

**Medical Society of the State of New York  
Health Disparities Committee  
May 29, 2020  
Draft Minutes**

**Present**

Janine Fogarty, Commissioner  
Linda Clark, MD, Co-chair  
Erick Eiting, MD, Co-chair  
Adolph Meyer, Vice-chair  
Louis Auguste, MD  
Adwoa Boahene, MD  
Maria DeJesus, MD  
Frank Dowling, MD  
Lynda Hohman, MD  
Nina Huberman, MD  
Thomas Madejski, MD  
Michael Pisacano, MD  
Malcolm Reid, MD

**Excused**

Joshua Cohen, MD, Commissioner  
Monica Sweeney, MD

**Absent**

Lisa Eng, DO  
John Gillespie, MD  
Indu Gupta, MD  
Willie Underwood, MD  
Connor Orrico, Student  
Yongsoo Joo, Student

**Invited Guest**

Elizabeth Dufort, MD, FAAP, New York  
State Department of Health, Medical  
Director, Division of Epidemiology  
Bonnie Litvack, MD President  
Arthur Fougner, MD Past President

**Staff**

Patricia Clancy, Sr. Vice  
President/Managing Director  
Public Health and Education  
Maureen Ramirez, Administrative Asst.

- 1           **1) Welcome**  
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3           **2) Approval of January 21, 2020 minutes – approved**  
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5           **3) HOD CME Program – Webinar – Fall Date**  
6           The HOD meeting for 2020 did not occur due to COVID 19. This committee was  
7           planning a CME Program for presentation at the house and we would like to continue  
8           with the presentation of this program as a webinar. Pat Clancy has not reached out to  
9           Dr. Streed but was hoping that this program would be able to be presented in September  
10          or October when hopefully things have settled down a bit and we could maximize  
11          attendance. The program has been approved already and has been approved for CME  
12          credit. Dr. Eiting volunteered to contact Dr. Streed to discuss this with him. Since this  
13          will be a webinar it will become an online program on the MSSNY CME website that  
14          people can access after.  
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16          **4) COVID 19 and Impact on Disparate Populations – Elizabeth Dufort, MD**  
17          Dr. Dufort said that COVID 19 had a devastating impact on the people of color. The  
18          NYS Department of Health and the governor’s office have made this a high priority.  
19          Commissioner Zucker, the governor and everyone in between is very focused on this. A  
20          continued partnership with MSSNY and connecting with MSSNY committees is really  
21          critical. One of the first steps was to ensure that there was increased testing in the  
22          minority communities. Serological testing has been expanded around the state,

23 specifically in minority communities where we are seeing high rates of virus infection  
24 throughout the state. Engaging community partners to aid in the serum testing in these  
25 communities where infection levels were very high, sometimes double what was being  
26 seen in the rest of the state. Sending approximately 8,000,000 masks to public housing  
27 locations. Hand sanitizer has been sent as well.  
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29 The Department of Health provides the number of fatalities and infections by ethnicity on  
30 its website. Unfortunately, testing is not tracked by ethnicity, so there isn't available  
31 data on testing by race or ethnic origin. The survey that was sent out had over 100,000  
32 responses however, the data regarding the response to the question of ethnicity has not  
33 been gathered yet. The next concentration moving into the next phase is cluster cases.  
34 This ties into the tracer program and tracing exposure within the communities to try to  
35 detect infection and exposure in clusters. This data will be gathered by community, zip  
36 code and county. Once these clusters have been identified, the work to ensure they are  
37 supplied with masks, hand sanitizer and have access to adequate health care. The  
38 DOH is in the process of finalizing a one-page hand out to health care providers in these  
39 communities that encourages testing and early access to health care. The DOH is  
40 hearing of the reluctance of people to seek health care during this outbreak and so they  
41 are trying to reach out and encourage early healthcare.  
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43 Dr. Dufort then opened the time up for questions from committee members.  
44 Has any effort been made to try and quarantine people in places other than their  
45 households where it can be nearly impossible to stay apart or quarantine themselves?  
46 China handled this in a remarkable fashion, unfortunately New York State does not have  
47 the public health system established to make this happen. Early on there was a large  
48 effort to identify those that were infected and an effort to find locations to isolate and  
49 quarantine. That was done statewide. Unfortunately, the numbers became so large, so  
50 quickly, that was no longer feasible. There has been discussion that now that the  
51 numbers are decreasing, this will need to be part of the next phase. All areas have  
52 areas that they can isolate an individual if they don't have suitable housing to isolate.  
53 The questions to be asked are "do you have a separate room?" "do you have a separate  
54 bathroom?". Now, those questions have been incorporated into the contact tracing  
55 program.  
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57 Dr. Litvack indicated how happy she was to hear about the Health Disparities Task  
58 Force that was formed by the state and asked that physicians from MSSNY, more  
59 specifically this committee, be included on that task force. She felt that MSSNY's  
60 physicians have "boots on the ground" experience in those communities and would be  
61 extremely helpful on the task force. Dr. Dufort said she would check on it, given the  
62 haste in which the task force was formed, she would hope there would be some  
63 community physicians on the task force and would be happy to make some  
64 recommendations.  
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66 Dr. Litvack also indicated that while supplies are getting to the underserved  
67 communities, there is still a shortage of affordable PPE for the community doctors. 3M  
68 has indicated it is willing to sell PPE at cost to the state but cannot sell it to the individual  
69 community doctors. Dr. Litvack asked if there had been any progress made in getting  
70 these supplies to the community doctors? Dr. Dufort took note of that and will follow up  
71 in her agency and find someone that has been working on procurement.  
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73 Dr. Clark said there seems to be a geographic disparity with who able to get testing in  
Monroe County. When there was an attempt to step up the testing for Black and Latino

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it was thwarted by the edict for testing in nursing home and assisted living facilities.  
Even the labs have been overwhelmed by this testing. Is there any way to make this a  
priority? To step up access to testing materials for these underserved population?

125 was created by two health care agencies as a way to track employees and see how they  
126 were feeling every day when they came to work. Two companies created a symptom  
127 tracker. Anybody from the 12 counties can log in and say what their symptoms are.  
128 There are approximately 16,000 people enrolled, but they really need closer to 100,000  
129 to be helpful. It's difficult to get the black and brown community involved.  
130

131 Dr. Huberman raised the issue of treatment of nurses during COVID 19. There appears  
132 to have been wage issues, work environment issues and questionable treatment of the  
133 nurse personnel during the height of this outbreak. She wasn't sure if there was  
134 anything that could be done regarding these issues, but felt she needed to bring it to the  
135 attention of the health disparities committee. Dr. Dufort responded that this was a bit out  
136 of her area, but that the state is aware that a large majority of essential workers are  
137 people of color. Dr. Dufort indicated that there is information on the Department's  
138 website and there are phone numbers there for anyone who has legal issues such as  
139 sick leave, rent or eviction issues.  
140

141 Dr Litvack wanted to let everyone on the committee that Dr. Madejski has established a  
142 new fund at the AMA – The David and Donna Marie Meza Health Equity Fund which will  
143 support health equity initiatives through the AMA Foundation.  
144

145 Dr. Clark and Dr. Eiting thanked Dr. Dufort for her time and the information that she  
146 shared with the committee. They also thanked her for her valuable updates given every  
147 Thursday.  
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149 Dr.Clark asked everyone on the committee to share via email any activities they may be  
150 working on to help during this COVID crisis.  
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152 **Future Business** – Dr. Litvack brought up the idea of this committee doing a white  
153 paper on what has gone on during this crisis.  
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155 **Adjourned**  
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157 **Next Meeting: October 2, 2020**  
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