



**Annual Meeting, December 6, 2020, 2:00-3:30 p.m.
Virtual, conducted on Zoom platform (Hosted via Loma Linda University)**

MINUTES

Handouts were attached to the final meeting announcement email. This was the first virtual Annual Meeting in CAPM's history. In the past, meetings had been held in person, often with a dinner, Conference call-ins had been available, but had been utilized by only a few members.

1. Roll Call

Members who announced themselves or were seen in Participants list (18, in alphabetical order): Kathleen Acree, Robert Benjamin, Portia Choi, Christen Cuevas, Marsha Epstein, Ron Hattis, Linda Hill, Kay Hooshmand, Mercy Kagoda, Liana Lianov, Donald Lyman, Sumedh Mankar, Jessica Nunez, Rob Oldham, Thea Papasozomenos, Aimee Sisson, Jim Stratton, Julie Vaishampayan

2. Greetings from President: Julie Vaishampayan

Julie thanked everyone in attendance, with special thanks to all who assisted this year for their contributions. She regretted that she was not able to accomplish more, but the year was consumed by COVID-19, and there was little legislation and few CMA resolutions for our input (as will be explained below in further detail). Ron Hattis reassured her that she had done a good job in handling all issues that did come up.

3. Approval of Minutes: Last Annual Meeting, 12/10/19: Ron Hattis (handout distributed)

A motion to approve was made by Jim Stratton, seconded by Liana Lianov.

Action: The minutes were approved without additions or corrections, and without objection.

4. Treasurer's Report: Ron Hattis (handout distributed)

a. Full Calendar Year 2019 Balance Sheet

Our income was \$2630 and our expenditures only \$949, mainly because CMA expenses have decreased. In contrast with this encouraging financial status, dues collections mostly have been coming from a relatively few members.

b. Year to Date 2020 Balance Sheet (Through November)

So far, our income is only \$761, but expenditures even less at \$309.89. We hope that significant dues income will be received during the last two months of the year, as members start to renew for 2021, and some payments have been received that are not included in this balance sheet. Ron encouraged members in attendance who have not already done so to submit their renewals.

- c. Ron asked for authorization (indefinite) for the (Secretary)-Treasurer to pay routine expenses, including supplies and domain renewals and hosting, and up to \$500/year for Web design services, without special Board approval (the President to be consulted if uncertainty).
- d. Ron also suggested that CAPM may want to set up its own professional Zoom account, which would involve charges. Today, we are the guests of the Loma Linda University account. He will consult the Board.

Action: Sumedh Mankar moved to approve the two balance sheets, and the authorization for the Secretary-Treasurer (items 4.a,b, and c). Aimee Sisson seconded. Motion was approved without objection.

5. Election of Officers; Recommendations of Nominating Committee: Julie Vaishampayan, Chair, Susan Bradshaw, Sumedh Mankar: **Nominees to Be Voted On in Bold Below;**
Automatically Continuing Board of Directors Members Listed but Not Highlighted

President: Sumedh Mankar (automatic progression from current position of President-Elect)

President-Elect: Aimee Sisson

Immediate Past-President: Julie Vaishampayan (automatic progression of current President)

Secretary-Treasurer: Ronald Hattis (incumbent; offices again to be combined for 2021)

Director with 3-year term: Thea Papasozomenos

Director with 2-year term: Christen Cuevas (automatic progression)

Director with 1-year term: Mark Horton (fill-in for Aimee Sisson; currently finishing another fill-in term for Sumedh Mankar)

Appointee: Ex-officio resident member appointed by the Board earlier in 2020:

Angelo Asheh, to serve until residency completion at UCSD, June 20, 2021

There were no other nominations.

Action: Jim Stratton moved, and Mercy Kagoda seconded, a motion to approve the slate from the Nominating Committee (names and officers in bold above). Motion was approved unanimously. The new Board's term of office begins January 1.

6. Remarks from Incoming President for 2021: Sumedh Mankar

Sumedh expressed appreciation to Julie Vaishampayan for being not only our President but also the health officer of Stanislaus County; and to all health officers present, for their efforts to keep

the public safe during the COVID-19 crisis. He noted that the pandemic of 2020 produced a severe strain on our society, such as health inequities; economic, food and housing instability; inadequacies of the health care system such as in delivery of PPE and testing, pivoting the business model of medicine to allow providers to still care for patients; effects of systemic racism, including police brutality; exacerbation of loneliness due to sheltering at home; lack of adequate access to mental health services; and social isolation of children due to school closure, which may also impact health.

On the other hand, he continued, there was a positive side, as our healthcare system has been “pressure-tested,” including healthcare system innovations; development and distribution of medical devices and tests in large numbers, with scaling; increases in volunteer healthcare workers going to “hot zones”; rapid production of new mRNA vaccines, with large studies showing efficacy literally at “warp speed,” contact tracing; and a move toward specialty health care delivery (via telemedicine). For 2021, there are opportunities to correct system pitfalls. For CAPM, he suggested involvement in issues of systemic racism and healthcare equity. He suggested continued work for funding of Preventive Medicine residency training, and cited the work of Linda Hill. He also suggested involvement in health messaging, to help restore trust in public health, which has been eroded, including support for COVID vaccination, e.g., via op-eds, and radio and TV interviews.

In a brief discussion following Sumedh’s remarks, Julie Vaishampayan and Aimee Sisson noted that major decisions about management of COVID-19 in California are being made in the Governor’s office without a formal advisory process from the public health professionals of CDPH.

7. Report on CMA Resolutions for 2019-21: Don Lyman and Ron Hattis (handout distributed)

Don Lyman presented a list of 22 resolutions on which CAPM submitted testimony, but which have not been considered by the Board of Trustees (BOT). Sixteen of these were in the “100” series that pertain to public health and are assigned to the Council on Science and Public Health. Don was the Chair of that council for the past several years, and it is currently chaired by Rob Oldham. Rob will be leaving the chairmanship to advance to the BOT in 2021.

Ten of these CMA resolutions required testimony by 12/7/20. Over the past week, the Board voted on positions on these ten, and Ron Hattis posted testimony on the CMA Website within the past few days. Following is a list of these resolutions’ names, topics, and CAPM positions. A more complete report including the text of testimony was shared with the Board. Some of the resolution names end in -21 because the first quarter for 2021 resolutions begins before the end of 2020.

The standard process for resolutions, as explained by Don, is for them and online testimony to be considered by designated councils. Then the councils send their reports on to the Board of

Trustees (BOT) for action. Unfortunately, the CMA BOT has been consumed with other issues including COVID-19. On the positive side, this provided an opportunity for the CSPH to prepare a report on pandemic response that was a major topic at the CMA House of Delegates. However, Rob Oldham confirmed that he and other council chairs were asked by the speaker of the CMA House of Delegates to defer consideration of resolutions. Reportedly, the BOT will consider only 4 member-submitted resolutions this quarter. Ron Hattis noted the significant work on resolutions devoted by resolution authors and by our Board members. Tim Murphy, Chair of the Specialty Delegation, is also frustrated by the deferral of resolutions, and hopes that the process will catch up in 2021. Rob will bring this concern forward in his new role on the BOT.

111-20: Global Climate Change Crisis

CAPM supported this with proposed amendments.

112-21: Support the Development of a Validated, Universal Screening Tool in Healthcare Settings to Identify Individuals Experiencing Human Trafficking

CAPM expressed relatively weak support, noting that we were unable to find such a validated tool. Some members also suggested potential limitations, such as denial by victims, and added workload and liability for physicians.

113-20: Promoting Transparency in U.S. Clinical Trials

The intent was to post and publicize the results (positive and negative) of clinical trials. There was not majority support (in large part because some members thought this to be outside our area of expertise), though no opposition, from the CAPM Board. Ron testified in favor as an individual.

114-20: Schools as Vital Health Driver for Children

This resolution recognized the value of reopening schools. CAPM supported with amendments, to keep options open depending on local epidemiology of the virus, the grade level, local public health guidelines in force, and compliance with those guidelines. In summary, school-by-school re-opening should occur when determined to be safe, rather than to take the opposite approach by keeping them open unless proven to be unsafe.

Resolution 115-20: Suicide as a Public Health Crisis

The CAPM Board unanimously supported this resolution with amendments. As written, the “Resolved” which is the actual policy of the resolution called for CMA to raise awareness of substance abuse as a risk factor for suicide. However, the “Whereas” clauses also listed other factors, which we recommended be added to the “Resolved”: economic desperation, social isolation, psychiatric disorders, prior suicide attempts, stressful life events, natural disasters, and gun ownership.

Resolution 116-20: Advocacy For Migrant Detention Camp Closure

CAPM supported this resolution calling for closure. However, in my testimony, I mentioned the suggestion from two Board members that alternatives mentioned in the “Whereas” clauses be added to the “Resolved,” e.g.: well-established, less expensive, and more humane alternatives, such as release on recognizance, pairing people with social workers, and connecting them with housing and legal resources (which has resulted in 99.6% percent of program enrollees attending court dates).

101-21: Anti-racism Curriculum

There was a split among Board members regarding the wording of this resolution, which was to support an anti-racism curriculum in medical schools. A majority of our Board members thought that CMA should avoid using new terms like BIPOC and anti-racism, which have political implications, and focus on the specifics of what should be done by medical schools. This majority approved a recommendation for CSPH to draft a substitute resolution, emphasizing CMA commitment to eliminating disparities in both health care delivery and health outcomes, compensating for implicit bias in health care services, and increasing medical training of unrepresented racial and ethnic groups. This could specify that these goals be achieved through influencing both medical education and the attitudes and behaviors of currently practicing physicians.

102-21: Restorative Justice Package for the Crack Cocaine Epidemic

A majority (but not all) of the Board of the California Academy of Preventive Medicine supported this resolution, but of these, several also supported expanding the scope of the resolution to include not only cocaine but also other non-opioid substance addition.

103-21: Efforts to Decrease Future Pandemics

This resolution would have called for banning of live poultry and swine from fairs. Most of the CAPM Board found insufficient evidence of pandemic danger for this, but thought it would be reasonable to minimize direct contact between these animals and the general public attending such fairs.

202-20: Access to Hospital Discharge Medications

This resolution recommended changing the California Pharmacy Law to permit dispensing of up to 30 days of medication at hospital discharge. The CAPM Board recommended that the resolution be expanded to apply to hospital emergency department outpatient visits. In addition, we recommended an additional “Resolved” that CMA encourage hospitals, emergency departments, and Urgent Care facilities to prescribe (when prescriptions can be afforded and are medically appropriate) a sufficient duration of medication, or to permit refills, as consistent with current practice guidelines for the condition or the medication in question, to last until an outpatient follow-up visit is likely to be available or the need for the medication is likely to resolve. (Current

medical guidelines were mentioned to apply to opioids, for which the minimum necessary duration of dosage is currently recommended.)

8. Reports on CMA Council on Science and Public Health (CSPH), and on Recent CMA House of Delegates October 24, 2020: Rob Oldham, Don Lyman, Susan Bradshaw

Rob Oldham and Don Lyman said that this year's HOD was unusual, by being virtual and limited to one day. A major issue considered was a report from the CSPH on pandemic prevention and response, resulting from several virtual meetings of the CSPH and producing about 35 recommendations. The report is on the CMA Website under "House of Delegates," but cannot be freely distributed to non-CMA members. As noted above, the CSPH concentrated its efforts this year on that initiative rather than on reviewing resolutions. The HOD did not vote on the recommendations, and final decisions will be up to the BOT. Rob and Jessica Nunez said that CMA will have a role in recommendations for distribution of vaccine and PPE among medical providers, and that this is occupying a lot of staff time.

9. Ideas for Future CMA Resolutions or Other Actions to be Introduced by CAPM

Ron Hattis said that CAPM does a good job reviewing public health-related resolutions submitted by others, but that it has been a while since we introduced one of our own. However, it is noteworthy that the last time we did, i.e., Susan Bradshaw's resolution calling for a ban on flavored tobacco, CMA endorsed it and successfully lobbied for it to become law (see also item #10 below).

Rob Oldham said that there is wide consensus within CMA that public health has been underfunded. He also said that CMA now recognizes the need to get involved with the social and environmental aspects of medicine, including climate change; and with the need for more emphasis on chronic disease prevention including adequate funding. These could be areas for CAPM resolutions. Jessica Nunez said we should consider action on sexually transmitted diseases, which have resurged, including neonatal syphilis. Julie said that members with ideas should contact Sumedh and Ron. Ron also noted that we could sponsor or join a coalition to cosponsor legislation on one or more issues.

10. Report on Legislation (see handout) and Ideas for 2021 Legislative Action: Don Lyman (handout was distributed)

Don Lyman reported that the Legislature met virtually and that much less legislation than usual was considered and passed this year, with the most attention devoted to giving the Governor funds and legal authorization for control of the COVID-19 pandemic. He distributed a list of 11 bills of potential interest to us, of which 9 passed; but we were only involved with one, SB 793 (Hill) to ban the sale of flavored tobacco in California. This somewhat unexpectedly passed late

in the session after being stalled for quite a while, although there are threats of a public initiative to reverse it at the next election.

A new 2-year legislative session will begin in 2021, and Don suggested that we could become more active legislatively. During this next session, hopefully the COVID-19 pandemic will be in decline, but memories of the value of public health, what it is and what it is supposed to do, will be fresh. Ron Hattis mentioned that CMA is already committed to supporting adequate funds for public health infrastructure, based on a resolution he wrote and submitted on behalf of CAPM after drastic cutbacks from the 2009 recession were not being restored. CMA lobbyists should therefore potentially assist an effort to accomplish this if a bill is introduced.

11. Preventive Medicine Residency Funding, Latest Challenges: Linda Hill

For decades, Preventive Medicine residency programs have been underfunded. They are generally excluded from Medicare/CMS funding that supports almost all other residency programs. This is not due to legislation but by decisions of the medical centers that receive those funds. Residents are often not physically located in those medical centers and are not seen as a clinical asset to them. Most of the federal funding that is available comes from HRSA, which only supports 17 of the 71 residency programs across the country. The American Cancer Society used to fund 10 slots per year but has completely withdrawn from funding residency programs. As for 3-5 decades, there has been a year by year struggle to find funds for faculty and resident stipends. Residency directors from across California and Yvonne Choong from CMA had a recent conference call, and a brief “white paper” was prepared on the need for funds. \$10 million/year would stabilize the five GPM residency programs in California, and nationwide it would take about \$120 million/year. Occupational Medicine would need funding too but was not included in the paper. She hopes to move this advocacy forward at the state and federal levels.

Jessica Nunez thanked Linda for championing this cause. Ideas are solicited for promotion of the effort. Support from various entities, including our Academy, is sought, and specifically communication with U.S. Senators would be helpful. Sen. Diane Feinstein has recently increased her emphasis on health and has changed the committees she will serve on. Javier Becerra has just been nominated to be HHS Secretary, and Jessica said her husband has potential access to him. The Biden Administration is also very interested in public health, but Jessica suggested that an approach be made in the first 100 days of the Administration, which will shape the agenda for the rest of the Presidential term. Jessica also said that Preventive Medicine was excluded from getting tobacco settlement revenue (eligible specialties were specified in legislation), and got no support from other specialty societies.

Julie Vaishampayan suggested approaching Congress Member Anna Eshoo of Santa Clara, the Chair of the Health Subcommittee of Ways and Means, House of Representatives. Julie will be meeting soon with her but on behalf of IDSA, the Infectious Disease Society of America, for which she chairs the Public Health Committee. She also suggested working together with other

PM residency programs across the country, as all suffer from the same problem. Linda said that ACPM is already helping. Ron Hattis encouraged Julie to also represent CAPM in her meeting with Rep. Eshoo, and she said she would try to “slip it in.”

Action: Using the chat file of this Zoom meeting, Sumedh Mankar moved and Rob Oldham seconded a motion to support the effort to seek state and federal funding for Preventive Medicine residencies. The membership unanimously supported this, by voice vote.

12. Medical Leadership Forum for Prevention and Public Health Report: Ron Hattis; All Minutes Posted at <https://www.capreventivemed.org/medical-leadership-forum/>

In the absence of Forum Chair Mark Horton, Ron Hattis reported as Forum Secretary. One of the most valuable services of CAPM is in sponsoring this Forum, which holds quarterly virtual meetings. It represents all schools of medicine and public health, CMA and the osteopathic medical society, CDPH, DHCS, and CAPM itself, which organized the forum in 2014 and supplies the largest delegation (including the two officers). For about two years, each meeting has included a special topic. Minutes are posted on the CAPM Website.

Here is a list of the Forum meetings and their special topics, held since last CAPM Annual Meeting, in reverse chronological order and with links to the minutes:

[Minutes of the Twenty-eighth Forum Meeting, October 8, 2020 \(draft\)](#), Featuring Projected Mortality from Climate Change, and COVID-19 Cases Prevented as of April 2020 by Control Measures in 6 Countries

[Minutes of the Twenty-seventh Forum Meeting, June 9, 2020](#), Featuring Climate Change: Direct Action Opportunities, and COVID-19: Evolving Science

[Minutes of the Twenty-sixth Forum Meeting, March 10, 2020](#), Featuring Climate Change as an Existential Public Health Crisis; and COVID-19: Introduction to the Latest Public Health Emergency

[Minutes of the Twenty-fifth Forum Meeting, December 17, 2019](#), Featuring Electronic Nicotine Delivery Systems

The next virtual meeting is two days from now: December 8, 2020, 8:00-9:30 a.m., Featuring Racial and Other Inequities as a Public Health Crisis; contact Ron Hattis to attend as a guest, preventivemed@aol.com

13. Medical Education – New Medical Schools, Opportunity to Influence Teaching of Epidemiology, Biostatistics, Prevention, and Information about PM as Specialty: Ron Hattis (Spreadsheet Handout on Medical Schools Distributed)

Ron Hattis said that the Medical Leadership Forum is seeking assistance in gathering information from medical schools, for a spreadsheet including how epidemiology, biostatistics, and prevention are taught in the curriculum, joint degree programs with MD or DO and MPH (now

offered by many schools), etc. Information is almost totally lacking for several new schools that have opened recently, including a Kaiser-Permanente school in Pasadena, a private school in San Bernardino, and an osteopathic school in Clovis in the Central Valley.

14. Other New Business

Bob Benjamin raised a concern about whether COVID-19, or the ‘long-hauler’ syndrome related to it may be considered as pre-existing conditions. Currently, the Affordable Care Act requires coverage for pre-existing conditions, but that could change, especially with an increasingly conservative Supreme Court. Bob also urged all health officers to join their county medical societies and to attempt to form public health committees.

In the absence of additional business, the meeting was adjourned by President Julie Vaishampayan.

These minutes were submitted by Ron Hattis, Secretary-Treasurer, and were approved at the Annual Meeting on 12/2/21.