

**OREGON ACADEMY OF FAMILY PHYSICIANS  
CONGRESS OF THE MEMBERS  
77<sup>th</sup> ANNUAL MEETING  
April 13, 2024**

1 **Consent Calendar for the OAFP 2024 Reference Committee**

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3 Madame Speaker, the Reference Committee held a virtual Hearing on March 30, and all resolution  
4 authors were there to present their resolutions. The committee wishes to thank the authors for their  
5 contributions to the Academy and to note that they hope and expect that member engagement grows  
6 through such virtual hearings and through the online forms where members may comment on the items  
7 before the Congress.

8 The Committee has considered each of the items referred to it and submits the following report. The  
9 committee’s recommendations on each item will be submitted as a consent calendar and voted on in  
10 one vote. An item or items may be extracted for debate. NOTE: New language is presented **underlined**  
11 **and in bold.** Language to be deleted is presented with ~~striketrough~~ markings.

12  
13 **RECOMMENDATION:** The Reference Committee recommends the following consent calendar for  
14 adoption:

15 **Item 1:** Not Adopt Resolution #1 on “Physician Rights of Conscience”

16 **Item 2:** Resolution #2 on “Reducing the Harms of Indoor Tanning” Reaffirm additional 1<sup>st</sup>  
17 Resolved Clause, Adopt 2<sup>nd</sup> (Additional) Resolved Clause; Adopt substitute 3<sup>rd</sup> Resolved Clause;  
18 Not adopt final Resolved Clause

19 **Item 3:** Not adopt Resolution #3 – “Affirming Creation and Maintenance of Urban Green Spaces  
20 as a Public Health Need”

21 **Item 4:** Resolution #4 on “Corporate Practice of Medicine” – Adopt Substitute 1<sup>st</sup> Resolved  
22 clause; Adopt 2<sup>nd</sup> Resolved Clause

23 **Item 5:** Adopt Substitute Resolution #5 on “Support for Resident Union Creation, Maintenance  
24 and Funding”

25  
26 **Item 1: Resolution #1: Physician Rights of Conscience**

27 The resolved portion is printed below:

28 **RESOLVED**, that Oregon Academy of Family Physicians affirms the Right of Conscience  
29 of members and other clinicians who choose, based on scientific, ethical, moral or  
30 religious grounds, to abstain from participating in a given path of care without threat of  
31 legal or civil action.  
32

33 Current AAFP policy, AMA policy, as well as Federal and Oregon state law protect the right of conscience  
34 adequately. OAFP does not currently have specific policy to this effect, but the AAFP does have policy as  
35 such, which is by default policy the OAFP follows. Testimony was not heavily weighted in favor of the  
36 resolution.

37 **RECOMMENDATION:** The Reference Committee recommends that Resolution #1 be NOT ADOPTED.

38  
39 **Item 2: Resolution #2 – Reducing the Harms of Indoor Tanning**

40 The resolved portion is printed below

41 **RESOLVED,** That the American Academy of Family Physicians develop a position paper on the  
42 harms of indoor tanning, and be it further

43 **RESOLVED,** That the American Academy of Family Physicians develop and distribute legislative  
44 talking points on the harms of indoor tanning.

45 The committee heard testimony and information about the lack of AAFP policy on this topic, and  
46 variability of state laws regulating access to these facilities. We also recognized that OAFP does have  
47 existing policy on this issue that should be updated and reaffirmed.

48 Because statutes pertaining to the regulation of tanning salons exists in 44 states, the committee did not  
49 feel it appropriate to direct the AAFP to devote resources to the development of an advocacy toolkit on  
50 the matter.

51 **RECOMMENDATION:** The committee therefore recommends adoption of an substitute resolved clauses,  
52 submitted by the resolution author after the reference committee hearing, which constitutes a  
53 reaffirmation and amendment of existing OAFP policy, as follows:

54 Resolved: The Academy believes that it is appropriate that patrons of suntan parlors be  
55 made aware of the risks associated with repeated episodes of suntanning and supports  
56 legislation requiring suntan parlors to display clearly to patrons a sign warning of the ill  
57 effects of repeated suntanning. (May, 1981, **REAFFIRMED 2024**)

58  
59 **The Academy further supports legislation restricting youth access to indoor tanning**  
60 **devices.**

61  
62 The Academy urges members to advise patients of the hazards involved in tanning **and**  
63 **discourage intentional tanning.** (May, 1982, **AMENDED 2024**)  
64

65 **RECOMMENDATION:** The committee further recommends that a SUBSTITUTE RESOLUTION for the first  
66 resolved clause of the original resolution BE ADOPTED.

67 **RESOLVED,** That the American Academy of Family Physicians ~~develop a position paper on~~  
68 **add information related to indoor tanning to their existing educational materials related**  
69 **to the harms of indoor tanning UV exposure.**  
70

71 **RECOMMENDATION:** the committee further recommends that the second clause of the original  
72 resolution be NOT ADOPTED.

73

74 **Item 3: Resolution #3 – Affirming Creation and Maintenance of Urban Green Spaces as a Public Health**  
75 **Need**

76 The resolved portion is printed below

77 **RESOLVED** the AAFP develop a position paper on the importance of green spaces in improving  
78 physical and mental well-being, and be it further

79 **RESOLVED** the AAFP develop and distribute legislative talking points highlighting the importance  
80 of green spaces in fostering community well-being, addressing social determinants of health,  
81 and contributing to sustainable environments.

82 The committee heard testimony related to this issue that was varied. The committee finds that AAFP  
83 policy on Social Determinants of Health includes language that refers to green spaces in all but name.  
84 The AAFP Policy Paper on Advancing Health Equity by Addressing the Social Determinants of Health  
85 already includes specific references to parks and recreational spaces. Additionally, the EveryONE project,  
86 which includes advocacy tools specifically to support access to parks. Additionally, the committee heard  
87 testimony regarding the lack of a clear definition of “green space,” which would make this policy difficult  
88 to enforce. The reference committee recommends that the resolution be NOT ADOPTED because it is not  
89 a significant change from existing AAFP policy.

90 **RECOMMENDATION:** The reference committee recommends that the resolution be **NOT ADOPTED.**

91 **Item 4: Resolution #4 – Corporate Practice of Medicine**

92 The resolved portion is printed below:

93 **RESOLVED:** that the OAFP advocates for the prohibition of the corporate practice of  
94 medicine in all healthcare settings by supporting policies and state-level legislation that  
95 prioritizes clinician autonomy and restricts corporate influence in medical decision-  
96 making; and be it further

97 **RESOLVED,** that the AAFP will promote state and federal legislative efforts to enforce  
98 strict regulations that prevent corporations from directly influencing healthcare  
99 providers in clinical decision-making.

100

101 Your reference committee heard testimony related to this complicated issue and the context of the 2024  
102 Short Legislative Session and a bill that OAFP supported that was not successful that would have  
103 restricted the Corporate Practice of Medicine. Current Oregon statute stipulates the role physicians must  
104 play in any business entity dedicated to health care.

105 **RECOMMENDATION:** The reference committee recommends that the first resolved clause of this  
106 resolution be AMENDED AND ADOPTED:

107 **RESOLVED:** that the OAFP advocates for the prohibition of the corporate practice of  
108 medicine ~~in all healthcare settings~~ by supporting policies and state-level legislation that  
109 prioritizes clinician autonomy and restricts corporate influence in medical decision-making;  
110 and be it further

111  
112 **RECOMMENDATION:** The reference committee recommends that the second resolved clause of this  
113 resolution be ADOPTED:

114 **RESOLVED,** that the AAFP will promote state and federal legislative efforts to enforce strict  
115 regulations that prevent corporations from directly influencing healthcare providers in  
116 clinical decision-making.

117

118 **Item 5: Resolution #5 – Support for Resident Union Creation, Maintenance and Funding**

119 The resolved portion is printed below.

120 **RESOLVED,** That the American Academy of Family Physicians expand their policy  
121 supporting physician unions to specifically include support of the creation and funding of  
122 creation and maintenance of resident physician unions.

123 The committee heard discussion related to current AAFP policy stipulating that the physicians have an  
124 absolute right to collective bargaining; it is not specific to resident unions.

125 **RECOMMENDATION:** The Committee recommends that the resolution be AMENDED AND ADOPTED

126 **RESOLVED,** That the American Academy of Family Physicians expand their policy supporting  
127 physician unions to specifically include support of the creation ~~and funding of creation~~ and  
128 maintenance of resident physician unions.