MASSACHUSETTS MEDICAL SOCIETY HOUSE OF DELEGATES (I-16)

REFERENCE COMMITTEE C: MMS Administration

Item #	Title	Code	Action	Page
1	Reducing Barriers to Participation in MMS House of Delegates Meetings for Members with Children/Families	Resolution I-16 C-101	Adopt	1
2	Ensure Representative Diversity in MMS Leadership Pathways	TFDLP Report I-16 C-1 [I-15 C-3]	Adopt	2
3	MMS Committee and Leadership Representation	CWM Report I-16 C-2	Adopt as Amended	3
4	MMS Leadership Promotion and Governance	CWM Report I-16 C-3	Refer to BOT for Report Back A-17	4
5	Proposed Amendment to the Sunset Policy Procedure	CSP/Officers Report I- 16 C-4	Adopt as Amended	5
6	Special Committee Renewals	BOT Report I-16 C-5	Adopt as Amended	7

1	Item #:	1	
2	Code:	Resolution I-16 C-101	
3	Title:	Reducing Barriers to Participation in MMS House of	
4		Delegates Meetings for Members with Children/Families	
5	Sponsors:	McKinley Glover IV, MD	
6		Resident and Fellow Section	
7		Aaron Kithcart, MD, Chair	
8	.		
9	Recommendation:		
10	Mister anadkar vour referen	as committee recommende that Decelution I 16 C 101 ha	
11 12	Mister speaker, your reference committee recommends that Resolution I-16 C-101 be adopted.		
13	adopted.		
14	RESOLVED, That MMS explore mechanisms that would allow MMS members with		
15	children/families to participate during HOD meetings, with report back at A-17. (D)		
16	omaron, amino to particip	, and daming 1102 moonings, min report such at 71 111 (2)	
17	Fiscal Note:	No Significant Impact	
18	(Out-of-Pocket Expenses)		
19	,		
20	FTE:	Existing Staff	
21	(Staff Effort to Complete Proj	ject)	
22			
23	Your reference committee heard unanimous support for this resolution. Testimony		
24	included exploring many different mechanisms to encourage members with		
25	children/families to participate during HOD meetings including childcare, eldercare,		
26	establishment of a family-friendly overflow room, and field trips. There was mixed		
27	opinion on whether a one-time survey is useful to explore the needs of the members as		
28 29	it provides only a narrow snapshot of their concerns, and other methodologies should be		
30	explored in the report as well	ı.	
31	House Vote:		
01	110000 VOIC.		

1	Item #:	2	
2	Code:	TFDLP Report I-16 C-1 [I-15 C-3]	
3 4	Title:	Ensure Representative Diversity in MMS Leadership Pathways	
5	Sponsor:	Task Force on Ensuring Representative Diversity in	
6	•	MMS Leadership Pathways	
7		Nidhi Lal, MD, Chair	
8 9	Report History:	OMSS Report I-15 C-3	
10	Report History.	OMSS Report 1-15 C-3	
11 12	Recommendation:		
13	Mister speaker, your reference committee recommends that the recommendations		
14	contained in TFDLP Report I-16 C-1 [I-15 C-3] be adopted and the remainder of the		
15 16	report be filed.		
17	1. That the Massachusetts Medic	al Society create a Minority Affairs Section in	
18	order to represent underrepresented groups and communities across the membership. The section would be entitled to one delegate in the House of		
19			
20	Delegates, and the delegate sh	nall be elected by the section. (D)	
21 22	2 That the MMS obtain race and	ethnicity data for MMS members by utilizing all	
23		ird-party vendors, in order to understand the	
24		IS membership, and assist in the development of	
25	future goals. (D)	•	
26			
27	Fiscal Note:	Annual Expense of \$5,000	
28 29	(Out-of-Pocket Expenses)	(Beginning FY18) One-Time Expense of \$9,000	
29 30		Offe-Time Expense of \$9,000	
31	FTE:	Existing Staff	
32	(Staff Effort to Complete Project)	Ç	
33			
34		timony both online and in person strongly in favor of	
35		ified in opposition to creating a Minority Affairs	
36 37		a formal section. There was overwhelming support ity data. However, some members testified on the	
38		of the potential data given the potentially sensitive nature	
39	of the data collected.	macritial data given the petermany constitue nature	
10			
11		t recommendation 1 will be referred to the	
12	Committee on Bylaws for a report to the House of Delegates on the necessary bylaws		
13 14	changes.		
14 15	House Vote:		
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1	Item #	3
2	Code:	CWM Report I-16 C-2
3	Title:	MMS Committee and Leadership Representation
4	Sponsor:	Committee on Women in Medicine
5	•	Helen Cajigas, MD, Chair
6		
7	Recommendation:	
8		
9	Mister speaker, your reference	committee recommends that the recommendation
10	contained in CWM Report I-16	C-2 be adopted as amended by addition and deletion
11	to read as follows and the rer	mainder of the report be filed:
12		
13		cal Society commit to <u>promote</u> representation in its
14	<u>-</u>	nat reflects the Society's membership diversity,
15	demographics, and gender. (D)
16		
17	Fiscal Note:	No Significant Impact
18	(Out-of-Pocket Expenses)	
19		
20	FTE:	Existing Staff
21	(Staff Effort to Complete Project	it)
22		
23		d testimony unanimously in favor of this
24		estimony favored replacing the words "commit to" with
25	"promote" in part to ensure that	quotas would not be required.
26		
27	House Vote:	

1	Ite	m #:	4	
2		de:	CWM Report I-16 C-3	
3	Tit		MMS Leadership Promotion and Governance	
4	Sp	onsor:	Committee on Women in Medicine	
5			Helen Cajigas, MD, Chair	
6 7 8	Re	commendation:		
9	Μiσ	ster sneaker vour reference com	mittee recommends that the recommendations	
10 11	CO	contained in CWM Report I-16 C-3 be referred to the Board of Trustees for report back at A-17.		
12 13 14 15	1.		eal Society facilitate increased leadership es by limiting a committee member's service as rs (not sum total). (D)	
16 17 18 19	2.	That a Massachusetts Medical Society member's leadership service as chair be limited to not more than one committee concurrently. (D)		
20 21 22 23 24	3.	3. That the Massachusetts Medical Society review the present governance structure for leadership appointments to committees (Chair/Vice Chair), Task Forces (Chair), and appointments to special committees to ascertain whether there may be opportunities to consider improvements in regard to process, inclusion, diversity, and representation of best practices. (D)		
25 26 27		scal Note: ut-of-Pocket Expenses)	No Significant Impact	
28 29	FT	· C ·	Existing Staff	
30		taff Effort to Complete Project)	Existing Stan	
31	(0.	an Enert te complete i reject,		
32	Yo	our reference committee heard tes	timony both online and in person unanimously in	
33			owever, most of the testimony questioned the	
34			ces of recommendations 1 and 2. For example,	
35			the steep learning curve on chairing some	
36 37			on Finance or the Committee on Legislation, a nd should be extended to five or even six years.	
38		-	pact of limiting leadership service to not more than	
39		•	uld limit the number of potential candidates for	
40	committee chair positions and interfere with leadership pathways for diverse groups of			
41	members. Still other testimony noted that only appointed chair positions should be			
42	assigned term limits leaving elected positions unchanged. Given that recommendations			
43	1 and 2 do not provide adequate specificity and that testimony outlined many of the			
44 45	ambiguities inherent in these recommendations, your reference committee recommends that the report be referred to the BOT with a report back at A-17.			
45 46	ιΠά	at the report be referred to the BO	i wiiii a leμυτι back at Α-τ/.	
47	Но	ouse Vote:		

Item #: Code: CSP/Officers Report I-16 C-4 Title: Proposed Amendment to the Sunset Policy Procedure Committee on Strategic Planning Sponsors: Henry Dorkin, MD, Chair MMS Presidential Officers: James Gessner, MD Henry Dorkin, MD Alain Chaoui, MD

Recommendation:

Mister speaker, your reference committee recommends that the recommendation contained in CSP/Officers Report I-16 C-4 be adopted as amended by addition to read as follows and the remainder of the report be filed:

That the Massachusetts Medical Society amend the *Procedures of the House of Delegates* to read as follows:

19. SUNSET POLICY

A sunset mechanism with a seven-year time horizon shall exist for all Massachusetts Medical Society policy positions and statements established by the MMS House of Delegates. Each adopted resolve or recommendation within a policy shall be considered individually with regard to the sunsetting process. Under the sunset mechanism, a policy will cease to be viable unless action is taken by the House to re-establish said policy. Any action of the House that reaffirms an existing policy shall reset the sunset "clock," making the reaffirmed policy viable for seven years from the date of its reaffirmation. Any action of the House that modifies an existing policy shall reset the sunset clock, making the consolidated or modified policy viable for seven years from the date of its adoption.

Directives adopted by the House which contain time-limited specifics; establish task forces, committees, or other special or ad hoc entities; and directives to amend the *Procedures of the House of Delegates* or the *Bylaws* shall not be subject to the seven-year sunset mechanism and shall sunset automatically at the completion of the directive or document update.

Review/Report Process

Policies are assigned <u>by officers and staff</u> to the appropriate standing committee/MMS section(s) (in consultation with appropriate special committees) to review and recommend whether to reaffirm, sunset, reaffirm for one year, or amend the policy and provide recommendations to the MMS presidential officers for final review and submission to the House of Delegates.

Minor Amendments that Maintain the Original Intent of the Policy
The reviewing committee may propose amendments to any policy that
maintain the original intent of the policy. Such policy amendments may only
be adopted or not adopted by the House of Delegates. If a proposed policy

amendment is not adopted, the original policy will be reaffirmed for one year and referred to the appropriate committee(s) for further analysis and potential submission of a new policy recommendation. Such items must be reported back to the House of Delegates within one year.

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The reviewing committees/MMS sections and presidential officers shall prepare a single report recommending policy reaffirmation, policy sunset, policy amendment, and policy reaffirmation for one year pending submission of an updated policy for transmittal to the House on an annual basis, which shall be assigned to a single reference committee for consideration.

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A consent calendar format shall be used by the House in considering the policies contained in the report.

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Policies That Require New Policy Recommendations

If it is determined by the reviewing committee/MMS section(s) that a policy requires a completely new policy recommendation, a new policy recommendation should be submitted for the current Annual Meeting of the House of Delegates by the resolution/report deadline. Such resolutions/reports will not be accepted as late-filed items. If the updated policy recommendation is not submitted for the current Annual Meeting, then such policy will be recommended to be reaffirmed for one year. Following House action the Board of Trustees, and/or any committee(s) designated by the Board of Trustees, will be asked to consider submitting the new policy recommendation. Upon submission and adoption of a new policy recommendation, the old policy will automatically be sunset. If the new policy recommendation is not adopted; the old policy will automatically be sunset. If new policy is referred, the old policy will be maintained until report back within a one year period. If no new recommendation is adopted within one year, the policy will automatically sunset.

(D)

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Fiscal Note: No Significant Impact

(Out-of-Pocket Expenses)

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Existing Staff

(Staff Effort to Complete Project)

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Your reference committee heard testimony predominantly in favor of this report noting that it streamlines the existing committee renewal process and provides CSP with additional time to focus on strategic planning. Some argued that the collective wisdom of the CSP would be lost in making this change, however, others testified that sunset policies will continue to go to the HOD for a vote. The question of who assigns the policies to the appropriate committees under the proposed recommendations was a recurring concern of those testifying. The President clarified that the officers and the staff would assign the policies. Hence, your reference committee made the proposed amendment to reflect this clarification.

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House Vote:

1	Item #:	6
2	Code:	BOT Report I-16 C-5
3	Title:	Special Committee Renewals
4	Sponsor:	Board of Trustees
5		James Gessner, MD, Chair
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7	Recommendation:	
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9		nce committee recommends that the recommendation
10		16 C-5 be adopted as amended by addition to read as
11 12	follows and the remainde	er of the report be filed.
13	1 That the House of Dele	gates support the renewal of the following Committees:
14		story, Information Technology, LGBT Matters, Maternal
15		Senior Volunteer Physicians, Student Health and Sports
16		ervention and Prevention, and Young Physicians. (D)
17	,	(-)
18	2. That the MMS study co	emmittee meeting attendance. (D)
19		
20		ack at A-17 with recommendations for addressing
21		nts and other processes to improve committee meeting
22	attendance. (D)	
23	Et a di Nico	A A 1 5
24	Fiscal Note:	Average Annual Expense per Committee
25	(Out-of-Pocket Expenses):	
26 27		\$3,000 per committee, for a total of \$27,000
28	FTE:	Existing Staff
29	(Staff Effort to Complete Pr	
30	(Otali Ellort to Complete i i	oject <i>i</i>
31	Your reference committee	received several proposed recommendations associated with
32		tee meetings. The testimony from the President-elect in
33		ers' commitment to monitoring committee members'
34		onsiderations, your reference committee incorporated revised
35		endations in an effort to address the concerns, preserving the
36	original intent of the recom	mendations.
37	•	
38	House Vote:	
		

Mister speaker, this concludes the report of Reference Committee C. My thanks to reference committee members Essam Al-Ansari, MD, Nick Argy, MD, JD, Mr. Patrick Lowe, Mawya Shocair, MD, Mr. Steven Young, and Ms. Marguerite Youngren; Staff coordinators Therese Fitzgerald, PhD; and Brett Bauer; and legal counsel, Paul Auffermann, Esq.

For the reference committee,

Kathryn Hughes, MD, Chair