



OREGON ACADEMY OF
FAMILY PHYSICIANS
MAKING HEALTH PRIMARY



Resolution Writing for the Family Physician

Friday, February 16, 2024

Webinar will begin at Noon

CHANGE STARTS HERE





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(he/him)

OAFP, FORMER DELEGATE TO AAFP

Madras Medical Group, [Family Physician & Partner](#)
AAFP Commission on Quality & Practice, [Member](#)
2020 OAFP Family Doctor of the Year

[FMR](#): East Tennessee State University Quillen College of
Medicine (Bristol) Program

[MD](#): East Tennessee State University James H. Quillen College
of Medicine

[BS, Chemistry; Music](#): University of Oregon Robert D. Clark
Honors College

LEARNING OBJECTIVES

- 1.** Participants will be able to define the characteristics of a meaningful resolution for OAFP/AAFP governance work.
- 2.** Participants will be able to apply their understanding to draft a resolution for an upcoming OAFP or AAFP Congress.
- 3.** Participants will understand the process for consideration of written resolution.

RESOLUTION WRITING 101

To be considered, resolutions must:

- Address only one issue;
- Include “whereas” clause(s) that are stated clearly, factually, and are limited to relevant information;
- Include “resolved” clause(s) that stand alone without the rest of the document present (clear and concise, positively stating the action or policy called for by the resolution);
- Be submitted to the OAFP by March 15, 2024.

AAFP RESOLUTION GUIDELINES

1. Is this issue/topic of special interest to many, some, or a few member constituency members, family physicians, others?
2. Is the recommendation within the AAFP's scope or authority?
3. Is the recommendation relevant to the AAFP's four strategic priorities?
 1. Payment Reform
 2. Practice Transformation
 3. Workforce
 4. Clinical Expertise
4. Does the recommendation have financial implications for the AAFP (e.g. costs associated with research, meetings, production, travel, staff time)?
5. Has this recommendation already been addressed? If so, what action was taken by the referral body?
6. Is the AAFP currently addressing this issue/topic?

SEARCH

**Research existing AAFP policy
and keep your topic narrow!**

Search: www.aafp.org/gic.

EXAMPLE ONE

RESOLUTION NO. 413: REQUIRING NALOXONE IN AIRPLANE FIRST AID KITS

WHEREAS, since 1986 the Federal Aviation Administration (**FAA**) regulations have mandated that all domestic passenger airplanes with a flight attendant have an emergency medical kit containing medications and devices onboard, and

WHEREAS, the **FAA** also requires airlines to ensure that each crew member receives training for in-flight medical events, and

WHEREAS, the required contents of the first aid kit have not been updated since 2004, and

WHEREAS, the kit does not currently include easy to use interventions like narcan, glucagon, or injectable medications for seizures, and has not been updated to reflect the American Heart Associations' updated guidelines concerning cardiac arrest treatment guidelines, now, therefore be it

RESOLVED, That the American Academy of Family Physicians send a letter to the Federal Aviation Administration asking for the medical first aid kits on airplanes to be updated to include narcan, glucagon, and medication for seizure treatment, and also to establish a schedule for routine updates to kit contents based on professional society guidelines.

OUTCOME

ACTION TAKEN BY THE 2021 CONGRESS OF DELEGATES: SUBSTITUTE ADOPTED:

RESOLVED, That the American Academy of Family Physicians send a letter to the Federal Aviation Administration (FAA) asking that medical first aid kits on airplanes be updated to include naloxone, and for the FAA to establish education for crew on the use of naloxone and schedule routine updates to first aid kit contents based on professional society guidelines.

EXAMPLE TWO

RESOLUTION NO. 516: CALL TO REPEAL THE EXEMPTION CLAUSE IN THE 13TH AMENDMENT OF THE US CONSTITUTION THAT ALLOWS FOR SLAVERY AND INVOLUNTARY SERVITUDE OF INCARCERATED PERSONS

WHEREAS, The 13th amendment to the Constitution states, “Neither **slavery** nor involuntary servitude, *except as a punishment for crime whereof the party shall have been duly convicted*, shall exist within the United States, or any place subject to their jurisdiction, and

WHEREAS, this original wording instituted a loophole to enable a mechanism for immediate reinstatement of **slavery** conditions within prison populations, which was further leveraged by the enactment of state laws targeting recently freed Blacks, enabling incarcerations for minor offenses, and

WHEREAS, there continues to be racial disparity in incarcerations, with Black and Hispanic Americans more likely than White Americans to be arrested, convicted, and sentenced to lengthy prison terms, resulting in an incarceration rate 5x that of White Americans, and

WHEREAS, on an average day in the U.S., up to 800,000 prisoners are forced to work, often for less than \$1 per hour, with multiple states and large U.S. corporations benefiting from free to low-cost labor for provision of goods and services, and

WHEREAS, incarceration leads to adverse health outcomes of those incarcerated, their families, and their communities, and

WHEREAS, three states (Utah, Colorado, and Nebraska) have recently passed legislation to remove similar wording as found in the 13th Amendment from their own state constitutions, while 26 states do not mention **slavery** or illegal servitude in their state constitutions, and 21 states still have constitutions that approve **slavery** or involuntary servitude as punishment for crime, and

WHEREAS, an amendment to repeal the **slavery** clause from the 13th Amendment has been introduced into the U.S. Congress as of June 2021, now, therefore be it

RESOLVED, That the American Academy of Family Physicians endorse a call to repeal the exemption clause in the 13th Amendment of the U.S. Constitution that allows for **slavery** or involuntary servitude as a punishment for crime of convicted persons, and be it further

RESOLVED, That the American Academy of Family Physicians endorse a call to states with similar clauses in their state constitutions to repeal these clauses allowing for **slavery** or involuntary servitude as a punishment for crime of convicted persons, and be it further

RESOLVED, That the American Academy of Family Physicians endorse an end to racial disparities in arrest and conviction rates, and an end to racial disparities in sentencing rates and terms, and be it further

RESOLVED, That the American Academy of Family Physicians endorse a call to institute the standard minimum wage paid to prisoners for hourly labor, to be paid by the companies and organizations who benefit from this labor.

OUTCOME

ACTION TAKEN BY THE 2022 CONGRESS OF DELEGATES: DIVIDED - RESOLVED #1 - ADOPTED AS AMENDED ON THE FLOOR; RESOLVED #2 - ADOPTED; RESOLVED #3 - ADOPTED

RESOLVED, That the American Academy of Family Physicians supports legislation to repeal the exemption clause in the 13th Amendment of the U.S. Constitution that allows for slavery or involuntary servitude as a punishment for crime of convicted persons, and be it further

RESOLVED, That the American Academy of Family Physicians supports legislation for states with similar clauses in their state constitutions to repeal these clauses allowing for slavery or involuntary servitude as a punishment for crime of convicted persons, and be it further

RESOLVED, That the American Academy of Family Physicians supports legislation to institute the standard minimum wage paid to prisoners for hourly labor.

ACTION TAKEN BY THE 2021 CONGRESS OF DELEGATES: EXTRACTED TO BE CONSIDERED AT THE 2022 CONGRESS OF DELEGATES

RESOLUTION IDEAS

- REQUIRE DIGITAL BLOOD PRESSURE MONITORS IN AIRPLANE MEDICAL KITS.
- ASK THE AAFP TO CEASE RELATIONSHIPS WITH COMPANIES THAT EMPLOY PRISON LABOR.
- REQUIRE HEALTH PLANS TO PROVIDE FORMULARY ALTERNATIVE(S) WITH EVERY NOTICE OF PHARMACEUTICAL DENIAL.