for five meetings.

- 1 <u>Number of Appointed Members and Number of Advisors</u>
- 2 There are twelve appointed members and six advisors.3
- <u>FY19 Number of Meetings and Percentage of Appointed Member Attendance</u>
 Five meetings with an average attendance of 48 percent.
 - - FY19 Number of Meetings at which a quorum was met: 2

FY20 Activities and Initiatives

- 11 Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024 Strategic
- 12 Plan. Focusing on initiatives prioritized as critical or immediate, develop activities for
- 13 initiatives to which your committee can make a significant contribution in FY'20 and describe the
- 14 nature of that contribution. Include initiatives, if any, for which your committee is listed on a
- 15 Strategic Initiative Plan.
- 16

6 7

8 9

10

Activity	Related Initiative (from Strategic Plan)
Advise the MMS in the merits of water fluoridation in the Commonwealth, which will positively impact the oral health of all residents, but particularly children and adults in underserved areas.	Patients/#2/Critical : Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities
Address the importance of the oral cavity relative to hunger and appropriate nutrition, especially as it relates to vulnerable populations.	
Promote and continue to advocate for oral health as a component of overall health within the state's accountable care organizations.	Patients/#6/Immediate: Advocate for access, affordability, and quality of patient care to be the primary objectives of care integration

- 17
- 18 **Instructions**: *Please list information below for any/all adopted resolution(s)/report assigned to your*
- 19 committee. For resolutions/reports from I-18, you may leave the second column area blank.
- 20

REPORTS DUE TO HOD IN EY20	(at I-19 or A-20) or to BOT for Decision

	· · · · · · · · · · · · · · · · · · ·
Resolution or Report	Related Goal/Initiative Number/Report Due (or in
Code/Title	Priority from Strategic Plan Consultation)

21

22 <u>FY20 Committee Budget</u>

23 The committee has been budgeted \$1,214 for FY20

- 24
- 25 FY20 Estimated Cost of Committee Staff Support
- 26 \$4,500 for five meetings
- 2728 Special Committee Due for Renewal
- 29
- 30 Instructions: If your special committee is due for renewal in FY'20, please indicate how the work of
- 31 the committee aligns with the Strategic Plan. In addition, please review the Strategic Initiative
- 32 Priority Grid and indicate how the committee can support MMS (Goal C) Strategic Initiatives 1-3.

1 Alignment with Strategic Plan (in 100 words or less):

2 In addition to activities previously highlighted, the committee aligns with the 2020-2024 strategic 3 plan by working to increase in the number of eligible children on MassHealth receiving fluoride

varnish. Achievement is expected through awareness efforts via Society's communications 4

5 channels, and in concert with the Massachusetts Dental Society, the Massachusetts Chapter -

6 American Academy of Family Physicians, the Massachusetts Chapter - American Academy of

7 Pediatrics, and DentaQuest, the TPA of the MassHealth Dental Program.

8

9 In addition to the strategic priorities noted above, the committee actively demonstrates the 10 important relationship between overall health, oral health and patient care. MMS has the only 11 medical society committee in the country comprised of physicians and dental:

12 13

14

- MMS/#1/Critical: Evaluate impact and relevance of member-related products, services, and activities, and initiate a plan to discontinue those that do not offer strategic value to the membership.
- 15
- 16
- MMS/#2/Immediate: Narrow focus and prioritize activities to align with our strategic plan. •
- MMS/#3/Immediate: Reform governance to accomplish the strategic goals and objectives. •
- 17 18

Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less): 19

20 The Committee on Oral Health enjoys ongoing collaborations with the Massachusetts Dental 21 Society, Health Care for All, the Better Oral Health Massachusetts Coalition, and the 22 Massachusetts Department of Public Health. The committee will evaluate its past three years of 23 project and initiatives with careful consideration of financial costs, physician and/or patient impact, 24 and membership value. Beginning with the 2019-2020 presidential year, the committee will narrow 25 its focus to those outlined above and give careful consideration to how best to educate physicians. 26 dentists, parents, and youth on the dangers of smoking, vaping, and nicotine. The committee hears 27 reports from the Committee on Public Health at each meeting and will work with that committee and 28 others as appropriate to advance the strategic goals and objectives.

1		MASSACHUSETTS MEDICAL SOCIETY
2	COMMI	TEE REPORT ON ACTIVITIES AND INITIATIVES
3		
4		
5	Code:	Report 30
6	Title:	FY19 Goals/Activities (2018-2019)
7		FY20 Activities and Initiatives (2019-2020)
8	Committee:	Committee on Preparedness
9		Ritu Sarin, MD, Chair
10		
11	Committee Purpose or Missi	on
12		Society (MMS) recognizes that an infectious disease outbreak, terrorist
13		event can occur at any moment with the potential to cause severe
14		MMS is dedicated to enhancing and continually improving the planning,
15		covery activities needed to protect the health of the Commonwealth.
16	initigation, response, and res	
17	The MMS Committee on Pre	paredness will work in collaboration with local, state, and federal public
18		nd others responsible for emergency preparedness and disaster
19	U / I /	oment, coordination, and facilitation of educational initiatives,
20		ind integrated response plans for the medical community to minimize the
21		nan-made disasters and other public health emergencies. The
22	-	will incorporate into its work advocacy for adequate resources for
23		lical needs during disasters, and for community engagement in all
24	phases of preparedness plar	
25	phaces of propared loce plai	in ing.
26	The Committee on Prepared	ness will endeavor to assist physicians and other health care
27		edness efforts with planning and response tools and other resources,
28		olunteer with MA Responds, the Massachusetts centralized volunteer
29		ance the state's capacity to respond to health emergencies.
30	management eyetem, to em	
31		FY19 Report on Goals/Activities
32		
33	1. Goal/Activity	
34		Preparedness will work in collaboration with local, state, and federal
35		ospitals, and others responsible for emergency preparedness and
36		the development, coordination, and facilitation of educational
37	•	ns systems, and integrated response plans for the medical community
38		ences of natural or man-made disasters and other public health
39		hittee on Preparedness will incorporate into its work, advocacy for
40		opulations with special medical needs during disasters, and for
41		in all phases of preparedness planning.
42	commanity engagement	in all phases of preparedness planning.
43	Status	
44		to engage with private and public organizations, government
45		ons and individuals across the Commonwealth. The committee benefits
46		he director of the Office of Preparedness and Emergency Management
47	• •	partment of Public Health (MDPH) and continues to explore
48		sely with MDPH networks on information sharing.
49		sory with more renormation and my.
49 50	In 2018 the Assistant Se	cretary for Preparedness and Response (ASPR) selected
51		Hospital (in partnership with the MA Department of Public Health and
52		ations across the Commonwealth) as a recipient for their pilot
~-		and a real point of the prot

1 Regional Disaster Response System program. The partnership's purpose is to leverage the 2 clinical resources, experience, and expertise of the Commonwealth's medical centers and the 3 long-standing history of collaboration among public health, healthcare, emergency 4 management, and public safety agencies to establish a statewide entity comprised of healthcare 5 and governmental partners that optimizes regional coordination of health and medical assets in 6 disaster planning and response. The Partnership's mission identifies three priorities: to build a 7 network of technical advisors, to establish 24/7/365 support for healthcare incident response 8 and situational awareness and to develop and support deployable disaster medical response 9 teams that can support all-hazards local, state, and regional disaster response when needed. 10 As the statewide professional association for physicians and medical students, as well as a 11 leadership voice in health-related legislation, the Massachusetts Medical Society was invited to 12 join as a named member in this effort. As a member, the MMS serves on the Partnership's 13 executive committee, which provides strategic leadership to the Partnership, setting policy and 14 approving major decisions, and serves on several working groups, including serving as co-chair 15 the working group on vulnerable populations. 16

17 2. <u>Goal/Activity</u>

The Committee on Preparedness will endeavor to assist physicians and other health care
 professionals in their preparedness efforts with planning and response tools and other
 resources, and will encourage them to volunteer with MA Responds, the Massachusetts
 centralized volunteer management system, to enhance the state's capacity to respond to health
 emergencies.

24 <u>Status</u>

25 The MMS was notified by the Massachusetts Department of Public Health (DPH) that it was 26 approved under a master agreement engagement under RFQ 162622, MA Responds, Health 27 Volunteer Management System, for a renewal of one year to begin July 1, 2018. The 28 agreement is for continuation of services to support MA Responds and Medical Reserve Corps 29 (MRC) Units within the Commonwealth of Massachusetts. RFQ 162622 FY 2019 also directs the MMS to work with the DPH Office of Preparedness and Emergency Management (OPEM) to 30 31 provide health and medical expertise, advice for credentialing of medical professional volunteers 32 as well as continuation of project management for the vendor contract with Juvare for the 33 implementation and integration of the MA Responds statewide volunteer management system. 34 MMS works in collaboration with OPEM, MRC and other volunteer group representatives for the 35 continuation of a MA Responds outreach plan and for the orientation and on-going 36 communication and continuing education needs of MA Responds volunteers as well as system 37 training needs for unit administrators. The renewed contract also includes funding for 38 coordination and support for the development of Crisis Standards of Care (CSC) guidance for 39 Massachusetts.

40

41 3. Goal/Activity

The Committee on Preparedness will advance public health and preparedness initiatives through use of MMS communication tools including social media and publications to direct interested professional to available resources. The Committee will utilize MA Responds and designated networking opportunities to reach out to the physician and volunteer community as appropriate.

48 Status

49 Ongoing engagement with the MMS Department of Communications and the Massachusetts

50 Department of Public Health Office of Preparedness and Emergency Response.

- 1 4. Goal/Activity
- 2 The Committee on Preparedness will continue to monitor legislative and regulatory initiatives at 3 the state and federal level.
- 4
- 5 <u>Status</u>
- Ongoing engagement with the MMS Department of Advocacy, Government and Community
 Relations. Priority issues include firearm safety, bleeding control education and infectious
 disease.
- 9 uisease.
- 10 FY19 Committee Budget
- 11 \$5,971.
- 12

13 <u>FY19 Actual Committee Expenditures</u>14 \$6,967.

- 14 \$ 15
- 16 FY19 Estimated Cost of Committee Staff Support
- 17 \$6,000 based on staff and 4 meetings18
- 19 Number of Appointed Members and Number of Advisors
- 20 members and 5 advisors.21
- 22 FY19 Number of Meetings and Percentage of Appointed Member Attendance
- 4 meetings with an average attendance of 67 percent.
- 25 <u>FY19 Number of Meetings at which a quorum was met:</u> 4
 26

FY20 Activities and Initiatives

- Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024 Strategic
 Plan. Focusing on initiatives prioritized as critical or immediate, develop activities for
- Plan. Focusing on initiatives prioritized as critical or immediate, develop activities for
 initiatives to which your committee can make a significant contribution in FY'20 and describe the
- 32 nature of that contribution. Include initiatives, if any, for which your committee is listed on a
- 33 Strategic Initiative Plan.
- 34

Activity	Related Initiative (from Strategic Plan)
Bleeding Control Implement a three-year bleeding control "train the trainer" demonstration project to provide hands-on regional instruction for physicians and allied health professionals in bleeding control, wound packing, and tourniquet application in order to increase the number of individuals trained in bleeding control in the Commonwealth	Patients/#2/Critical: Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.
Develop a comprehensive bleeding control resource and information page on the MMS website to support the bleeding control demonstration project and increase bleeding control awareness.	

Review and assess the efficacy and impact of	
the bleeding control "train the trainer"	
demonstration project.	
Firearms Injury Prevention and Reduction	Patients/#2/Critical: Assess vulnerable
Develop messaging regarding firearms	populations and determine where the MMS
education and screening initiatives.	can have the strongest impact on access to
	appropriate care, including social
Advocate for laws and regulations to prevent	determinants of health and health
and reduce injury from firearms and increased	disparities.
funding for firearm research.	MMS/#8/Immediate: Expand advocacy
Encourage education on firearms at the	efforts in collaboration with key stakeholders
medical school level.	on issues deemed critical to physicians and
	patients.
Partner with local health organizations,	
physicians, and the community on firearm	Patients/#5/Intermediate: Enhance
injury prevention activities.	collaboration with patients; health care and
	technology organizations; community resources; and state, federal, and other
Emergency Preparedness and Disaster	stakeholders; with a focus on our patient-
Management	centered objectives.
work in collaboration with local, state, and federal public health agencies, hospitals, and	
others responsible for emergency	
preparedness and disaster management, on	
the development, coordination, and facilitation	
of educational initiatives, communications	
systems, and integrated response plans for the	
medical community to minimize the	
consequences of natural or man-made	
disasters and other public health emergencies.	

- **Instructions**: Please list information below for any/all adopted resolution(s)/report assigned to your committee. For resolutions/reports from I-18, you may leave the second column area blank.
- 3 4

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision		
Resolution or Report Code/Title	Related Goal/Initiative Number/ Priority from Strategic Plan	Report Due (or in Consultation)
I-18 A-8 Stop the Bleed/Save a Life	Patients/#2/Critical	I-19

- 7 FY20 Committee Budget \$6,000

- FY20 Estimated Cost of Committee Staff Support
- \$6,000

1		MASSACHUSETTS MEDICAL SOCIETY
2	CO	MMITTEE REPORT ON ACTIVITIES AND INITIATIVES
3 4		
5	Code:	Report 31
6	Title:	FY19 Goals/Activities (2018-2019)
7		FY20 Activities and Initiatives (2019-2020)
8	Committee:	Committee on Senior Physicians
9		Luis Sanchez, MD, Chair
10		
11	Committee Purpose o	r Mission
12		mittee on Senior Physicians (CoSP) is to recognize the many diverse
13		ern to senior physicians age 65 and older, and to explore ways to address
14		also provides these professionals the opportunity to promote continued
15	participation and persor	ial enrichment.
16	EV40 Denert en Caele	10 otivities
17 18	FY19 Report on Goals	Activities
10 19	1. Goal/Activity	
20		f pertinent education and information and provide opportunities for collegial
21	interaction and parti	· · · ·
22		
23	Status	
24	The committee held	two dinner events for MMS senior physician members and their
25	spouses/significant	others/guests to promote collegial sharing of experiences and concerns with
26	an educational them	1e.
27		
28		B event topic was Well-Being Strategies and Community Opportunities When
29	Retiring, with five M	MS senior physician members as speakers.
30	The event was well	attended and a recounding success. Of attended and recovered at that the
31 32		attended and a resounding success. 84 attended and responded that the learning about retirement and would recommend the event to other MMS
33		dees especially enjoyed the breakout sessions which enhanced collegial
34		ting. Handouts were very helpful.
35	Sharing and network	
36	The May 22, 2019 e	vent topic was The Financially Confident Physician: Planning For or During
37		eakers from Baystate Financial, Physicians Insurance, a MMS senior
38	•	nd the president of the MMS Alliance.
39		
40	Polling before and a	fter the presentations allowed for increased feedback by the majority of the
41	•	articipants would recommend the event to other MMS members and
42	expressed interest in	n more in-depth information of certain financial topics.
43		
44		attendees of the respective events included interest in topics such as
45		e information about medical licenses, work and volunteer options post
46 47	reurement, psycholo	ogical/social, financial/insurance, and community involvement.
47 48	At the A 18 Amorica	an Medical Association (AMA) Senior Physician Section (SPS) Assembly
40 49		on June 9, 2018, Dr. Sanchez's presentation <i>How to Successfully Transition</i>
50		I Into Retirement was well-received.

1 Dr. Sanchez, chair of the committee, was featured on October 23, 2018 in the AMA "Members 2 Move Medicine" series, which celebrate inspiring members who are relentlessly moving 3 medicine through advocacy, education, patient care and practice innovation. 4 5 2. Goal/Activity 6 Encourage and engage physicians 65 years of age and over to understand the professional 7 concerns and personal needs of senior physicians, and to develop strategies to assist MMS 8 members. 9 10 Status 11 Activity 1: The Council on Medical Education (CME) Report 1-I-18: Competency of Senior 12 Physicians was shared at the AMA House of Delegates during the Interim meeting last 13 November 2018. The report was referred back to the AMA CME. 14 15 The CoSP will review and consider adapting the AMA guidelines once approved for MMS since 16 there are no MMS guidelines. 17 18 The AMA 1-A-19 CEJA Report: Competence, Self-Assessment and Self-Awareness will be 19 shared with MMS members. 20 21 The Massachusetts Psychiatric Society Retirement Interest Group invited Dr. Sanchez to lead a 22 discussion at its June 5, 2018 event about physician impairment: how to recognize it in self and 23 others and what to do then. 24 25 Activity 2: Mentoring is the new initiative by the committee. There is consensus by the 26 committee members and feedback from members that MMS members over 50 years of age are 27 not looking for mentors but more interested in opportunities to have meaningful conversations 28 with colleagues. 29 30 The subcommittee will reach out to committee members of the following Sections and 31 Committee to learn of mentoring topics interested in: Medical Student Section, Resident/Fellow 32 Section, Committee on Young Physicians, Women Physicians' Section and Minority Affairs 33 Section. 34 35 Activity 3: Dr. Sanchez, alternate delegate on the AMA Senior Physicians Section (SPS) 36 Governing Council, represented the CoSP at the AMA SPS Assembly at the I-18 and A-19 37 meetings. 38 39 3. Goal/Activity 40 Educate, support, and advocate for the senior physicians with regards to medical licensing, 41 regulatory requirements and other professional matters. 42 43 Status 44 The information that was presented by Brendan Abel, Esq, MMS legal & regulatory affairs 45 counsel, at the May 23, 2018 senior physicians event, was shared with MMS senior physician 46 members. The topics were related to the new BORIM CME Pilot Program with less CME credit 47 requirements (i.e. 50 vs 100) and licensure options/legal implications when considering

48 retirement.

- 1 FY19 Committee Budget
- 2 \$3,000
- 3
- 4 <u>FY19 Actual Committee Expenditures</u>
- 5 **\$**3,001 6
 - FY19 Estimated Cost of Committee Staff Support
- 8 \$8,500

910 <u>Number of Appointed Members and Number of Advisors</u>

- 11 20 21 members and 0 advisors
- 12

7

FY19 Number of Meetings and Percentage of Appointed Member Attendance
 4 meetings with an average attendance of 67 percent.

- 15 16
- FY19 Number of Meetings at which a quorum was met: 4

FY20 Activities and Initiatives

18 19

17

20 Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024 Strategic

21 Plan. Focusing on initiatives prioritized as critical or immediate, develop activities for

22 initiatives to which your committee can make a significant contribution in FY'20 and describe the

- 23 nature of that contribution. Include initiatives, if any, for which your committee is listed on a
- 24 Strategic Initiative Plan.

2	5
2	J

Activity	Related Initiative (from Strategic Plan)
Continue to have networking/educational dinner events and find other ways to promote collegial sharing of experiences and concerns.	Physicians/#2/Intermediate: Create a physician community that includes opportunities for networking.
Discuss potential mentoring topics with the following Sections and Committee: Medical Student Section, Resident/Fellow Section, Committee on Young Physicians, Women Physicians' Section and Minority Affairs Section.	Physicians/#3/Intermediate: Provide leadership development offerings for physicians and physician-led teams.
Consider adapting AMA guidelines regarding senior physician competency and cognitive decline issues when available and submit a report to the MMS HOD since there is no MMS policy. Dr. Sanchez, alternate delegate on the AMA SPS Governing Council, will represent the CoSP at the AMA SPS Assembly at the I-19 and A-20 meetings. Invite Brendan Abel, Esq, the MMS regulatory and legislative counsel, to provide updates of amendments from the BORM, when applicable.	Physicians/#4/Intermediate: Identify factors that contribute to satisfying work environments and advocate with stakeholders for action, where needed.

- **Instructions**: *Please list information below for any/all adopted resolution(s)/report assigned to your*
- 2 committee. For resolutions/reports from I-18, you may leave the second column area blank.

Resolution or Report Code/Title	Related Goal/Initiative Number/ Priority from Strategic Plan	Report Due (or in Consultation)
		,
(20 Committee Dudget		
<u>Y20 Committee Budget</u> 3,000		
Y20 Estimated Cost of Com	mittee Staff Support	
3,500		
pecial Committee Due for	Renewal	
e committee aligns with the	committee is due for renewal in FY e Strategic Plan. In addition, please v the committee can support MMS (review the Strategic Initiative
	tegic Plan <i>(in 100 words or less):</i> source for the MMS on the following t and expertise:	
Physicians/#2/Intern networking.	nediate: Create a physician commu	unity that includes opportunities
Physicians/#3/Intern physician-led teams.	nediate: Provide leadership develo	pment offerings for physicians a
	nediate: Identify factors that contrib akeholders for action, where needed	
Goal C: The Massach leadership voice in hea	oal C) Strategic Initiatives 1-3 (in usetts Medical Society/The MMS wil th care, advancing medical knowledge omes, maintaining a sound financial (I be the most trusted and respe and the medical profession to imp
expanding membership		

1 2 3		MASSACHUSETTS MEDICAL SOCIETY COMMITTEE REPORT ON ACTIVITIES AND INITIATIVES
4 5	Code:	Report 32
6	Title:	FY19 Goals/Activities (2018-2019)
7		FY20 Activities and Initiatives (2019-2020)
8	Committee:	Committee on Senior Volunteer Physicians
9		Helen Cajigas, MD, Chair
10		
11 12	Committee Purpos	
13		the Committee on Senior Volunteer Physicians (CSVP) is to utilize the skills of MMS senior practicing and/or retired physician members to fulfill
14		nd health education needs of communities and populations throughout
15		in agreed upon programs.
16	maccachacotte	
17		FY19 Report on Goals/Activities
18	1. Goal/Activity	
19		e participation of senior physician volunteer members in providing health care to
20		or underserved populations by addressing the need for MMS-sponsored
21	•	bility insurance and also by fostering communication among the free health care
22	programs.	
23	Statua	
24 25	<u>Status</u> Activity 1: The	committee continued to provide MMS-sponsored professional liability insurance
25 26		nior physician members who volunteer in free health care programs through
20 27		ince Company. Requests for insurance were reviewed by committee members.
28		
29	Activity 2: The	committee hosted the 15th Annual Free Health Care Forum on October 17, 2018.
30		ided an opportunity for attendees to share experiences in the delivery of free
31		he uninsured and/or underserved community.
32		
33		Immigrants: Hidden Challenges of Health Care Access. The event featured
34		akers from various sectors including state and local government and healthcare
35		Governor Charlie Baker was represented by his Chief of Staff of the Office for
36	0	Immigrants while Boston's Mayor Martin Walsh was represented by his Director
37		Advancement. Physicians involved in immigrant's research who actively take care
38 39		ts also participated as speakers. Additionally, Alain Chaoui, MD, FAAFP, MMS B-2019, gave a very well received special presidential address, and Dr. Helen
40		Chair, presented an overview of CSVP's mission, goals, activities and volunteer
41	opportunities.	Chair, presented an overview of COVF's mission, goals, activities and volunteer
42	opportainties.	
43	The program w	as very well attended with a record high of 150 registrants and 102 attendees.
44		esentation including 52 physicians, 9 medical students, and 41 allied health
45		Attendees included physician volunteers and potential volunteers,
46	-	vs, medical students, allied health professionals and committee members. The
47	audience partic	sipated actively and provided feedback.
48		
49		found the seven speakers very knowledgeable, inspiring, passionate and
50		e handouts and toolkits were valuable resources. An important consensus was
51 52	that the forum i and network.	s a unique, meaningful way to acquire new information, have timely discussion

1 2. Goal/Activity

2 To continue the committee's Mentorship Program, which enables physician volunteers to serve 3 as facilitators/mentors to medical students.

4 5

6

7

8

9

10

11 12

13

14

15 16

17

18

19

21

22 23

35

36 37

- <u>Status</u>
- Sponsored the 21st annual Physician Facilitator Volunteer Program at MMS on June 7, 2018. The event was well attended with 14 attendees. There was an additional 13 interested who could not attend and were emailed information about facilitating a small group of medical students in the Integrated Problems course offered by the Boston University School of Medicine.
- Continued to provide volunteers to supervise and mentor students at the free health care
 programs at The Sharewood Project in Malden and Worcester Free Clinic Coalition, when
 requested.
- To continue promoting mentorship and leadership, Harvard Medical School MD Candidate, Gabriella Herrera, moderated the Q &A Session during the 2018 Annual Fall Forum while other medical students assisted with other duties.
- 20 3. Goal/Activity
 - To select the MMS Senior Volunteer Physician of the Year.

<u>Status</u>

- The committee selected Sahdev Passey, M.D. of Worcester for the 2019 Senior Volunteer
 Physician of the Year Award.
 26
- The Free Health Stop in Shrewsbury, MA was started in 2005 under the successful guidance of Dr. Passey, who served as its Medical Director. He has provided direct clinical patient care and visionary leadership at the program for more than a decade. Dr. Passey is also the president of the Worcester District Medical Society.
- 31 Dr. Passey will receive his award at the Annual Free Health Care Forum Award Dinner on 32 October 16, 2019.
- 33 34 4. <u>Goal/Activity</u>
 - To promote volunteer activities to all MMS members.
 - <u>Status</u>
- Activity 1: Maintained and continued to update the web page for the CSVP, listing news,
 upcoming events, and information of interest to the senior physician population.
- Activity 2: Promoted committee activities through multi-channel communications as needed: at
 the exhibit of the I-18 and A-19 MMS HOD Meetings; via The Physician Volunteer e-newsletter, *Vital Signs* (MMS print newsletter) and *Vital Signs This Week* (MMS weekly e-newsletter).
- Activity 3: Maintained a directory of free health care programs to distribute to interested
 volunteer physicians.
- 47
- Activity 4: Answered questions on an ongoing basis about the CSVP and provided information
 to physicians who inquired about the logistics of the volunteering process including credentialing
 and malpractice insurance coverage.

- 1 FY19 Committee Budget
- 2 Through the joint effort of PIAM/Coverys and MMS, complimentary malpractice insurance coverage
- 3 was provided to 23 member physicians during FY19. The FY19 budget was \$3,000 for committee
- 4 meeting meals and October forum.
- 5
- 6 FY19 Actual Committee Expenditures
- 7 \$2,186 (committee meeting meals and forum)
- 8 \$17,786.80 (MMS-sponsored malpractice insurance coverage for volunteer activities)
- 10 FY19 Estimated Cost of Committee Staff Support
- 11 \$10,000
- 12

13 <u>Number of Appointed Members and Number of Advisors</u>

14 13 appointed members and 0 advisors15

16 FY19 Number of Meetings and Percentage of Appointed Member Attendance

17 Five meetings with an average attendance of 48 percent.18

19 <u>FY19 Number of Meetings at which a quorum was met:</u> 3
 20

FY20 Activities and Initiatives

Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024 Strategic
Plan. Focusing on initiatives prioritized as critical or immediate, develop activities for
initiatives to which your committee can make a significant contribution in FY'20 and describe the
nature of that contribution. Include initiatives, if any, for which your committee is listed on a
Strategic Initiative Plan.

28

Activity	Related Initiative (from Strategic Plan)
Provides MMS-sponsored professional liability insurance coverage to senior physician members who volunteer in free health care programs through Coverys Insurance Company. Requests for insurance are reviewed by committee members.	Patients/#2/Critical : Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.
Provide volunteers to supervise students at the free health care programs at The Sharewood Project in Malden and Worcester Free Clinic Coalition, when requested.	
The Annual Free Health Care Forum provides	Patients/#3/Intermediate: Advocate for
an opportunity for attendees to share experiences in the delivery of free health care	affordability of care.
to the uninsured and/or underserved	Patients/#4/Critical: Evaluate the
community.	establishment of an MMS principle that
Attendees included physician volunteers and	declares health in all its dimensions, including health care, as a human right.
potential volunteers, residents/fellows, medical	including nearth care, as a numan fight.
students, allied health professionals and	Patients/#6/Immediate: Advocate for
committee members.	access, affordability, and quality of patient
	care to be the primary objectives of care integration.

- Instructions: Please list information below for any/all adopted resolution(s)/report assigned to your
- committee. For resolutions/reports from I-18, you may leave the second column area blank.
- 3

Resolution or Report Code/Title	Related Goal/Initiative Numb Priority from Strategic Plan	per/Report Due (or in Consultation)
		I
Y20 Committee Budget		
	xecutive Office, per Bill Howland. ding hot meals at the October fall	The increase is to accommodate the
	ed malpractice insurance coverage	
Y20 Estimated Cost of Cor	nmittee Staff Support	-
510,000	ninillee olan oupport	
Spacial Committee Due fo	r Donowol	
Special Committee Due fo	<u>r Kellewal</u>	
he committee aligns with th	e Strategic Plan. In addition, plea	FY'20, please indicate how the work ase review the Strategic Initiative IS (Goal C) Strategic Initiatives 1-3.
	<u>Plan (in 100 words or less):</u>	abara in providing baalth care to
	of senior physician volunteer men ed populations by addressing the	need for MMS-sponsored professio
	y fostering communication among	
Continue the committee's M	entorshin Program, which enable	s physician volunteers to serve as
		nior Volunteer Physician of the Year.
The committee is a resource	e for the MMS on the following str	ategic initiatives on which the
committee has insight and e	•	J J
• Patients/#2/Critical: /	Assess vulnerable populations an	d determine where the MMS can ha
U	· · · · · · · · · · · · · · · · · · ·	cluding social determinants of healt
 and health disparities Patients/#3/Intermed 	s. liate: Advocate for affordability of	care
		MMS principle that declares health i
all its dimensions, inc	cluding health care, as a human r	ight.
		ility, and quality of patient care to be
the primary objective	s of care integration.	
Support for MMS (Goal C)	Strategic Initiatives 1-3 (in 100	words or less):
Goal C: The Massachusetts Me	edical Society/The MMS will be the m	nost trusted and respected leadership vo
	cal knowledge and the medical profes position and a diverse, engaged, and	ssion to improve patient care and outcom
iaintaining a sound intancial p	osmon and a diverse, engaged, and	expanding membership.
		nd/or retired physician members to
unni medical care and healt	h education needs of communitie	s and populations throughout

Massachusetts in agreed upon programs.

1 2 3	СОММІТ	MASSACHUSETTS MEDICAL SOCIETY TEE REPORT ON ACTIVITIES AND INITIATIVES	
4			
5	Code:	Report 33	
6	Title:	FY19 Goals/Activities (2018-2019)	
7		FY20 Activities and Initiatives (2019-2020)	
8	Committee:	Committee on Student Health and Sports Medicine	
9		Miguel Concepcion, MD, Chair	
10			
11	Committee Purpose or Missie	<u>on</u>	
12	The purpose of the Committee	ee on Student Health and Sports Medicine (SHSM) is to provide advice	
13		its leadership in matters related to student health and sports medicine,	
14		based health education and sports medicine for various populations;	
15		inizations working in these areas; to increase MMS visibility with	
16		t health and sports medicine issues; and to address other related	
17	areas that may come before	lt.	
18		EV10 Depart on Coole/Activities	
19 20		FY19 Report on Goals/Activities	
20	1. Goal/Activity		
22		sel to the MMS in legislative matters related to student health and	
23	sports medicine.		
24	•	on Legislation in drafting related legislation as part of the Society's	
25		rovide testimony as required.	
26		legislation proposed by other parties. Provide testimony as required.	
27		he MMS leadership on student health and sports medicine programs	
28	or activities of outside		
29		-	
30	<u>Status</u>		
31		in on any legislation this past year.	
32		ne work of the Massachusetts Department of Public Health's (MDPH)	
33	Clinical Concussion Advisory Committee, which is co-chaired by committee advisor, Dr. Alan		
34	Ashare. This advisory committee is reviewing and updating the return to play and return to learn		
35	regulations promulgated by N	IDPH for sports-related concussions.	
36 37	2. Goal/Activity		
38		c and private sector organizations that focus on student health and	
39	sports medicine.		
40	•	ion on educational programming and other projects from outside	
41		nittee members and MMS membership as necessary.	
42	-	tions as needed to Society leadership regarding the Society's support	
43		ons and their respective committees.	
44	5	·	
45	<u>Status</u>		
46	The committee hears regular	updates and information from the Associate Executive Director of the	
47		ic Athletic Association (MIAA), who serves as an advisor. Information	
48		2-year rule change process, which began July 2018. The MIAA is also	
49		e Korey Stringer Institute to revise and increase its advisories regarding	
50		mmer practice. Committee members are also appraised of upcoming	
51	events and workshops, which	n are then shared through members' networks.	

- 1 3. Goal/Activity
- 2 Increase MMS visibility with various audiences on student health and sports medicine issues.
 - Act as MMS liaison with outside organizations on student health/sports medicine programs and activities and to coordinate the Society's participation in such programs as appropriate.
 - Provide technical assistance and review to other committees, Society leadership, and departments, on student health and sports medicine activities, print materials for physicians, and related patient education material.

9 <u>Status</u>

The committee discussed the vaping increase among youth. Members noted the need to be specific during history taking when asking youth about tobacco or vaping use. Often youth are asked only if they smoke; not if they vape or Juul. Members were invited to the MMS-hosted Tobacco Free Mass policy forum in September 2018, which focused on vaping. The MMS website is also linked to the MA Department of Public Health's website featuring information for parents and for schools on vaping / e-cigarette use.

16

3

4 5

6

7

8

The committee chair underscored the need to teach children in grades K through high school how
to deal with stress, noting New York's newly passed legislation on teaching mindfulness in schools.
Dr. Guidi also presented this information to the Committee on Public Health.

20

29

30

31

32

33

34

35

Committee members discussed gun violence and the effects of real events, prevention drills, and school lockdowns on children. Staff also noted the work of the MMS committees on Violence Intervention and Prevention, and Preparedness regarding firearm violence and injury prevention and referenced the information available on the Society's website, including information in collaboration with the Office of the Attorney General of Massachusetts. The committee spoke about school firearm violence, mental health issues, and training models for schools.

28 4. Goal/Activity

Develop, promote, and directly provide information to educate physicians and the public regarding student health and sports medicine issues.

- Oversee the annual anti-tobacco poster contest for elementary school children.
- Develop and promote sports safety education materials for physicians, coaches, parents, and players.
 - Disseminate information as appropriate to students on topics such as teen stress, drug use, and underage drinking.
- 36 37

Status
The Anti-Tobacco Poster Contest, which recognizes twelve youth across the Commonwealth whose
posters best depict particular anti-tobacco themes, was celebrated at the State House in June
2018. The Society president, along with the MMS Alliance president and committee chair, were in
attendance. Judging for the 2020 calendar took place in April 2019, with a celebration in November.
This year's contest has been updated to include a theme on the dangers of vaping for the older
children.

- The committee reviewed and updated its Concussion: A Coach's Guide for Sideline Evaluation
 brochure. This brochure will be available for download from the Society's website and promoted
- 47 through the MDPH, the MIAA, and other appropriate organizations and agencies.
- 48
- 49 The committee developed information for youth, their caretakers, and school personnel on the
- 50 dangers of opioids and safe storage. The resource culls information from various agencies and
- 51 organizations and is available for free download from the Society's website.

- 1 FY19 Committee Budget
- 2 \$1,538 3
- 4 FY19 Actual Committee Expenditures
- 5 \$1,274 6
 - FY19 Estimated Cost of Committee Staff Support
- 8 \$4,500 based on five meetings.9

10 Number of Appointed Members and Number of Advisors

- 11 In FY19, the committee was comprised of 11 appointed members and two advisors.
- 12

7

13 FY19 Number of Meetings and Percentage of Appointed Member Attendance

Five meetings were held with an average attendance of 54 percent.

16 FY19 Number of Meetings at which a quorum was met: 3

FY20 Activities and Initiatives

18 19

17

20 Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024 Strategic

21 Plan. Focusing on initiatives prioritized as critical or immediate, develop activities for

22 initiatives to which your committee can make a significant contribution in FY'20 and describe the

23 nature of that contribution. Include initiatives, if any, for which your committee is listed on a

- 24 Strategic Initiative Plan.25
 - Activity **Related Initiative (from Strategic Plan)** Advise and advocate for mental and behavioral Patients/#2/Critical: Assess vulnerable populations and determine where the MMS children's health care that is available, affordable, and accessible. can have the strongest impact on access to appropriate care, including social Work with local school systems to determine determinants of health and health disparities the number of high schools with access to an athletic trainer and the services provided, in order to identify youth most vulnerable to inadequate access to athletic medical care and advocate for change. Develop a simple needs assessment survey to administer to school nurses to identify vulnerable needs in the student population. This will help target future committee task in alignment with the MMS strategic plan. We will continue to promote education on tobacco and vaping abuse through the Anti-Tobacco Poster Contest. Advise and advocate for mental and behavioral Patients/#6/Immediate: Advocate for children's health care that is available, access, affordability, and quality of patient affordable, and accessible. care to be the primary objectives of care integration

- 1 Instructions: Please list information below for any/all adopted resolution(s)/report assigned to your
- 2 committee. For resolutions/reports from I-18, you may leave the second column area blank.
- 3

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision			
	Related Goal/Initiative Number/ Priority from Strategic Plan	Report Due (or in Consultation)	

- FY20 Committee Budget
- 6 \$1,427
- 7 8

4 5

FY20 Estimated Cost of Committee Staff Support

\$4,500 based on five meetings.

9 10

11 Special Committee Due for Renewal 12

13 Instructions: If your special committee is due for renewal in FY'20, please indicate how the work of 14 the committee aligns with the Strategic Plan. In addition, please review the Strategic Initiative Priority Grid and indicate how the committee can support MMS (Goal C) Strategic Initiatives 1-3.

Alignment with Strategic Plan (in 100 words or less):

Committee members have a special interest and expertise in issues related to youth. They are in a position of authority and responsibility to promote the issues of youth mental and behavioral health, substance use prevention, sportsmanship, and training the lay public in sports injury. In addition to the strategic priorities noted above, the committee remains ready to advise, assist, and be involved in the work relevant to student health and sports medicine:

- MMS/#1/Critical: Evaluate impact and relevance of member-related products, services, and • activities, and initiate a plan to discontinue those that do not offer strategic value to the membership.
 - MMS/#2/Immediate: Narrow focus and prioritize activities to align with our strategic plan. •
 - MMS/#3/Immediate: Reform governance to accomplish the strategic goals and objectives. •
- 28 29 30

Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less):

31 The committee's work in FY20 will support MMS Goal C. Initiatives 1 through 3 via thoughtful 32 consideration of the initiatives and projects completed over the past several years with a focus 33 on costs and impact to physicians and/or patients. Similarly, the members will structure 34 meetings in a way that will positively impact the strategic plan. The committee stands ready to 35 advise and assist Society leadership, other MMS stakeholders, and peripheral agencies and 36 organizations regarding its standing as a special committee.

15 16

17

18

19

20

21

22

23 24

25

26

27

1	MASSACHUSETTS MEDICAL SOCIETY		
2	COMMITTEE REPORT ON ACTIVITIES AND INITIATIVES		
3			
4			
5	Co	de:	Report 34
6	Titl	e:	FY19 Goals/Activities (2018-2019)
7			FY20 Activities and Initiatives (2019-2020)
8	Co	mmittee:	Committee on Sustainability of Private Practice
9			Christopher Garofalo MD, FAAFP, Chair
10			
11	Co	mmittee Purpose or Missi	on
12			inability of Private Practice (CSPP) was created through a
13	res	olution approved at the 20	015 Interim Meeting. It is tasked with providing periodic
14	fee	dback to the Board of Tru	stees and the House of Delegates on matters related to the
15	via	bility and unique needs of	private practice physicians in the Commonwealth of
16	Ma	ssachusetts, for the bene	fit of all physicians and patients in the Commonwealth.
17			
18		<u> </u>	Y19 Report on Goals/Activities
19			
20	1.	Goal/Activity	
21			ve educational program: webinar, live on-site ½ day in
22			national and local private practice physicians will describe
23			tice model to demonstrate the breadth of choices available
24			monwealth. Legal and legislative barriers and challenges to
25		• •	nsidered. A panel discussion using Q and A format will
26		wrap up the conference.	
27			
28		<u>Status</u>	
29		Achieved	
30		The committee develope	d and an an advectional program in Malthem (MMC
31 32			d and sponsored an educational program in Waltham/MMS r Sustainable Medical Practice," live on-site ½ day and
32 33			blored the economic feasibility of private practice and
33 34			enhance practice revenue and decrease administrative
35			ous medical practice models including: practice without
36			: integrative medical-behavioral-complementary practice
37			robust traditional private practice.
38		conclorge mealonie, and	
39		The event was exceeding	gly well attended with 110 attendees, and was a resounding
40			enjoyed the panel discussion and the collegial sharing and
41		networking.	55 1 5 5
42		5	
43		The feedback from the at	tendees of the respective events included interest to have a
44			provide more resources that support the "business side" of
45			hasing efficiencies, social media/reputation management,
46		• • • •	aff and physician benefits, and financial planning for small
47		businesses.	·
48			
49	2.	<u>Goal/Activity</u>	
50			earch, and present reports to the HOD at Interim meetings
51		regarding ways to improv	e and support the private practice milieu. General topics to

1 include reducing negative effects on high-deductible health plans on patients and 2 physicians. Identify noteworthy mechanism(s) to improve payment parity between 3 private and employed physicians. 4 5 <u>Statu</u>s 6 Achieved 7 8 The committee brought forward to the House of Delegates CSPP Report I-18 B-1, 9 Mitigating the Negative Effects of High-Deductible Health Plans on Patients and 10 Physician. The item also was brought to the New England Delegation, and the AMA 11 delegation. 12 13 This report was adopted by the HOD and went on to the AMA. 14 15 The AMA reference committee recommended to reaffirm it as policy already written. 16 but the New England AMA Delegation persuaded the AMA HOD to refer for further 17 evaluation, and this resolution is now being studied by the Council on Medical 18 Service. 19 20 The committee also submitted to the MMS HOD Late CSPP Report A-18 B-10, 21 Protecting the Patient-Physician Relationship: MassHealth ACO, which was adopted 22 as amended. 23 24 3. Goal/Activity 25 Work with MMS publications such as *Vital Signs*, Vital Signs This Week, and other 26 media platforms to improve visibility of the committee within the MMS and significant 27 physician community in Massachusetts. Author written materials to bring awareness 28 of committee activities, demonstrate benefits the committee provides to physicians 29 and patients, and solicit feedback and ideas on how the committee can further 30 realize its mission. 31 32 Status 33 Achieved 34 35 The committee members had been featured in Vital Signs, and Vital Signs This 36 Week, and on MMS Website, and other media outlets. 37 38 Committee member Dr. Kate Atkinson was featured in a Vital Signs article to discuss 39 her collaborative, integrated care practice model in Western Massachusetts. 40 Committee Chair was interviewed for Vital Signs to discuss administrative impacts on 41 primary care. 42 43 Goal/Activity 44 Advocate for regulatory changes in Massachusetts to allow for physician dispensing 45 of medications from an office setting. Follow up on prior report directive. Collaborate 46 with physician specialty groups in Massachusetts to enlist support for this effort. 47 48 Status 49 In progress

1 2 3 4 5 6 7		CSPP Report I-17 B-1, Permitting Massachusetts Physicians to Dispense Prescription Medications from the Office, was adopted by the MMS House of Delegates and has been integrated into a bill before the current session of the MA Legislature sponsored by the MMS and Representative Cassidy entitled an " Act to provide high value and high-quality care", H931. We anticipate a hearing to be scheduled before the end of 2019.
8 9 10 11 12 13 14	4.	<u>Goal/Activity</u> Recruit medical students, residents, and practicing physicians practicing as independent and employed physicians in MA to join the committee. Actively work with the MMS Medical Student and Resident groups to increase visibility and outreach of the CSPP. Consider presentations to residency programs and medical schools.
15 16 17		<u>Status</u> In progress
18 19 20 21 22		The committee is planning to coordinate with MMS staff to coordinate outreach to the Medical Student Section and the Resident and Fellow Section to invite students, residents and fellows to learn more about private practice and various medical practice models. The committee considers mentoring opportunities for medical students and residents.
23 24 25		<u>,942</u>
26 27 28 29		<u>719 Actual Committee Expenditures</u> ,983
30 31 32		<u>19 Estimated Cost of Committee Staff Support</u> staff, 10 meetings: \$7,500
33 34 35		mber of Appointed Members and Number of Advisors members, one resident, two medical students
36 37 38		<u>19 Number of Meetings and Percentage of Appointed Member Attendance</u> meetings with an average attendance of 80 percent
39	<u>FY</u>	19 Number of Meetings at which a quorum was met: 10

FY20 Activities and Initiatives

Activity	Related Initiative (from Strategic Plan)
Advise and assist the MMS advocacy efforts for passage of House Bill 931, "An Act to Provide High Value and High- Quality Care," to include regulatory changes allowing MA physicians to	Patients/#6/Intermediate : Advocate for access, affordability, and quality of patient care to be the primary objectives of care integration.
dispense medication from their office Advise and assist MMS in identifying and implementing three high-impact initiatives to advocate for the reduction of unnecessary regulations and administrative burdens Arrange and host a follow up conference	Physicians/#1/Critical: Identify and implement three high-impact initiatives to advocate for the reduction of unnecessary regulations and administrative burdens. Physicians/#4/Intermediate: Identify
similar to "Evolving Models for Sustainable Medical Practice."	factors that contribute to satisfying work environments and advocate with stakeholders for action, where needed.
Update the MMS publication providing guidance for physicians transitioning to a private practice model.	Physicians #4 Intermediate : Identify factors that contribute to satisfying work environments and advocate with stakeholders for action, where needed.
Network with medical society leaders to assist in establishing a committee analogous to the Committee on the Sustainability of Private Practice at each state medical society.	MMS/#6/Intermediate : Develop a strategy to increase MMS brand recognition, profile, and communication with targeted audiences.

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision			
	Related Goal/Initiative Number/ Priority from Strategic Plan	Report Due (or in Consultation)	

<u>FY20 Committee Budget</u> \$2,000, additional \$5,000 for educational conference

- <u>FY20 Estimated Cost of Committee Staff Support</u> 1 staff, 10 meetings: \$7,500

1	MASSACHUSETTS MEDICAL SOCIETY		
2	COMMI	TTEE REPORT ON ACTIVITIES AND INITIATIVES	
3			
4			
5	Code:	Report 35	
6	Title:	FY19 Goals/Activities (2018-2019)	
7		FY20 Activities and Initiatives (2019-2020)	
8	Committee:	Committee on Violence Intervention and Prevention	
9		Wendy Macias-Konstantopoulos, MD, MPH, Chair	
10			
11	Committee Purpose or Miss	ion	
12	The mission of the Committe	ee on Violence Intervention and Prevention (CVIP) is to educate,	
13	advise, and counsel the Soc	ciety and its leadership on matters relating to violence intervention and	
14	prevention, with emphasis o	n family violence (intimate partner violence, child abuse and/or neglect,	
15	adolescent relationship viole	ence, and elder abuse), school violence, bullying, community violence,	
16	firearms, sexual assault, sui	cide, human trafficking, torture, and other forms of intentional	
17	injury/trauma.		
18			
19		FY19 Report on Goals/Activities	
20			
21	1. <u>Goal/Activity</u>		
22		ducational programs and materials, using best or evidence- based	
23		for physicians in practice and training, and for others as requested,	
24		n, intervention, and prevention of violence and abuse.	
25		perceived barriers regarding violence inquiry in various clinical and non-	
26	clinical settings.		
27		ongoing violence prevention and intervention education for physicians in	
28	practice and training,	and for others, as requested.	
29		ns that utilize available evidence as well as the Society's expertise in	
30	violence intervention		
31	 Promote the continuir 	ng development and dissemination of the MMS Campaign Against	
32	Violence and related	materials to physicians in practice and training, and to others, as	
33	requested.		
34			
35	<u>Status</u>		
36		parent education brochure on youth suicide prevention as part of the	
37		plence series of "tip" cards. The brochure, the twelfth in the series, is	
38	available for free download	on the Society's website.	
39			
40		oping a parent education brochure on child trafficking and exploitation.	
41	The brochure will focus on a	child labor trafficking as well as sexual exploitation.	
42			
43	2. <u>Goal/Activity</u>		
44		eveloping and promoting culturally competent, trauma-informed	
45		prevention policies for health care entities, educational institutions,	
46		d government/regulatory bodies.	
47	•	nate policies and procedures that promote identification, intervention,	
48	•	ence across the lifespan.	
49 50	 Identify and promote survivors of abuse an 	the delivery of trauma-informed medical and non-medical services for	
51		ve efforts with agencies and individuals to identify risk factors for	
51 52		and perpetration and promote prevention in populations at high risk.	

- 1 Promote violence assessment and intervention protocols that reduce the impact of • 2 interpersonal violence in conflict and population displacement.
- 3
- 4 **Status**

5 The committee discussed asylum seekers arriving at the border due to violence in their homelands 6 and the Attorney General's consideration of revoking domestic violence as a reason to seek 7 asylum. Members reviewed information from the AAP on immigration and child separations at the 8 border, noting that immigrant children face a variety of challenges to their health and well-being. 9 including poverty, lack of health insurance, low educational attainment, substandard housing and 10 language barriers. Many in the adult foreign-born populations are afraid to contact law enforcement 11 or seek healthcare because of their immigration status.

12

13 The committee also reviewed and discussed the current administration's desire to broaden the 14 public charge rule. Cash benefit use by low- and moderate-income immigrants legally in the country 15 would be detrimental should they seek a green card, extend or change their temporary status in the 16 US. It is expected that the MMS will weigh in during the public comment period.

17

18 In consideration of the information above, the committee submitted a report to the House of 19 Delegates on Equitable Healthcare Regardless of Immigration Status, which was adopted as 20 amended. The report directives have been referred to the Committee on Legislation and the 21 Committee on Public Health. It is anticipated that the CPH will ask the CVIP to consult. 22

23 The Cover All Kids Act, which would expand comprehensive MassHealth coverage to children who 24 would be eligible for MassHealth except for their immigration status, was shared with members. 25 Also reviewed was the Safe Communities Act, which seeks to restore community trust in police by 26 avoiding entanglement in immigration matters and protect due process for all.

27

29

30

33

34

35

28 3. Goal/Activity

To facilitate professional and personal support for physicians in practice and training, and/or their family members and partners who have been affected by violence.

- 31 Maintain collaborative relationships with Physician Health Services, Inc., and other • 32 appropriate providers.
 - Provide educational opportunities to address how violence affects medical professionals from • both personal and professional perspectives.
 - Assist in informing physicians, medical students, and MMS Alliance members about programs as they are developed.
- 36 37

38 Status

39 Committee members regularly share information, conferences, webinars, and speakers on an array 40 of topics with fellow committee members, colleagues, and other stakeholders. The Society is 41 represented on the National Health Collaborative on Violence and Abuse and the committee

42 representative co-chairs the Committee on Education, Communication, and Outreach.

43

44 4. Goal/Activity

45 To promote multidisciplinary collaborations to decrease violence and ameliorate its long-term 46 sequelae.

- 47 Identify health professionals and community partners in the development and dissemination • 48 of educational and resource materials for physicians, other health care professionals, and the 49 public.
- 50 Proactively seek opportunities for collaborations on violence interventions and prevention • 51 methods with other agencies and organizations that come to the Society.

- 1 <u>Status</u>
- 2 The committee reaches out to state organizations (and nationally through members' own work) on
- 3 issues of human trafficking. Several members engaged with and participated in the Jane Doe Inc.
- 4 awards event. JDI is the statewide sexual and domestic violence coalition.
- 5
- 6 The committee representative to the Society's Committee on Public Health regularly updates
 7 members regarding the work of this committee and adds the voice of the CVIP to the CPH
 8 discussions.
- 9
- Committee members noted that firearm safety is not discussed in medical school. Members
 envision a joint event with the MA Chapter of Emergency Physicians, the MA Chapter of the AAP,
 the MA Chapter of the American Academy of Family Physicians, and the MA Psychiatric Society,
- 13 with each organization pooling its resources.
- 14
- Members were appraised of the #ThisIsOurLane response to the NRA tweet after the Annals of Internal Medicine published articles on firearm safety and injury prevention. Dr. Megan Ranney and others drafted an open letter signed by the 17 authors, which then went viral. Physicians are urged to sign and share with colleagues. Physicians across the country have been sharing stories of resiliency, decreasing harm, and prevention.
- 20
- The committee was provided an overview of the Society's Firearm Injury Reduction Roundtable,
 hosted by the MMS and its Committee on Preparedness.
- 23

26

27

28

- 24 5. <u>Goal/Activity</u> 25 Support MM
 - Support MMS efforts in advocacy
 - Engage in advocacy of violence intervention and prevention policies at the legislative level as appropriate and in keeping with the policies and goals of the Society, including those that will facilitate firearms research.
- 29 30 S
- 30 <u>Status</u>
- Committee members also briefly reviewed H.R.8, the *Bipartisan Background Checks Act of 2019*,
 which requires a background check on every gun sale or transfer, including unlicensed gun dealers,
 with exceptions for family gifts, hunting and target shooting, and self-defense. Members noted that
 this is being perceived by many as a surrogate for a national registry.
- 35
- Dr. Barsotti reported that AFFIRM is creating a tool kit for speaking on the topic of firearms. Points
 are like those that occur when discussing labor trafficking and its sliding into the realm of
 immigration. The tool will include lessons to learn on sociomedical issues.
- 39
- 40 FY19 Committee Budget
- 41 \$1,327
- 42
- 43 FY19 Actual Committee Expenditures
- 44 \$758
- 45
- 46 <u>FY19 Estimated Cost of Committee Staff Support</u>
- 47 \$4,500
- 48
- 49 Number of Appointed Members and Number of Advisors
- 50 There were 14 appointed members and 2 advisors in FY19.

- 1 FY19 Number of Meetings and Percentage of Appointed Member Attendance
- 2 Five meetings with an average attendance of 50 percent.3
- 4 <u>FY19 Number of Meetings at which a quorum was met:</u> 2 5

FY20 Activities and Initiatives

- 8 **Instructions**: *Please review the strategic initiatives listed in the MMS FY2020-2024 Strategic* 9 *Plan.* **Focusing on initiatives prioritized as critical or immediate**, develop activities for
- 10 initiatives to which your committee can make a significant contribution in FY'20 and describe the
- 11 nature of that contribution. Include initiatives, if any, for which your committee is listed on a
- 12 Strategic Initiative Plan.
- 13

6

7

Activity	Related Initiative (from Strategic Plan)
Advise on matters relating to violence in all its forms, with particular focus on vulnerable populations (e.g., sexual minorities, economically disadvantaged, people of color).	Patients/#2/Critical : Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities

14

- 15 **Instructions**: *Please list information below for any/all adopted resolution(s)/report assigned to your*
- 16 committee. For resolutions/reports from I-18, you may leave the second column area blank.
- 17

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision			
	Related Goal/Initiative Number/ Priority from Strategic Plan	Report Due (or in Consultation)	

18

- 19 FY20 Committee Budget
- 20 \$1,231
- 21
- <u>FY20 Estimated Cost of Committee Staff Support</u>
 \$4,500

23 24

- 25 Special Committee Due for Renewal
- 26

Instructions: If your special committee is due for renewal in FY'20, please indicate how the work of
the committee aligns with the Strategic Plan. In addition, please review the Strategic Initiative
Priority Grid and indicate how the committee can support MMS (Goal C) Strategic Initiatives 1-3.

- 30 31
- Alignment with Strategic Plan (in 100 words or less):

32 Violence prevention is a priority public health focus for both the MMS and for the wider 33 community. The CVIP has long advocated for intervention and prevention measures through its 34 urging of policy, legislation, and education initiatives. The committee consists of physicians with 35 special interest and expertise in violence prevention and sexual abuse. Committee members 36 also serve as representatives to the Massachusetts Board of Sexual Assault Nurse Examiners 37 and the National Healthcare Collaborative for Violence and Abuse, reporting back to the 38 committee regularly. In addition to the strategic priorities noted above, the committee will 39 address the issue of violence and promote effective prevention strategies, and will continue to 40 work within the MMS and through a wide network of other organizations:

1 2	 MMS/#1/Critical: Evaluate impact and relevance of member-related products, services, and activities, and initiate a plan to discontinue those that do not offer strategic value to the
3	membership.
4	 MMS/#2/Immediate: Narrow focus and prioritize activities to align with our strategic plan.
5	• MMS/#3/Immediate: Reform governance to accomplish the strategic goals and objectives.
6	
7	Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less):
8	Members of the committee will support MMS Goal C, Initiatives 1 through 3 through
9	consideration of initiatives and projects recently completed, with a review of physician and/or
10	patient impact and costs wherever possible. The committee will focus its work in ways that
11	positively impact the strategic plan, as well as the issue of violence in all its forms. The
12	committee will advise and assist Society leadership, other MMS stakeholders, and peripheral
13	agencies and organizations in working to achieve the 2020-2024 strategic initiatives.

1 2			
3		CONNINT T	
4			
5	Co	de:	Report 36
6	Titl		FY19 Goals/Activities (2018-2019)
7			FY20 Activities and Initiatives (2019-2020)
8	Col		Committee on Women's Health
9			Helen Cajigas, MD, Chair
10			
11		mmittee Purpose or Missic	
12			ommittee on Women's Health (CWH) is to address health issues
13		• • • •	or disproportionately affect women patients. More specifically, the
14			note awareness of women's health issues to educate and inform
15			providers, patients, government and civic leader and
16 17		<i>,</i> 0	al public about these issues; to support and advocate (on behalf of e, and federal government organizations and other organizations
18			sues and topics involving women's health; to collaborate with
19			s, as well as other appropriate outside organizations to address
20		se topics and issues.	
21			
22	As	the CWH is a newly forme	d committee originating from Committee on Women in Medicine,
23			ership development, mentoring, and networking, as well as other
24	goa	als/activities/programs/awa	rds as have been previously developed and planned until the
25	Wo	men Physicians Section h	as been formally established.
26			
27 28			FY19 Report on Goals/Activities
29	1	Goal/Activity	
30	••		access to relevant and timely information on women's health.
31			
32		Status	
33			18, the Committee hosted the CME program, Gender and Bias in
34		Medicine - Effect on Phys	icians, Impact on Patients. A top team of experts described
35		gender and other bias in r	nedicine, its effect on physicians (wage gap, leadership
36			ng/harassment/burnout) and the impact on patients (bias as driver
37			ications, effect on physician/patient relationship). Feedback
38		received from both attend	ees and speakers was excellent.
39			
40	~		
41 42	Ζ.	Goal/Activity Provide patient griented r	accurace to physicians and other basilth care professionals to
42 42			esources to physicians and other health care professionals to
43 44		improve preventive health	
44 45		<u>Status</u>	
46			ttee's CME program, Gender and Bias in Medicine - Effect on
47		•	tients, provided attendees with valuable online resources
48			bias on women patients. The committee continues to explore
49			alth information to physicians and other health care professionals.

- 1 3. Goal/Activity
- Advise and assist MMS policymaking through the resolution/report process and other means regarding key issues related to women's physical, mental, and social health.
- 4 5
 - <u>Status</u>

The committee serves as an important resource to the MMS by providing feedback to
authors of resolutions and reports relating to women's health before and while they are
heard at the MMS Annual and Interim Meetings. Over the past year, the Committee
provided testimony for the following resolutions, "Support for Modern Abortion Laws and
Access," "Mifepristone Use in Early Pregnancy Loss Management" and "Advancing Gender
Equity in Medicine."

12 13 4. <u>Goal/Activity</u>

14 Monitor and inform Massachusetts and federal legislative and executive bodies to assure 15 that attention is paid to women's issues of health and welfare.

16 17 Status

This past year the House Ways & Means Committee held a hearing entitled "Overcoming
 Racial Disparities and Social Determinants in the Maternal Mortality Crisis". Several MMS
 committees, including the Committee on Women's Health, were asked to share comments
 and recommendations that served as the basis of a letter of MMS testimony on the subject.

22

39

- 23
- 24 5. Goal/Activity

Focus on growing an active and engaged committee membership that includes
representation from a wide variety of demographics in order to promote well-balanced
discussions of women's health topics.

28 29 Status

30 Over the past year, the committee has strived to increase and diversify its membership while 31 still maintaining the important functions of the Committee on Women in Medicine. With the 32 Women Physicians Section focusing on supporting women in medicine, the Committee on 33 Women's Health (formerly the Committee on Women in Medicine) is positioned to address 34 health issues that uniquely or disproportionately affect women patients. Awareness of the 35 new committee and section were announced in various marketing avenues including the 36 Special Wrap edition of Vital Signs during September in honor of Women in Medicine 37 Month. The Committee on Women's Health will welcome three new members in the 38 upcoming year.

40 6. <u>Goal/Activity</u>

Recognize contributions to advancements in women's health from both the clinical and
research standpoints through the Women's Health Award and the Women's Health
Research Award.

45 Status

The Committee on Women's Health predecessor (i.e. The Committee on Women in
 Medicine) had established two awards to recognize contributions to advancements in
 women's health from both the clinical and research standpoints, and a third award for
 recognizing women physician leaders. The latter award will now be selected and presented

- 50 by the newly formed Women Physician's Section.
- 51 The two women's health awards will be selected by the CWH and presented to 52 awardees at an event or other forum as determined by the CWH.

- 1 The 2019 recipients of the women health awards were: 2 Women's Health Award: Nidhi Lal, MD, MPH 3 Women's Health Research Award: Valerie A. Dobiesz, MD, MPH, FACEP 4 5 FY19 Committee Budget 6 \$8.061 7 8 FY19 Actual Committee Expenditures 9 Direct committee expenditures included 3 conference calls and 3 awards totaling \$457. One full day CME program generated \$4,650 income with \$4,500 in overall expenses. 10 11 FY19 Estimated Cost of Committee Staff Support 12 13 \$30,940 14 15 Number of Appointed Members and Number of Advisors The committee is comprised of 17 members including 1 resident/fellow representative and 2 16 17 medical students. 18 19 FY19 Number of Meetings and Percentage of Appointed Member Attendance 20 3 meetings with an average attendance of 63 percent 21 22 FY19 Number of Meetings at which a quorum was met: 3 23 24 FY20 Activities and Initiatives 25 26 Instructions: Please review the strategic initiatives listed in the MMS FY2020-2024 Strategic 27 Plan. Focusing on initiatives prioritized as critical or immediate, develop activities for
- 28 initiatives to which your committee can make a significant contribution in FY'20 and describe
- 29 the nature of that contribution. Include initiatives, if any, for which your committee is listed on a Strategic Initiative Plan.
- 30 31

Activity	Related Initiative (from Strategic Plan)
Address ways to reduce gender-based inequities in health at annual Women's Health Forum.	Patients/#2/Critical : Assess vulnerable populations and determine where the MMS can have the strongest impact on access to appropriate care, including social determinants of health and health disparities.
Explore ways to promote and protect women's health as a human right.	Patients/#4/Critical : Evaluate the establishment of an MMS principle that declares health in all its dimensions, including health care, as a human right.

- 32
- 33
- **Instructions**: Please list information below for any/all adopted resolution(s)/report assigned to 34 your committee. For resolutions/reports from I-18, you may leave the second column area blank.
- 35

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision			
Resolution or Report Code/Title	Related Goal/Initiative Number/ Priority from Strategic Plan	Report Due (or in Consultation)	

- FY20 Committee Budget \$7,502 1 2 3 4 5

- FY20 Estimated Cost of Committee Staff Support \$30,000

1	MASSACHUSETTS MEDICAL SOCIETY					
2	COMMITTEE REPORT ON ACTIVITIES AND INITIATIVES					
3						
4						
5	Co		Report 37			
6	Titl	e:	FY19 Goals/Activities (2018-2019)			
7			FY20 Activities and Initiatives (2019-2020)			
8	Co	mmittee:	Committee on Young Physicians			
9			Matthew Lecuyer, MD, MPH, Chair			
10						
11	Committee Purpose or Mission					
12	The purpose of the Committee on Young Physicians (CYP) is to increase the membership and					
13	active participation of young physicians in the Massachusetts Medical Society. To accomplish this					
14			fies issues specific to young physicians, offers interfaces for their			
15			ies and governance, and provides networking opportunities. The			
16			he election of delegates to the American Medical Association Young			
17		vsicians Section (AMA-YP				
18	-		,			
19			FY19 Report on Goals/Activities			
20						
21	1.	Goal/Activity				
22			al needs of young physicians in Massachusetts, offer educational			
23			r young physicians and facilitate sharing professional knowledge			
24		among young physicians				
25						
26		Status				
27			MS Physician Practice Resource Center, the CYP completed			
28			d a three-part education series on reading financial forms. The			
29			ancial forms series came from committee members identifying the			
30			s to build better business acumen. The sessions have been made into			
31			rial available on the MMS website in order to make the information			
32		•	g physicians in relation to personal schedules and time commitments.			
33			can be used in promotion for new young physician members to join the			
34		MMS.	can be used in promotion for new young physician members to join the			
35		101013.				
36		The committee also co sn	oonsored a legislative advocacy workshop in conjunction with the MMS			
37			and the MMS Medical Student Section. The workshop brings together			
38			discuss current legislative issues and learn how to participate in MMS			
39		legislative advocacy initiat	lives.			
40	~					
41	2.	<u>Goal/Activity</u>				
42			portunities and empower young physicians to take leadership roles in			
43		organized medicine and to	o mentor residents/fellows and medical students.			
44						
45		Status				
46			on Young Physicians promoted the MMS Committee application			
47			tion application process, applying for the AMA Ambassador Program			
48			cer positions to its membership. Three young physicians currently			
49			d two Alternate Delegates on the Massachusetts AMA Delegation and			
50			tly serves as MMS Vice Speaker. The CYP also sent a funded CYP			
51			A National Advocacy and Leadership Conference in Washington, DC,			
52		in February and delegates	s to the AMA-YPS Assemblies in June and November.			

1 The committee has focused on creating more relationship building opportunities with the 2 medical student and resident/fellow section in the form of joint community service activities, in 3 addition to co-sponsoring education activities. The committee sponsored two community 4 service opportunities for early career members and their families at Cradles to Crayons and co-5 sponsored an early career Halloween costume party networking event with the MMS Resident 6 and Fellow Section. Additionally, the MMS consulted with the CYP in the creation of the 7 continuing series of statewide networking events. 8

9 3. <u>Goal/Activity</u>

10 To provide a welcoming professional and social environment for young physicians and to 11 encourage new member participation on the Committee on Young Physicians.

12

19

13 <u>Status</u>

The committee leverages its educational programs and networking events to welcome new members and expose early career physicians to the business of the committee. The MMS Committee on Young Physicians welcomed 3 new committee members for FY20 and four additional early career physicians who have recently completed training are being invited to participate in upcoming CYP meetings.

The committee helps to transition members of the MMS Resident and Fellow Section into full physician members of the Society. There is a particular focus on recruitment and retention as residents and fellows finish their training — both in terms of membership and in terms of involvement with organized medicine. The committee also serves as the body that elects and credentials Massachusetts representatives to attend the AMA-YPS Assemblies.

- 26 FY19 Committee Budget
- 27 \$4,000.
- 2829 FY19 Actual Committee Expenditures
- 29 <u>FY19 Actual Commi</u>
 30 \$2,000.
- 30 \$2,0 31
- 32 FY19 Estimated Cost of Committee Staff Support
- 33 \$11,500.34

36

42

43

35 <u>Number of Appointed Members and Number of Advisors:</u> 12 members, 1 alternate medical student

37 FY19 Number of Meetings and Percentage of Appointed Member Attendance

38 5 meetings with an average attendance of fifty-six percent.39

40 <u>FY19 Number of Meetings at which a quorum was met:</u> 3 41

FY20 Activities and Initiatives

Activity	Related Initiative (from Strategic Plan)
Encourage and support early career physician involvement in legislative matters affecting all aspects of the medical field.	MMS/#8/Immediate: Expand advocacy efforts in collaboration with key stakeholders on issues deemed critical to physicians and patients.
Promote leadership opportunities and facilitate young physicians taking leadership roles in organized medicine	Physicians/#3/Immediate: Provide leadership development offerings for physicians and physician-led teams.

and to mentor residents/fellows and	
medical students.	MMS/#5/Intermediate: Create strategies that will engage various member constituent
	groups and increase engagement, diversity,
	and trust in MMS.
Provide a welcoming professional and social environment for young physicians and to encourage new member participation on the Committee on Young Physicians and in MMS.	Physicians/#2/Intermediate: Create a physician community that includes opportunities for networking.

1

REPORTS DUE TO HOD IN FY20 (at I-19 or A-20) or to BOT for Decision					
Resolution or Report	Related Goal/Initiative Number/Report Due (or in				
Code/Title	Priority from Strategic Plan	Consultation)			

2

- 3 FY20 Committee Budget
- 4 3.000 5
- 6 FY20 Estimated Cost of Committee Staff Support
- 7 \$11,500
- 8
- 9 Special Committee Due for Renewal
- 10 11

28

31

32 33 Alignment with Strategic Plan (in 100 words or less):

The Committee on Young Physicians creates community among early career physicians and 12 provides an interface for less experienced members to become more involved with organized 13 medicine at a state and national level. Much of this is accomplished through peer to peer 14 mentoring with younger MMS physician members, experienced from their years of participation 15 in the Resident/Fellow and the Medical Student Sections, providing guidance to new members 16 who have recently started their careers in Massachusetts. To this end, the committee exists to 17 meet the MMS strategic initiatives of creating physician community, proffering leadership 18 development and facilitating member participation in advocacy initiatives and policy 19 20 development. 21

- 22 The committee is a resource for the MMS on the following strategic initiatives on which the committee has insight and expertise: 23 24
- 25 Physicians/#2/Intermediate: Create a physician community that includes opportunities for • 26 networking. 27
 - Physicians/#3/Immediate: Provide leadership development offerings for physicians and physician-led teams.
- 29 MMS/#5/Intermediate: Create strategies that will engage various member constituent groups and increase engagement, diversity, and trust in MMS. 30
 - MMS/#8/Immediate: Expand advocacy efforts in collaboration with key stakeholders on • issues deemed critical to physicians and patients.
- Support for MMS (Goal C) Strategic Initiatives 1-3 (in 100 words or less): 34
- The Committee on Young Physicians has continually evaluated the cost of its committee 35 meetings and activities in relation to budget allocation and sought to minimize expenses. For 36
- Committee meetings and pre-MMS and pre-AMA caucusing, the committee meets 37

1 predominantly by electronic means, which not only has minimal costs associated but is 2 appealing to early career physicians who seek to minimize time away from family, friends and 3 work commitments. In recent years, the committee has sought to co-sponsor all of its programs 4 with other interested committees and sections and has focused on community service for its 5 networking opportunities, which costs the MMS nothing, allows family as young as 6 to 6 participate and appeals to younger members as a positive and altruistic use of their time. The 7 Committee on Young Physicians looks forward to continuing to support MMS in its recruitment 8 and engagement of younger members and to being a valuable sounding board as the society 9 seeks to reform its governance structure.