

**MSSNY Health Equity Committee  
Draft Minutes  
Friday, September 24, 2021  
Via Zoom**

**Present**

Joshua Cohen, MD Commissioner  
Janine Fogarty, MD Asst. Commissioner  
Linda Clark, MD, MS Co-Chair  
Erick Eiting, MD, Co-Chair  
Adolph Meyer, MD Vice-Chair  
Mauvareen Beverley, MD  
Adwoa Boahene, MD  
Maria DeJesus, MD  
Frank Dowling, MD  
Lisa Eng, MD  
Caroline Gomez-DeCesare, MD  
Lynda Hohman, MD  
Nina Huberman, MD  
Charles LoPresto, DO  
Thomas Madejski, MD  
Steven Mandel, MD  
Kron Nair, MD  
Lincoln Pao, MD  
Michael Pisacano, MD  
Joseph Seller, MD President  
Monica Sweeney, MD  
Willie Underwood, MD

Anna Megane Kim, MD  
Eliezer Kinberg, MD  
Michelle Lee, MD  
Anita Ravi, MD  
Malcolm Reid, MD  
Cassandra Williams, MD  
Vijay Yanamadala, MD  
Connor Orrico, Student  
Yongsoo Joo, Student  
Leanna Knight, Student

**Excused**

Eliezer Kinberg, MD  
Madelyn Klugman, MD

**Invited Guests**

Art Fougner, MD Chair, MSSNY Board of Trustees  
Parag Mehta, MD President-elect  
Bonnie Litvack, MD Immediate Past President  
Maria Basile, MD Vice-Speaker  
Charles Rothberg, MD Board Member

**Absent**

Erik Butinger, MSC  
Richard Chang, MD  
Iros Rose Danziger, MD  
Nolan Kagetsu, MD

**Staff**

Troy Oechsner, Executive VP  
Pat Clancy, Senior VP/Managing Director  
Maureen Ramirez, Administrative Asst.

1 **1) Welcome** – Dr. Clark welcomed everyone to the meeting and thanked them for their  
2 efforts working on the CME program the committee presented at the House of Delegates  
3 meeting the previous week.

4  
5 **2) Adoption of June 4, 2021 Joint Committee minutes** – accepted with corrections  
6 regarding misspelled names.

7  
8 **3) Vaccination of Underserved Communities –**

9 **a) Discussion of MSSNY Meeting with DOH** - Dr. Litvack offered a brief synopsis  
10 of MSSNY's meeting with the New York State Department of Health. Things that were  
11 discussed included:

12 – how can MSSNY reengage with the DOH to assist in getting vaccines to underserved  
13 communities?

14 – there is a greater need for involvement in the NYSIIS system.

15 – more collaboration with the county health organizations to ensure that supplies are  
16 available to physicians.

17 - how MSSNY can collaborate with the county organizations to get services to the  
18 communities in need.

19 **b) Johanne Morne, MS, Deputy Director Community Health Div. NSY DOH**

20 As of 9/22/2021 25,000,000 doses of the vaccine have been distributed. The DOH is now  
21 taking a close look at areas that are deficient in vaccine numbers. Steps are being taken to  
22 get the vaccine to those areas. The Vaccine Task Force has been created to provide  
23 recommendations how to increase the number of people accepting vaccines. Some of the  
24 ideas have been:

- 25 • Create fireside chats to reach out to people on many levels, race, gender identity,  
26 etc.
- 27 • Mass vaccination sites.
- 28 • Create a vaccine school program to focus on ages 12 thru 17 year old students  
29 working with parents and/or guardians
- 30 • Ensuring that lack of ID is not an obstacle for receiving the vaccine.

31  
32 Ms. Morne then welcomed comments from the committee.

- 33 • There is a need for "good visibility" for those who have already been vaccinated.
- 34 • It is problematic as a small practitioner to open a vial of vaccine to vaccinate a  
35 patient and then have 4 or 5 doses that must be used or they go to waste.  
36 Perhaps the J & J- one shot needs to be made more available.
- 37 • Since the 3<sup>rd</sup> dose (booster) has been approved it needs to be made clear that New  
38 York City goes to CIR and the rest of statewide vaccines are registered through  
39 NYSIIS.
- 40 • It needs to be easier to get patient information into NYSIIS.
- 41 • It was pointed out that information from the initial Vaccine Task Force meetings was  
42 never used. MSSNY suggested the County Health Departments (who trained for this  
43 type of mass vaccination event) collaborate with county medical societies to assist  
44 now and help plan for the future.

45  
46 Ms. Morne provided her contact information to the committee along with the website for the  
47 school vaccination effort. [www.Covid19vaccinehealth.ny.gov/educationalassets](http://www.Covid19vaccinehealth.ny.gov/educationalassets)  
48

49 **4) CME at MSSNY HOD:** Committee Discussion of comments made during CME  
50 presentation at the September 2021 virtual House of Delegates.

51 Dr Linda Clark opened the discussion "Mr. Wade Norwood presented slides that highlight  
52 racial disparities that exist. A comment by a participant – a person that is a member of  
53 MSSNY and in a leadership role in the "chat" made a comment in the chat that is in direct  
54 conflict with MSSNY policy combating "racism as a public health crisis".

55 Dr Eiting was asked to explain further "This committee has "doubled down" on its efforts to  
56 combat racism and committing to health equity. There was a comment made in chat by  
57 someone in MSSNY leadership that ran counter to what this committee is trying to promote  
58 by putting forth the policy just mentioned."

59 By way of explanation Dr. Eiting spoke – there were two slides being discussed in the  
60 presentation. One was a slide showing a commission that was formed in Mr. Norwood's  
61 community years ago that was to look at health issues in the community. It was starkly  
62 white by composition with one person of color. All plainly dressed. It was then contrasted  
63 with a picture of a health coalition in the same community currently, where it showed a very  
64 diverse group with people of different color, dressed in vibrant colored clothing. It was a  
65 very stark contrast. It was trying to show there is a change in who we are getting our  
66 information from and what leadership looks like now. Mr. Norwood asked for thoughts and  
67 comments. The comment in chat stated "let's be candid, the second picture shows the  
68 pendulum has swung the other way. White males are a token minority in this group".

69 Dr. Sellers indicated that he was "shocked by what was said in the chat but encouraged by  
70 the quick response to the comment." Dr. Sellers sees two issues. What do I need to do as  
71 leadership of this organization to get us (MSSNY) where we need to be? We can't expect the  
72 greater community of health care to move forward if MSSNY is not going to do it ourselves.  
73 We need to start working on MSSNY as an organization immediately. To do so will require  
74 collaboration between people who are content experts, people who had like experiences.  
75 Particularly the leadership of MSSNY, particularly the "old white guy" leadership, of which I  
76 am one. If change is going to occur leadership has an obligation to do so. First, there needs  
77 to be mandatory DEI training. MSSNY will need to put resources in place for that as well as  
78 seek funding from the Board of Trustees to create a DEI program – perhaps partnering with  
79 the AMA who is putting together similar training." Dr. Sellers would like involvement by  
80 members of the Health Equity Committee. Dr. Sellers apologized that this happened. Dr.  
81 Sellers encourages the committee members to reach out to him. He welcomes any  
82 comments or advice so that MSSNY does not miss the opportunity that this discussion  
83 brings.

84 Comment from member – Is there any way when an individual is considered or voted into a  
85 leadership position, they are required to show their support of diversity, equity and inclusion  
86 as stated in MSSNY Policy? There are required agreements and statements by candidates  
87 for any MSSNY office about conflicts of interest. Perhaps we need to formulate policies on  
88 DEI and have candidates sign an agreement. Dr. Sellers thought that was a great  
89 suggestion.

90 Dr. Mehta commented – The committee should consider this: "Receive the comment, Reflect  
91 on what it means and React accordingly." The committee received this comment, reflected  
92 on it and determined it was wrong, now something has to be done. At times when the  
93 underserved are being served, the entitled feel threatened. He is glad the person made the  
94 statement because there are many times that leadership has openly said that white men are  
95 in the minority. This statement brought what has been said many times out into the open.  
96 The people that feel this way should be included in the discussion. We should ask ourselves  
97 why people think this way?" "What are the different ways we can assure them that this is  
98 not an attack?" "The perception needs to be changed"

99 Dr. Charles Rothberg – 'Thank you Dr. Clark for your leadership on this committee. Thank  
100 you, Dr. Sellers for your statement and explaining to us your commitment and the  
101 leaderships commitment to address this issue. I hope the leadership would take the  
102 opportunity to use the collective wisdom of this group. We are diminished by these  
103 comments. I hate to think the committee will start with "the remedy" instead of formulating  
104 ideas on how to remedy this."

105 Dr. Clarke indicated this was not meant to be a problem-solving session.

106 Dr. Sellers agreed that he and the committee should get together at another time to come  
107 up with potential solutions and then propose those solutions to leadership.

108 Dr. Fogarty – "what is the best way to respond to this persons' statement? How do you  
109 respond without diminishing this persons' feelings?"

110 Dr. Joshua Cohen "I agree that we need to determine a remedy here, but whatever we  
111 determine the remedy to be, it needs to reflect how public a statement this was. It wasn't  
112 even in a closed meeting of the House of Delegates, this was an open CME meeting to any  
113 MSSNY member. I think when it is someone that is known to be in MSSNY leadership, it  
114 suggests to people what our values are. I don't think people believe it speaks to MSSNY  
115 values. However, many people who didn't share their feelings are perhaps out in the  
116 community sharing those feelings with others outside this organization and for that reason,  
117 whatever we ultimately decide to do it needs to reflect that this is not who we are as an  
118 organization and that those are not the values we embrace. We need to figure out the best  
119 way to do that through informed discussion and training so that MSSNY can communicate in  
120 the best way what our true values are."

Dr. Marie Basile – Simply the fact that the comment was made at a CME it is concerning. Because it was made in a public forum it is a part of enduring educational material. It should be noted that at the same time the Speaker and Vice Speaker were in discussions about adjusting the guidelines for delegates to testify at the House of Delegates. This adjustment would encourage delegates to be mindful of how they speak and of the content. If, going forward, what a delegate is saying is considered to contain micro-aggressions in any way, it will be ruled out of order.”

Dr. Gomez – “going forward it should not be considered just for CME, but in any different forums where people of different experiences can share it with others.”

Dr. Sweeney – “The AMA was founded on racism and has always had a history of racism. All politics are local. We need to look at the county societies as well. See how things are done there. We need to look at all of it. Show that all benefit from enlarging the circle. What is happening locally is also happening on the state and national level as well”

Dr Eiting summarized – that DEI training is a starting spot. Leadership training needs to be included so the leadership has the knowledge and the training to step up and say this is unacceptable. We need to push this organization to make sure it reflects the diversity of the physicians and the patients.

Dr Charles Rothberg – asked that Dr. Willie Underwood might be invited to speak at the next committee meeting regarding a publication that was written at the AMA.

**5) Resolution from Joint Committee** – Dr. Clark will set up a meeting with Dr. Eiting, Dr Sellers and Pat Clancy to discuss the formation of this report. The committee is looking for volunteers to help write the paper. Please contact the Chairs or Pat Clancy to offer assistance

**6) Committee meeting dates for 2022:**

All meetings are on Friday mornings between 7:30 and 9:30 AM. The following are the dates scheduled for 2022: January 21<sup>st</sup>, March 25<sup>th</sup> and September 23<sup>rd</sup>. Meeting notices have been sent to the committee

**Adjournment**