



GEORGIA ACADEMY OF
FAMILY PHYSICIANS

Georgia Academy of Family Physicians

2023
Policy Manual

Policy Review Leadership

Background:

Each year the Speaker, Vice Speaker, and the Board Chair (or the Board Chair's designee from the Executive Committee) will meet no later than June to review one-third of the active GAFP Policies as compiled in the GAFP Policy Manual. The Policy Manual is a compilation of Congress of Delegates and Board of Directors' approved policies.

The group will make recommendations for each policy to be either:

1. Archived (no longer enforced)
2. Re-adopted (as written)
3. Re-adopted (as edited)

These recommendations will come as an action item annually at the August GAFP Board meeting. Each policy will include the original date it was adopted and all subsequent years that it is re-adopted.

All active policies will be reviewed on a rotating basis but no later than every three years.

GAFP

Internal

Policies

Policy Date	GAFP Policy	Policy Description
<p>11/15/2020 COD Adopted as Written 11/2020 COD Re-adopted as written 11/23 - COD</p>	<p>Seating Medical Student Board Members Amongst Physician Board Members</p>	<p>Seating Medical Student Board Members Amongst Physician Board Members The GAFP will seat Medical Student Board members amongst Physician Board members during GAFP Board meetings.</p>
<p>November 2009 Executive Committee August 2012-Continue policy as GAFP auditor recommends. 8/2015 BOD re-adopted as written 8/2018 BOD – re-adopted as written 6/2021 – BOD – re-adopted as edited</p>	<p>Capitalization on Assets Purchased</p>	<p>Capitalization on Assets Purchased – November 2009 It is the Georgia Academy’s policy to capitalize all assets purchased or received by donation that cost \$2,500 or more individually or in the aggregate. All capitalized assets will be depreciated in accordance with the Academy’s depreciation policy. Assets purchased or received that cost less than \$2,500 individually or in the aggregate will be expensed in the period purchased. This policy was approved by the Executive Committee.</p>
<p>6-15-13 BOD 8-16: BOD approved with updated language. Re-adopted as edited – 8/2019 BOD Re-adopt as written, 8/2022 BOD</p>	<p>COD-BOD Policy Decisions</p>	<p>Clarifying Policy Decisions by the Board of Directors and Congress of Delegates GAFP policy is directed by both the Congress of Delegates (COD) and the Board of Directors (or by the Executive Committee in lieu of the Board). The Executive Committee actions are subject to review by the Board at the next in-person Board meeting. The COD routinely meets annually. The board meets at least quarterly. There may be times when issues arise that must be dealt with in a timely manner and cannot wait for the next meeting of the COD. In those instances, the board can make decisions it believes are in the best interests of the GAFP. It would then be the Board’s obligation to report to the COD if it deviated from current COD policy and justify its rationale to the COD. The Board reports to the COD in the form of board reports to the COD. The COD has the right to accept, modify or reject the actions taken.</p>
<p>1/5/2008 BOD Re-Adopted as Written (8/16/2009) BOD Re-Adopted as Written (Reviewed 3-14-10 PRC Approved 8-15-10 BOD) Revised 3-2-13 by Education Committee, Approved by BOD 3-3-13 6-16: Education Committee reviewed, sent updates to Board as an action item. The Board approved 6/16. 6-19: Education Committee reviewed, sent updates to Board as an action item. The Board approved 8/19. 8-22: Education Committee reviewed, sent edits to Board as an action item. The Board approved 8-2022.</p>	<p>Education Committee Mission Statement</p>	<p>GAFP 2016 CME Mission Statement CME MISSION STATEMENT: Purpose: The mission of the Georgia Academy of Family Physicians’ (GAFP) continuing medical education program is to provide high quality evidence-based educational opportunities to family physicians, their clinical teams as well as other healthcare providers to improve their knowledge, skills, and attitudes and focuses on improving patient outcomes. Content Areas: The GAFP Continuing Medical Education (CME) Program supports the strategic priorities of the Georgia Academy of Family Physicians. GAFP education closes gaps in professional practice which impacts our patient’s health and the practice of medicine. GAFP CME highlights evidence-based medicine, practice management and healthcare delivery of safe, timely, effective, efficient, equitable, and patient-centered care. The GAFP develops activities in response to a continuous assessment of needs by the GAFP membership, and collaborates with strategic partners, when applicable, to offer educational activities that align with the priorities of the Academy. Target Audience: The GAFP designs educational activities to meet the learning needs of its members and their clinical teams as well as other primary care professionals. Type of Activities: The GAFP presents scientifically valid and commercially unbiased content based on principles of effective adult learning in the following formats: live activities, small group learning, and workshops; enduring and web-based activities; performance improvement activities; and other appropriate formats. GAFP educational activities are designed to emphasize desirable physician knowledge and skills as identified by the Institute of Medicine, the American Board of Medical Specialties, and the Accreditation Council for Graduate Medical Education. The GAFP evaluates the effectiveness of all individual activities and of its overall CME program in accordance with the Accreditation Council for Continuing Medical Education. The</p>

		<p>GAFP evaluates the effectiveness of all individual activities and of its overall CME program.</p> <p>Expected Outcomes: The GAFP provides physicians and other clinicians with educational programs that update clinical knowledge and enhance patient care by improving competence, performance, and patient outcomes through integration of evidence-based CME content that supports quality improvement in practice. The GAFP evaluates the effectiveness of its CME through a combination of member feedback and activity evaluations. Feedback from activity evaluations is communicated with faculty and the Education planning committee, to ensure that future activities are better planned to meet the changing needs of their patients, practices and communities.</p>
<p>11/8/2008 COD Re-Adopted as Written (8/16/2009) BOD</p> <p>Re-Adopted as Written (Reviewed 3-14-10 PRC Approved 8-15-10 BOD)</p> <p>Re-adopted as written (Reviewed 3-2-13 PRC Approved 3-3-13 BOD) COD 11/16: Re-adopted as edited.</p> <p>COD 11/2019: Re-adopted as written</p> <p>COD 11/2022: Re-adopted as written</p>	<p>COD-Flag and Pledge of Allegiance</p>	<p>Displaying the US flag and reciting the Pledge of Allegiance – COD 11/8/2008</p> <p>The GAFP display the flags of the United States and the State of Georgia at the front of the room at the Congress of Delegates and the Exhibit Hall.</p> <p>The Pledge of Allegiance is to be recited at the opening session of the Congress of Delegates.</p>
<p>8/2012 BOD Approved by COD 11/2012</p> <p>8/2015: BOD Re-adopted as written</p> <p>8/2018 BOD: Re-adopted as written</p> <p>6/2021 BOD: Re-adopted as edited</p>	<p>Inactive Member Approval Process</p>	<p>Approval Process for Inactive Members The Executive Committee recommended to the Board that the Membership Committee be empowered to make decisions on Inactive members asking to extend their Inactive status for an additional year. In addition, as staff receives requests for inactive and life membership approval on a rolling basis from the AAFP, they are allowed to review the application, ensure the application meets the AAFP's eligibility requirements, and submit a decision on behalf of the Membership Committee.</p> <p>Background: The AAFP sends out an annual list of members whose inactive terms are up for renewal as well as a list of Life eligible members, requesting that the GAFP determine the inactive renewals and reach out to new Life eligible as to their membership category change. Additionally, throughout the year GAFP receives requests for membership status changes and is asked to review the application, conduct a cross-check of the eligibility criteria, and render a decision.</p>
<p>8/2012 BOD 6/2015 BOD: Re-adopted as edited</p> <p>8/2018 BOD: Re-adopted as edited. <i>The edit included the removal of the background information.</i></p> <p>6/2021 BOD: Re-adopted as written</p>	<p>GAFP Board Attendance Policy, Including Excused and Non-Excused Absences From BOD meetings</p>	<p>Board Attendance Policy Each district has a voting seat, AAFP delegates and residents both have two and the medical students have three. There is currently an alternate seat for each of these positions and representation for each position or district should occur at each Board meeting. The other can optionally attend or not attend without being charged with an unexcused absence.</p> <p>If neither are in attendance (excluding the approval of an excused absence*), then they will both receive an unexcused absence for that meeting. However, if either (one) delegate is in attendance, then neither will receive an unexcused absence for that meeting.</p> <p>Excused Absences for Board Meetings Excused absences include emergency illness/funeral of a close family member or if a Board member must miss a GAFP Board meeting due to a conflict if representing the GAFP or AAFP at another meeting. Absences and excused absences would be reflected in the minutes.</p>

<p>11/12/2003 Executive Committee</p> <p>Re-Adopted as Written (8/16/2009) BOD</p> <p>Practice Management and Finance Committees are reviewing this policy currently – recommend that this be held over and reviewed in 2013 if not changed by November 2012 by the BOD.</p> <p>8/2018 BOD: Re-adopted as written</p> <p>6/2021 BOD: Re-adopted as written</p>	<p>Finance-Financial Assistance for Litigation</p>	<p>Policy on Requests for Financial Assistance from GAFP Members:</p> <p>GAFP recognizes the importance of its role protecting family physicians' scope of practice. The Academy occasionally receives requests for financial assistance to offset the costs of legal expenses incurred to defend privileges. The GAFP Board of Directors will weigh such requests against the following criteria:</p> <ol style="list-style-type: none"> 1. Physician(s) requesting funds must be active members of GAFP. 2. Non-judicial avenues of be pursued and exhausted. 3. Physician(s) must agree to match the Academy's contribution dollar for dollar. 4. Funds must be used to defend family physician scope of practice in the hospital setting. 5. More than one family physician must benefit, or have potential to benefit, from GAFP assistance. 6. GAFP Executive Committee, or their designees, will do a peer review of each case. 7. Funds are to be repaid to GAFP if member recovers expenses. 8. Assistance will not be considered if member is involved in active malpractice litigation concerning circumstances leading to current incident. <p>GAFP reserves the right to inquire about potential quality-of-care issues at play. GAFP further reserves the right to deny requests for financial assistance for any reason. Financial assistance will be limited to a maximum of \$10,000 in legal fees per incident. This is considered a onetime benefit of membership over the life of the individual(s) concerned. Funds will be paid against invoices submitted on stationery of the member's legal counsel.</p>
<p>12/2001 COD: Re-Adopted as written (8/16/2009) BOD</p> <p>8/2012-Edit name, leave policy as is. 11/2015: readopted as edited-specified active</p> <p>8/2018 BOD: re-adopted as edited</p> <p>6/2021 BOD: Re-adopted as written</p>	<p>Donation to the Georgia Healthy Family Alliance</p>	<p>GAFP Membership Donation to Georgia Healthy Family Alliance</p> <p>12/2/2001 COD</p> <p>The Georgia Academy of Family Physicians (GAFP) will provide for a \$5.00 annual donation to the Georgia Healthy Family Alliance from each active member's dues.</p>
<p>2006 Board</p> <p>Re-Adopted as Written (8/16/2009) BOD</p> <p>Re-Adopted as Written Approved – 8-7-11 BOD</p> <p>Re-Adopted as Written Approved by BOD 6-14-14</p> <p>Re-adopted by Board in 2017</p> <p>As edited.</p> <p>Re-adopted as written 8/2020-BOD</p> <p>Re-adopted as written 8-23 BOD</p>	<p>Finance-Cash Reserve Policy</p>	<p>At the close of the fiscal year, all monies over 30 percent of the approved operating budget for the following year will be invested in the AAFP Risk Pooled Investments.</p> <p>The rest will be left in the operating and money market accounts with our financial institution.</p>
<p>01/12 BOD</p> <p>8/2015 BOD</p> <p>Re-adopted as edited: Changed name of Foundation to Georgia Healthy Family Alliance</p> <p>8/2018 BOD</p>	<p>GAFP Intellectual Property and Social Media Policy</p>	<p><u>Terms of Use</u></p> <p>Introduction; Agreement to be Bound. Use of the Georgia Academy of Family Physicians (the "GAFP") websites, including, without limitation, www.GAFP.org, and any others provided by the GAFP from time to time (individually and collectively, the "Website") is subject to these Terms of Use ("Terms"). Please read these Terms carefully before using the Website. BY ACCESSING OR USING THE WEBSITE, YOU AGREE TO COMPLY WITH AND BE BOUND BY THESE TERMS.</p> <p>The GAFP reserves the right to revise these Terms at any time and from time to time at its sole discretion by posting revised Terms on the Website.</p>

Re-adopted as edited: *The group voted to amend the action item to include and print media in the sentence that now reads... This policy applies to all types of social and print media known today or that may be developed in the future.*

6/2021 BOD: The GAFP adopted the AAFP's Term of Use for use as the GAFP policy.

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a description of the copyrighted work that you claim has been infringed;
a description of where the material that you claim is infringing is located on the site (preferably including a specific url where such material can be found);

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a statement by you that you have a good faith belief that the disputed use is not authorized by the copyright owner, its agent, or the law; and

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Please send the above copyright information to:
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		<p>Georgia Academy of Family Physicians 3760 Lavista Road, Suite 100 Tucker, GA 30084 Phone: 1-404-321-7445 Email: gafp@gafp.org Emails sent to gafp@GAFP.org for purposes other than communication about copyright claims may not be acknowledged or responded to.</p> <p>We will, in appropriate circumstances, suspend or terminate the rights of repeat infringers to post on this site. If you believe that a person posting information on the site is a repeat infringer, please follow the instructions above to contact the GAFP and provide information sufficient for us to verify such repeat infringement.</p>
11/12/2006 COD Re-Adopted as Written (8/16/2009) BOD Re-Adopted as Written Approved – 8-7-11 BOD Re-adopted as edited Approved by BOD 6-14-14 Re-Adopted as Written Approved – 10-17 COD Re-adopted as written 11/2020 Re-adopted as written 11/23	COD-Progress report to BOD	Actions of the COD to the GAFP Board 11/12/2006 COD The Speaker of the Congress of Delegates must present to the Board of Directors, at each regularly scheduled meeting, a progress report on the directives given to the Academy as set forth by the approved resolutions.
11/11/2007 COD August 2012-leave as is Re-adopted as edited 11/2015 11/2018 COD: Re-adopted as written 11/2020 COD: Re-adopted as written 11/23 COD: Re-adopted as edited	GAFP PAC Board	The GAFP PAC Board - COD 11/11/2007 The PAC strives to increase its annual contributions by 20 percent annually. In order to achieve this goal, the Congress of Delegates strongly encourages all members, and especially members of the Congress of Delegates, Board of Directors, and all its leadership committees to contribute annually.
12/2/2001 COD: Re-Adopted as Written 8/2009 BOD: Re-Adopted as Written 8-11 BOD: Re-Adopted as Edited BOD 6-14 Readopted as is BOD 11/15: Adopted as edited 8/2018 BOD: Re-adopted as written 6/2021 BOD: Re-adopted as written	GAFP-Fees Waiver	Fees for CME Meetings for Board of Directors and Alternates – 12/2/2001 COD Updated policy 2015 BOD: Board members will receive one free CME registration per year – either the summer or annual CME meeting. This would exclude residents and students as their registration is minimal.
2007 BOD Re-Adopted as Written (8/16/2009) BOD Re-Adopted as Written Approved – 8-7-11 BOD Re-Adopted as Edited Approved – 6-14-14 Re-Adopted as Written Approved – 10-17 BOD Re-Adopted as Written Approved – 8-20 BOD Re-Adopted as written–8/23 BOD	GAFP Nominations Of AAFP Board Candidate	Policy on AAFP Board Candidate Nominations – May 2007 GAFP Board of Directors The process will require a potential candidate to fill out an application to be reviewed by the nominating committee and put before the Board, at preferably the Summer Board meeting a year prior to the candidate running for office.
11/5/2000 COD Ongoing August 2012-Edit to change name to GA Patient Centered Physician Coalition and remove funding info (Reviewed 3-2-13 PRC Approved 3-3-13 BOD) With edits to ED/EVP title Re-Adopted as Written Approved – 10-17 COD Re-adopted as edited 11/2020 COD	GAFP GPCPC	GAFP Supports the Georgia Patient Centered Physician Coalition (GPCPC) The Georgia Academy of Family Physicians proclaims its support for the Patient Centered Physician Coalition of Georgia Patient Centered Physician Care Coalition (PCPCC). The Executive Director/Executive Vice President of GAFP is charged with facilitating and attending meetings of the PCPC. Additionally, two (2) members of the GAFP active membership will be appointed by the President to attend each meeting – typically the President and President Elect.

Re-adopted as written 11/23 COD		
<p>11/2013 BOD/COD Policy expanded to allow for a one-year resident pilot project</p> <p>8/2015 BOD Policy language updated. Edits were for removal of pilot phase</p> <p>8/2018 BOD: Re-adopted as written</p> <p>6/2021 BOD: Re-adopted as written</p>	<p>GAFP Policy on assisting Resident Members with Contract Review</p>	<p>GAFP Policy on assisting Resident Members with Contract Review</p> <p>The Board of Directors approved offering GAFP PGY3 residents funding to review legal contracts with a vetted law firm. This funding will be allowed as long as the resident plans to remain in Georgia and contract review is with a potential Georgia employer. The funding would come from the Legal Defense and Education Fund.</p>
<p>11/12/2006 COD Re-Adopted as Written (8/16/2009) BOD Re-Adopted as Written Approved – 8-7-11 BOD 6-2014: Re-adopted as written Re-Adopted as Written Approved by BOD 6-14-14 Re-Adopted as Written Approved – 10-17 COD Re-adopted as edited 11/2020 – COD Re-adopted as written 11/23 COD</p>	<p>GAFP-Strategic Planning</p>	<p>Strategic Planning 11/12/2006 COD</p> <p>The GAFP complete a Strategic Plan at a minimum of every 3 years and the implementation and accomplishments of that plan be presented to the Board of Directors at each of their regularly scheduled meetings.</p>
<p>11-16-2014</p> <p>March 2015 BOD</p> <p>Adopt as edited: 11/2018</p> <p>June 2021: Re-adopt as written</p>	<p>Member Attendance-at GAFP Committee Meetings</p>	<p>This resolution was passed at the GAFP COD Annual meeting:</p> <p>The Georgia Academy of Family Physicians will allow any and all interested members to attend all meetings of boards and committees (excluding the Nominating Committee or Executive Session of any committee/board) in person in order to allow all family physicians in Georgia to have the opportunity to be informed on the workings of our Academy and educate themselves to the issues that affect us all, and;</p> <p>The Executive Committee through working group or otherwise create options for electronic access within 3 months. The working group recommends: speeding up the Board minute review and approval so the general membership can have the ability to review the Board's activities in the following manner: A. Staff will draft Board minutes within 7 working days of the Board meeting. B. The Board Secretary (or another Executive Committee Officer) will review the minutes within 3 business days and return edits to staff. C. The Board will then be asked to review and vote on the minutes within 10 working days. D. Following approval of the Board minutes, staff will send out a notice to the GAFP members via our communications (newsletter) so they can have access to the Board's activities in a timely fashion. This will be piloted at the next several Board meetings, with a report back to the Board and a report being sent back to the COD.</p> <p>All attending members may participate in discussions as non-voting members if not appointed to the committees or boards they are attending at the purview of the Chair. (as outlined in <i>The Standard Code of Parliamentary Procedure</i>)</p> <p>The Georgia Academy of Family Physicians will allow any interested members to attend all meetings of boards and committees in person in order to allow all members to have the opportunity to be informed on the workings of our Academy and educate themselves to the issues that affect us all, and;</p> <p><i>The Board Secretary will work with staff to create an expedited review of Board minutes so that all members have the ability to review the leadership decisions within one month following the meeting.</i></p>
<p>11/15/09 COD August 2012-Re-adopted</p>	<p>Policy for reviewing GAFP Policy Manual</p>	<p>Policy for reviewing GAFP Policy Manual – 11/15/09 COD</p>

<p>as written 11/2015: Re-adopted as is 11/2018: Re-adopt as edited 6/2021: Re-adopt as written</p>		<p>Each year the Speaker, Vice Speaker, and the Board Chair (or the Board Chair's designee from the Executive Committee) will meet no later than June to review one- third of the active GAFP Policies as compiled in the GAFP Policy Manual. The Policy Manual is a compilation of Congress of Delegates and Board of Directors' approved policies.</p> <p>The group will make recommendations for each policy to be either:</p> <ol style="list-style-type: none"> 1. Archived (no longer enforced) 2. Re-adopted (as written) Re-adopted (as edited) <p>All active policies will be reviewed on a rotating basis but no later than every 3 years.</p> <p>The Board policies will be brought to the August Board meeting for final review and approval. The COD policies will be brought to the COD annual meeting in the Board Chair's report, as an action item to review and approve.</p>
<p>11/11/2007 COD Re-Adopted as Written 8/09 BOD 08/12: Re-adopted as edited 8-15: Re-adopted as edited 8/2018 BOD: Re-adopted as edited. <i>The edit was an addition of an "s" to programs to reflect there are now two programs in the state.</i> 6/2021: Re-adopt as edited</p>	<p>GAFP-Support the Pathway to Med School Program</p>	<p>Support the Pathway to Med School Programs – COD 11/11/2007</p> <p>June 2021: edited: The Georgia Academy continue to endorse the Pathway to Med School programs and help facilitate collaboration among interested family medicine residencies and AHECs in other regions of Georgia to expand and grow this upstream recruitment effort for family medicine and primary care at the pre-med level.</p>
<p>12/2/2001 COD Re-Adopted as Written (8/16/2009) BOD Re-Adopted as Written Approved – 8-7-11 BOD Re-Adopted as Edited Approved by BOD 6-14-14 2017: Re-adopted by COD as edited Re-adopted as written 11/2020 - COD Re-adopted as written 11/23 COD</p>	<p>Keith Ellis, MD – Establishment of the Award</p>	<p>Establishment of the Dr. Keith Ellis Award – 12/2/2001 COD</p> <p>On the eve of Dr. Keith Ellis' retirement as Residency Faculty and Program Director of Memorial Health Family Medicine Residency in Savannah, a scholarship fund be developed that would be awarded to send one (1) deserving resident per year to the GAFP Annual Meeting. Criteria for choosing this resident would be developed and maintained by the Membership Committee.</p> <p>The current policy is that the Membership Committee reviews all named GAFP awards every ten years.</p>
<p>8-24-14</p> <p>Re-Adopted as Written Approved – 10-17 BOD Re-adopted as written – 8/2020 – BOD</p> <p>Re-adopted as edited 8/23 BOD Re-adopted as edited 4/24 Executive Committee/BOD</p>	<p>EVP Succession Plan Process</p>	<p>EVP Succession Plan – Revised and Approved Executive Committee – April 2024</p> <p>If the executive vice president position is open, or if there is a planned vacancy, the GAFP board will be guided by the following process to recruit a new executive vice president (EVP). The Deputy Executive Vice President (DEVVP) is to be fully oriented and cross trained in the role of EVP so in the event of an immediate/unplanned departure of the EVP the DEVVP will assume the role of Interim EVP. If there is no DEVVP, a senior staff member will be identified to serve as Interim EVP. This will continue until the new EVP begins employment.</p> <p>The current president will appoint a search committee. The president will also chair the search committee or appoint another member to serve in that capacity. The search committee will consist of an additional 4-6 members of the GAFP. The search committee will be charged with recruiting and evaluating candidates and making a final recommendation to the Board of Directors. The search committee may retain the services of a search firm or search consultant to assist in the search process. The committee will work closely with search firm or consultant if one has been engaged.</p> <p>The current EVP job description should be reviewed and approved by the board of directors. If revisions are made the board should approve the amended job description. Once approved, the board should identify the appropriate salary range for the position and provide the search committee with the updated job description and salary range.</p>

		<p>Notice of the job opening will be advertised in local, regional and national sources. The search committee will review applications, interview, evaluate and check references of the top candidates. The search committee will provide one final recommendation to the board of directors. The board will approve the final candidate and the candidate will be notified. Remaining candidates will also be notified.</p> <p>The Executive Committee may act in lieu of the board of directors in these functions.</p> <p>Suggested Resources include:</p> <ul style="list-style-type: none"> • American Academy of Family Physicians, Chapter Relations • American Society of Association Executives, based in DC (has annual compensation and benefits survey) • American Association of Medical Society Executives, based in CO • American College of Healthcare Executives • Society for Human Resource Managers (SHRM)
<p>6-14-2014 COD 2017: Re-adopted as edited-COD Re-adopted as written – 11/2020 -COD Re-adopted as written 11/23 COD</p>	<p>Poster Publications</p>	<p>The GAFP has a research poster presentation and contest at the Annual Meeting each year. As policy, the GAFP is to publicize the winning posters in their publications.</p>

GAFP

External

Policies

Policy Date	GAFP Policy	Policy Description
<p>12/2/2001 COD Re-Adopted as Written (8/16/09) BOD Re-Adopted as Written (Reviewed 3-14-10 Approved 8-15-10 BOD) Updated By Executive Committee 4/10/13 Updated by COD 11/2013 Updated by COD 11/2014 Re-Adopted as Written Approved – 10-17 COD Re-adopt as edited 11/2020 COD Re-adopted as written 11/23 COD</p>	<p>Immunization Requirement</p>	<p>Adult Immunization Requirements Under certain settings, the GAFP approves of Pharmacist administered vaccines to adults, under a physician protocol, as long as:</p> <ol style="list-style-type: none"> 1) that information is sent to the patient’s primary care physician if the patient consents, 2) the specific vaccine is provided either under authority of prescription or specific collaborative agreement with a Georgia licensed physician 3) the administering pharmacist has a valid certificate from the State Pharmacy Board, and 4) the pharmacist inputs the information into GRITS (Georgia Registry for Immunization Services) which will allow the primary care physician/medical home to have access to the information.
<p>12/2/2001 COD Adopted as Written (8/16/09) BOD 8/12: Re-adopted as written 8/15: Re-adopted as written 11/2018: COD - Re-adopted as written June 2021: Re-adopt as written</p>	<p>Scope of Practice by Non-Physicians</p>	<p>GAFP Oppose any Expansion of the Scope of Practice by Non-Physicians – 12/2/2001 COD</p> <p>New Policy The Georgia Academy of Family Physicians is committed to opposing any expansion of a scope of practice by any non-physician that is not in the best interest of our patients.</p>
<p>11/14/2004 COD Re-Adopted as Written (8/16/09) BOD 8/12: Re-adopted as written 8/15: Re-adopted as written 11/2018: COD - Re-adopted as written June 2021: Re-adopt as written</p>	<p>Tort Reform</p>	<p>Tort Reform – 11/14/2004 COD The GAFP continue to make tort reform a top legislative issue.</p>
<p>11/11/2007 COD Re-Adopted as Written (8/16/09) BOD Re-Adopted as Written (Reviewed 3-14-10 Approved 8-15-10 BOD) (Reviewed 3-2-13 Approved 3-13-13 BOD) COD 11/16: Re-adopted as written COD 11/2019: Re-adopted as written COD 11/2022: Re-adopted as edited</p>	<p>GAFP Mission Statement</p>	<p>GAFP Mission Statement - COD 11/11/2007</p> <p>The mission of the Georgia Academy of Family Physicians is to promote the health of the citizens of Georgia by advancing the specialty of Family Medicine through education, advocacy and service to Georgia’s family physicians.</p>
<p>11/13/2005 COD Re-Adopted as Written(8/16/09) BOD Re-Adopted as Written (Reviewed 3-14-10 Approved 8-15-10 BOD) Re-adopted as written 3/13 COD 11/16: Re-adopted as edited. Re-adopted as written 8/2019 – BOD</p>	<p>Legislative Lobbying for Family Medicine</p>	<p>Legislative Lobbying for Family Medicine 11/13/2005 COD</p> <p>The Georgia Academy of Family Physicians lobby for increased funding for Family Medicine departments and residency programs at the federal and state level.</p>

<p>COD 11/2022: Re-adopted as written</p>		
<p>11/13/2011 COD Referred back to EC 6-14-14 Action Pending 8/15: Re-adopted as written 11-15: Re-adopted as written 11/2018 COD: Re-adopt as edited <i>(edit included the capitalization of Optometrists and the removal of the "s" after physicians</i> 6/2021: Re-adopt as edited</p>	<p>Annual Dilated Retinal Exam</p>	<p>June 2021 edits: The GAFP to develop and support a resolution to the Medical Association of Georgia's House of Delegates that encourages Georgia's Ophthalmologists and Optometrists to facilitate the standards of care practice with proper documentation be sent to the patient's primary care physician after each visit in a timely fashion.</p>
<p>11/1/1998-COD-original version Re-Adopted as Written (8/16/09) BOD Re-Adopted as Written (Reviewed 3-14-10 Approved 8-15-10 BOD) Re-Adopted as Written, Reviewed 3-2-13 PRC, (Approved 3-3-13 BOD) COD 11/16: Updated version changing Family Practice to Family Medicine approved. COD 11/2019: Re-adopted as written COD 11/2022: Re-adopted as written</p>	<p>Area of training for Family Medicine Residents</p>	<p>Area of training for Family Medicine Residents</p> <p>The Georgia Academy of Family Physicians unconditionally supports the concept that family medicine residents be trained in all major disciplines of medicine, including, but not limited to, the care of pregnant women and hospitalized patients.</p>
<p>11/16/2003 COD Re-Adopted as Written (8/16/09) BOD 8/12: Re-adopted as written (Reviewed 3-2-13 PRC Approved 3-3-13 BOD) COD 11/16: Re-adopted as edited removing AIM references. COD 11/2019: Re-adopted as edited removing <i>Legislation</i> from the title COD 11/2022: Re-adopted as written</p>	<p>Legislation for Healthy Lifestyle and Weight for Children and Adults</p>	<p>Healthy Lifestyle and Weight for Children and Adults - 11/12/2019 COD</p> <p>The Georgia Academy of Family Physicians both supports and encourages policies that promote a healthy lifestyle and healthy weight for both children and adults.</p>
<p>11/11/2007 COD Re-Adopted as Edited (8/16/09) BOD Re-Adopted as Written Approved – 8-7-11 BOD Re-Adopted as Written Approved by BOD 6-14-14 Re-Adopted as Written Approved – 10-17 COD Re-adopt as written 11/2020-COD Re-adopted as written 11/23 COD</p>	<p>Increase funding for family medicine and payment</p>	<p>Increase funding for family medicine and payment - COD 11/11/2007, 8/16/2009</p> <p>Continue to advocate strongly for increased funding for family medicine GME and increased payment for family physicians at the state and national levels in collaboration with AAFP.</p>
<p>11/16/2003 COD Re-Adopted as Edited (8/16/09) BOD Re-Adopted as Written</p>	<p>Legislative-Non-Physician Prescribing Medications</p>	<p>GAFP's Opposition Non-Physician Prescribing Medications – 11/16/2003 COD</p> <p>The GAFP is committed to opposing</p>

<p>Approved – 8-7-11 BOD Re-Adopted as Edited Approved by BOD 6-14-14 Re-Adopted as Written & Re-Approved – 10-17 COD Re-adopted as written 11/2020 – COD Re-adopted as written 11/23 COD</p>		<p>any expansion of a scope of practice by any non-physician when we believe that it is not in the best interest of our patients.</p>
<p>11/5/2000 COD Re-Adopted as Written (8/16/09) BOD 11/13/2011 Re-Adopted as Edited Approved by BOD 6-14-14 Re-Adopted as Written & Re-Approved – 10-17 COD Re-adopted as written 11/2020 – COD Re-adopted as edited 11/23 COD</p>	<p>Medicaid Payments</p>	<p>Medicaid Payments – 11/5/2000 COD</p> <p>That the GAFP support increased Medicaid payments to be at least equal to 100% of Medicare payments.</p>
<p>11/13/2011 COD Re-adopted as written 6-14-14 Re-Adopted as Written & Re-Approved – 10-17 COD Re-adopted as edited 11/2020 - COD Re-adopted as edited 11/23 COD</p>	<p>Scoliosis Screening</p>	<p>The GAFP work to eliminate routine screening for scoliosis in accordance with USPSTF guidelines.</p> <p>The GAFP will continue to work with the Medical Association of Georgia's House of Delegates to eliminate routine Screening for scoliosis in schools.</p>
<p>11/16/2019 – COD 11-12-2022 – COD Referred to Practice Mgt Committee for updated language</p>	<p>Hospital Operative and Non-Operative Obstetric Privileges for Family Physicians</p>	<p>The GAFP will support the American Academy of Family Physician's policies and procedures as it relates to Family Physician's obstetrics credentialing and will continue to support individual member's credentialing efforts, and the GAFP will develop a member group to report back to the 2020 COD including but not limited to:</p> <ul style="list-style-type: none"> - Educating stakeholders at Georgia Hospital Association on the FP/OB model and training and; - Encourage their members to recruit Family Medicine residents to provide comprehensive maternity care and offer to post jobs on the GAFP website.
<p>11/16/2019 – COD Re-adopted as edited 11/2022 - COD</p>	<p>Remove barriers to physician credentialing in rural and physician-shortage areas</p>	<p>The GAFP will support action that requires insurers and health care networks to not delay physician credentialing applications once all requirements are met</p>
<p>11/16/2019 – COD Re-adopted as edited 11/2022 - COD</p>	<p>Support fair reimbursement maternity care services in rural areas</p>	<p>The GAFP will continue to support equality of reimbursement for like services regardless of specialty and support legislation that requires insurers and health care networks to reimburse obstetrical physicians regardless of specialty for their maternity related service.</p>
<p>6-14-14 Re-Adopted as Written & Re-Approved – 10-17 COD Archived 11/2020 - COD</p>	<p>Support increasing the legal age to purchase tobacco to 21.</p>	<p>The GAFP supports raising the legal age to purchase tobacco to 21. <i>This policy is archived as the GAFP was part of a successful coalition to get this legislation passed in Georgia in 2020.</i></p>
<p>11/7/2007 Executive Committee Re-Adopted as Written (8/16/09) BOD Updated 8-7-11 BOD Re-Adopted as edited 8-24-14 Re-adopted as written & re-approved 10/17 BOD Re-adopted as written – 11/20 – BOD Re-adopted as edited 8/23 BOD</p>	<p>Support of Grady Position Paper See below</p>	<p>Grady Position Paper - 11/7/2007 Executive Committee GAFP Position on Grady Hospital and Grady Hospital Neighborhood Clinics Approved by the GAFP Executive Committee – November 7, 2007</p>

Grady Position Paper

GAFP Position on the Grady Health System and Grady Neighborhood Health Centers

Background

There has been a great deal of awareness of the role the Grady Health System (GHS) plays in providing a primary care safety net for the underserved residents of Fulton and Dekalb counties.

Support of Grady Training Programs

Grady, through its neighborhood clinics, provides needed primary care training for medical students and residents that could not be found elsewhere if the clinics were shut down. The Georgia Academy asks policy makers to maintain these vital training programs through the Grady neighborhood clinics that are currently a provided by Grady Hospital System.

Limiting access to the services provided by the Grady Neighborhood Health Centers would increase the state's health cost as more patients would be forced to seek care in hospital emergency rooms, only shifting and increasing the cost of care.

We urge those seeking solutions to Grady's financial concerns to continue to advocate to maintain this access to care and prevent disconnecting residents of Fulton and Dekalb counties from their health care safety net.

The GAFP will continue to support Grady in their efforts as they would for all those who provide much needed safety net care throughout the state.

Approved by the GAFP Executive Committee - November 7, 2007

Re-Adopted as Written- August 16, 2009 BOD

Re-adopted as edited August 7, 2011 BOD

Re-adopted as edited August 24, 2014.

Re-adopted as written – August 2017

Re-adopted as written – August 2020

Re-adopted as edited – August 2023