Welcome Simone Seward, MPH
NYACP’s Health Disparities Fellow
Spring 2021

NYACP is pleased to welcome Simone Seward, a public health doctoral student at the School of Public Health at SUNY Albany, and a Fellow at the SUNY Albany Center for the Elimination of Minority Health Disparities, as NYACP’s first Health Disparities Fellow! Simone is working with NYACP to develop an internal medicine resident syllabus for physician-patient shared decision-making models based on cultural humility. Thank you for lending your expertise to the NYACP team this Spring Simone!

NYACP Starts Diversity, Equity and Inclusion Project: Supporting Improved Physician-Patient Decision Making Models

On November 24, 2020, NYACP updated its Diversity, Equity & Inclusion policy and established a DEI Task Force to oversee the implementation of programs and policies consistent with directives contained therein. Moro O. Salifu, MD, MPH, MBA, MACP, Professor and Chairman of the Department of Medicine, SUNY Downstate, graciously agreed to lead the new Task Force and is working with staff and NYACP leaders to create the infrastructure needed within our Chapter to move forward with this important work. National ACP leaders agree that diversity initiatives facilitate “respect, compassion, open communication and collaboration...[leading to] the ability to connect and build relationships, creating respect, empathy and understanding of colleagues and patients” (ACP DEI Policy, 2019).

Diversity and equity initiatives within the healthcare setting are complicated by long-standing disparities in health care that are well documented across a variety of health conditions and specialties. These persistent disparities continue to erode the health of many vulnerable communities in the United States, yet very little progress has been made on how to address these challenges. As the population in the United States continues to diversify in the coming years, with Non-Whites becoming the majority population, so does the probability of the widening disparities gap in health care. Developing diversity and equity initiatives now will help internists from all backgrounds and life experiences enhance the way we communicate and interact with diverse populations of patients, leading to improved health outcomes and reduced health disparities over time. NYACP would, therefore, like to leverage the Chapter’s DEI policy and expertise from the new task force to address health disparities and model best practices within all of the diverse patient communities in which we work.

Traction toward closing the healthcare disparities gap requires a multipronged approach and support from all physicians. The root causes of many of the health care disparities we still see today stem from decades of politically-constructed barriers that have systematically excluded and marginalized people[1]. Only recently has racism been recognized as a major public health issue[2]. Why did it take so long to recognize racism as a public health problem? Implicit biases and blind spots have certainly played a role. The challenge now is to act by investing time and resources into tackling upstream determinants of health that drastically affect the downstream symptomology of racism, including diabetes, heart disease, stroke, cancer, maternal and infant mortality, Alzheimer’s disease, obesity and other health conditions, which are
disproportionately affecting communities of color. We're going to need a big hammer and big nails to reconstruct the foundation of patient-centered care!

NYACP is working on developing a program that examines the ways implicit biases arise within the healthcare community, and improves trusted partnerships with diverse patient populations using a shared decision-making framework. Allowing patients to educate physicians about the impact of the social and structural issues on their lived experiences through the lens of the patient can reposition the “expert” within the physician/patient relationship with regard to certain needs and preferences. Research has shown that shared decision making helps to improve the patient-physician relationship, communication patterns and encourages the patient to be actively engaged in their health care decisions. This, in turn, can increase the chance that they will follow through and be satisfied with both their health outcomes as well as the patient experience.

NYACP’s new project will seek to provide transformative resources and strategies to better equip physicians to meet the needs of a diverse patient population. While current pedagogical approaches raise awareness and knowledge of health disparities and implicit biases, medical curriculum currently positions these concepts as content areas, emphasizing more about the need for the learner to know about them, and less about developing skills about how to incorporate changes to address them within the scope of quality patient care. This project is designed to fill that gap.


[2] Statement by American Medical Association published on November 16, 2020:


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Diversity, Equity, and Inclusion Policy
New York Chapter, American College of Physicians

NYACP respects and values the opportunity to include a wide range of viewpoints and perspectives in the work of the Chapter.

Therefore, NYACP welcomes members regardless of their race, ethnicity, national origin, gender, religion, age, sexual orientation, gender identity or expression, marital status, socioeconomic status, nationality, physical or mental ability, appearance, practice location, and professional activity.

NYACP recognizes diversity, equity, and inclusion as essential to the pursuit of our mission. The Chapter will actively work to achieve these objectives through member recruitment, engagement and recognition; sponsorship and mentorship; leadership development; volunteerism; and training in cultural competency.

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Healthcare Provider Letter from NYS DOH Regarding Monoclonal Antibody Treatments

Dear Colleagues,

Monoclonal antibody treatments for Covid19 are no longer being distributed through a state allocation system. There is no shortage in supply of these drugs, and the U.S. Department of Health and Human Services (HHS) has enough on hand to meet the needs of all treatment facilities. For this reason, these therapies are
now available through direct ordering only. All treatment sites meeting EUA requirements must now order Covid19 mAb therapies directly from AmerisourceBergen Corporation (ABC), the drugs’ sole distributor. The products remain free of charge to requesting sites.

HHS will continue to monitor all direct orders and retains the capacity to resume allocation of these and future therapies if needed. Treatment sites should review the direct ordering process guide and place orders directly with ABC at this site.

Please note that in addition to reporting therapeutics data in HHSProtect or the National Healthcare Safety Network, treatment sites wishing to place direct orders will be required to provide ABC with a board of pharmacy license or physician letter of authorization, attest to their designated class of trade, and ensure that product administration will be conducted according to the drugs’ EUAs.

Should you have any questions or concerns regarding the direct order process for COVID-19 monoclonal antibodies, you may contact HHS/ASPR at COVID19Therapeutics@hhs.gov or ABC at C19therapies@amerisourcebergen.com.

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Submit Questions for Opening Plenary Session featuring Dr. Anthony S. Fauci

The featured guest during the first plenary session of Internal Medicine Meeting 2021: Virtual Experience will be Dr. Anthony S. Fauci who will have a conversation with Dr. Darilyn V. Moyer and Dr. Gregory C. Kane. We would like to build this conversation around questions and topics of interest to our members.

Please let us know what you would you like to ask Dr. Fauci about the COVID pandemic, or otherwise, if you had some time to talk with him by accessing the link here. Please submit your questions by Friday, March 26th. We will incorporate as many questions as possible from among those submitted into the discussion. Thank you for your input.

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ACP’s New I.M. Emotional Support Hub Offers Resources to Safeguard Physician Health and Well-being

As part of ACP’s Well-Being and Professional Fulfillment initiative, ACP has launched a collection of resources aimed at helping members improve their emotional well-being. As a recognition of the unprecedented stresses caused by the COVID-19 pandemic to internists and internists-in-training, ACP created the I.M. Emotional Support Hub to offer curated resources and information to protect physicians’ emotional health and sustain ACP members’ ability to care for those in need.

Resources include easily-accessible peer-support through the Physician Support Line and free and affordable, confidential counseling through The Emotional PPE Project and The Therapy Aid Coalition. Check out the hub for additional well-being tools and resources for individuals and organizations and to view all of ACP’s Physician Well-being activities. For more information and questions, please contact acpwellbeing@acpprograms.org

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Save the Dates!
Tuensday, May 11, 2021/ 6-7 pm
Women in Medicine Webinar Series: Part 2

Topic: Negotiations: Know your Worth
Details and Registration information coming shortly!

NYACP Weekend Board Review

LIVE AND ONLINE
Friday, May 14 - Sunday, May 16, 2021
Earn up to 27 CME credits and 27 MOC points!

You will receive:
- Chat features available for instructor interaction
- Polling feature on case-based questions
- Compare your knowledge with your virtual classmates
- Course materials and online log in information in advance
- Earn up to 27 AMA PRA Category I credits and 27 MOC Points!

Faculty:

Conrad Fischer, MD, FACP
Chris Paras, DO, FACP
Niket Sonpal, MD, FACP

Course Content and More Information
Register Here

CME Statement and MOC statement

The American College of Physicians (ACP) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The ACP designates this live activity for a maximum of 27 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Successful completion of this CME activity (the NYACP Weekend Board Review), which includes participation in the evaluation component, enables the participant to earn up to 27 medical knowledge MOC points in the American Board of Internal Medicine’s (ABIM) Maintenance of Certification (MOC) program. It is the CME activity provider’s responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit.