RESOLUTION NO. 603 (New York State K) – REFERRED TO AAFP BOARD

Promoting Transparency in Medical Education and Access to Training in Settings Affiliated with Religious Health Care Organizations

Introduced by the New York State Chapter

Referred to the Reference Committee on Education

WHEREAS, Under health care reform, hospital consolidations have led to an increasing number of affiliations and mergers with religiously affiliated hospitals around the country, and

WHEREAS, one in nine hospital beds in the United States is supervised by Catholic affiliated or sponsored health systems in 2011, one which often decreases access to key reproductive health services like contraception, tubal ligation, and abortion, and

WHEREAS, physicians, including trainees, treating patients at religiously affiliated health care institutions often must follow certain guidelines, such as the Ethical and Religious Directives for Catholic Health Care (ERDs) issued by the U.S. Conference of Catholic Bishops, and

WHEREAS, ERDs may include limitations on the provision of health care services prescribed by a physician, including, but not limited to, reproductive services, sexual health, treatment of pregnancy complications, end of life care, and health care services for the LGBTQ community2,3, and

WHEREAS, increasing numbers of medical schools and graduate medical education training programs around the country have made affiliations with religiously affiliated organizations4,5, and

WHEREAS, the scope and quality of medical training may be limited by religious guidelines for trainees (students, residents, and fellows) at religiously affiliated training programs, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians strongly encourage medical schools and graduate medical education training programs to communicate with current and prospective medical students, residents, and fellows how affiliations and mergers among health care organizations may impact health care delivery, medical education, and training opportunities at their respective institutions, and be it further

RESOLVED, That the American Academy of Family Physicians recommend that information on religious affiliation be listed in the Freida database, and be it further

RESOLVED, That the American Academy of Family Physicians (AAFP) recommend that information on the religious affiliation of residency programs be included on the AAFP Family Medicine Residency Directory (https://nf.aafp.org/Directories/Residency/Search), and be it further
RESOLVED, That the American Academy of Family Physicians work with the Accreditation Council on Graduate Medical Education and other appropriate stakeholders to support transparency within medical education, recommending that medical schools and graduate medical education training programs communicate with current and prospective medical students, residents, fellows and faculty about how affiliations and mergers among health care organizations may impact health care delivery, medical education and training opportunities.

(Received 07/19/15)

Fiscal Impact: Less than $5,000

Background
The resolution calls for the AAFP to change its online residency database to include information on the religious affiliation of the sponsoring institution of listed residency programs and to work with other stakeholders to support the recommendation that medical schools and graduate medical education training programs communicate with current and prospective medical students, residents, fellows and faculty about how affiliations and mergers among health care organizations may impact health care delivery, medical education and training opportunities.

The AAFP supports the concept of transparency in health care as stated in policy “Transparency”. “The American Academy of Family Physicians (AAFP) believes that transparency in health care refers to reporting information which can be easily verified for accuracy. . . (2007) (2013 COD)

The AAFP residency database contains self-reported data on the state, community setting, program type and size, presence of international rotations, presence of other residency programs, length of training, and dual-accreditation status. The addition of new fields, such as religious affiliation would require database redesign incurring a fiscal note.

An unpublished survey of family medicine residency directors conducted by the Association of Family Medicine Residency Directors in 2013 to assess the potential impact of changes in accreditation requirements on women’s health curriculum, specifically on teaching contraception (hormonal, barrier, and IUDs), family planning, and counseling regarding unintended pregnancies. Of the 244 respondents, only 5 stated that they do not include training in the above-mentioned curricular areas. Additionally, only 2 of 244 respondents believed that their current women’s health curriculum would change if their sponsoring institution changed.

An article on published in the American Journal of Public Health noted that “There is a wide range of restrictions, loose to rigid, applied to reproductive health care practices in religiously affiliated teaching programs. Although the official policy for all Catholic-affiliated medical institutions is available online, in many cases the attending physicians in religiously affiliated institutions have never received written policies on what they may or may not prescribe. Thus, they practice according to either what they think they may be able to do or what they think may be approved of by the administration of their particular institution.” (Rubin SE, Grumet S, Prine L. Hospital religious affiliation and emergency contraceptive prescribing practices. Am J Public Health. 2006;96(8):1398–1401).
Fiscal Impact
Redesign of the database would require about 20 hours of work (development, user experience design, quality assurance testing, etc.) for a fiscal impact of approximately $1,300.

Current Policy

Transparency
http://www.aafp.org/about/policies/all/transparency.html

The Importance of Cultural Proficiency in Providing Effective Care for Diverse Populations (Position Paper)
http://www.aafp.org/about/policies/all/cultural-diverse-populations.html

Contraceptive Advice
http://www.aafp.org/about/policies/all/contraceptive.html

Reproductive Decisions
http://www.aafp.org/about/policies/all/reproductive-decisions.html

Prior Congress Actions
None

Prior Board Actions
None

References: