

**AAIP Board Meeting Minutes
December 15, 2021**

Attendees: Tom Anderson, Daniel Calac, Mary Owen, Missy Begay, Allison Kelliher, Blair Matheson, Lukejohn Day, Margaret Knight

Absent: Lori Alvord, Charlene Hansen

Guests: Antoinette Martinez, Mary Marfisee Alec Calac, ANAMS

Call to Order/Roll Call: Meeting commenced at 8:06 PM (CST)

Topic	Discussion	Action Items
Call to Order	<ul style="list-style-type: none"> Mary Owen, MD, AAIP President 	
Approval of November Board meeting agenda	<ul style="list-style-type: none"> <u>Motion by Lukejohn Day to Approve AAIP Board meeting agenda, Second by Allison Kelliher. Motion passed.</u> 	
Approval of October Minutes.	<ul style="list-style-type: none"> <u>Motion to approve of October minutes by Lukejohn Day, Second by Allison Kelliher. Motion passed</u> 	
ANAMS – Dr. Marfisee	<ul style="list-style-type: none"> Dr. Marfisee is with UCLA and is a representative for students. Dr. Stern had asked Dr. Marfisee to attend the board meeting. University of California in general, Native students are being treated. Dr. Stern started an ANAMS chapter and knows ANAMS policies. Trying to get everyone together and form a new ANAMS chapter which got too underhanded. Alec is meeting with the president and not including students. Need to band faculty and students together. Dr. Owen – Strengthen students and push back Dr. Marfisee – ANAMS have a representative on board meetings, JEDI group – under the board of trustees Dr. Begay – Trying to understand the issue with the 2 groups. Dr. Marfisee – ANAMS group with the physicians, Lucero wanted her own reached out to Alec and Brandon. Alec – No official chapter at UCLA, issue is with the bylaws and getting the school to recognize a less than 3 students – has to have 5 students Dr. Marfisee – Adding residents to bring up the numbers. Can be an 	

	<p>affinity group, just a matter of control and be open and polite to everyone.</p> <ul style="list-style-type: none"> • Dr. Marfisee will keep board posted. • Dr. Owen – July 2 educational meeting, getting a meeting together with indigenous faculty 	
Financial report	<p><u>Financial</u> – Dr. Matheson reports are repetitious and everything is fine. Dr. Owen stated the AAIP staff will need a COLA and asked Dr. Matheson to do some research, given the rapid rise of inflation. Will discuss COLA at February board meeting.</p>	
Committee Reports	<p><u>Executive Director Report</u> – Tom Anderson shared videos and PSA’s with the board and more will be coming out. There are shorter versions but will be coming out with more videos on COVID and the flu. Financial related, entering into a contact with ASTHO - \$125,000 contract between now and October working on health equity and COVID related matters. Also, received on Giving Tuesday, a colleague that is in Chico, CA who is a neurosurgeon who donated last year and donated \$10,000 this year. Another bonus is Indirect Cost proposal that was submitted and undergoing an audit and concern by the auditor about certain items in our grant that are line items in our expenses, not an issue and should fall under indirect cost formula. AAIP has had an indirect cost rate of 20% for many years thru DHHS special project officer sent an email and said will keep for 2018, 2019, and 2020 at 20%. And going forward for 2021 and 2022 will be giving AAIP a provisional rate of 28.9%. So, it is a bonus and meaning that grants, AAIP will get a windfall and goes to AAIP’s bottom line. Audit results will be shared with the board.</p> <p><u>ANAMS Discussion</u> - Dr. Owen reported that Dr. Marfisee asked AAIP to request that ANAMS have one of the UC med present at meetings with the Office of UC President or admissions deans. If someone one wants to make a motion and a second a board decision with discussion followed by a vote. Motion by Blair Mathison, second by Dr. Begay.</p>	

Discussion – Dr. Owen stated she will vote against because our students need to ask AAIP if they need our representation students will ask us, they are adults of an organization and have the right to make and conduct meeting on their own and if they do not feel safe, they will let us or their faculty know. Dr. Begay – Appears a person has ulterior motives and there is some concern for that. Still confused on the issue but seems reasonable to have AAIP members involved. If ANAMS needs support from AAIP, there needs to be some sort of established relationship defined form the MOU. From experience ANAMS always had a faculty advisor and it makes sense because sounds like multiple issues going on. Dr. Owen – But if you do not have a chapter and ask the board to be involved and would be but if not its sound as if no matter from Dr. Stern that an indigenous faculty member needed to be present in those meetings. Dr. Matheson – Understanding that someone would always be there and ANAMS need as much independence as possible but need our support. But not force them on anything but be readily available to help them. One of those situations where they should recognize they are outnumbered and good idea to have one of us to be there to help them. Agree with Dr. Begay that we need to support the students. Dr. Day had a question regarding the motion and what happens if it passes. Alec – Don't have an issue with the UC system this is not a chapter, its coalition and community and its internal UC meetings and when we were asked to broaden out the attendance but not at that stage yet and planning to include AAIP and clinics in the coming months and is a process and haven't asked for assistance because it hasn't been needed. At UCLA, there is clear tensions and conflict with leadership and several AAIP members complicating our affairs. Trying to respect the history and everything that is going on, so will say that if assistance is needed will request it but at this stage is not needed. Strong support from Dr. Martinez regarding engaging with the Office of the President, UC Davis and UCSan Diego for our new medical education program and Dr. Martinez is the one we are choosing to work with. When help is needed will ask for it and choosing to work with Dr. Martinez at this point. **Dr.**

Matheson withdraws his motion.

Dr. Kelliher - Need a MOU and an official AAIP relationship with ANAMS to help guide AAIP. Could make a motion to pursue an MOU with improved understanding to better support ANAMS within that framework. Dr. Kelliher will not make a motion at this time due to other priorities unless compelled. Dr. Owen – Proposed that at the January Business Meeting bring up the MOU because ANAMS is invited to the meeting and have clarification at that time since this comes up over and over. Dr. Owen asked that ANAMS/AAIP MOU be set out to the board. Tom Anderson stated there was no MOU, however continue to mentor and facilitate. But not aware of an MOU. Dr. Owen stated to put on the agenda and decide the AAIP/ANAMS relationship and figure out how to best support ANAMS.

Semi-Annual Meeting Discussion - Dr. Owen –agenda will include Committee reports, liaison reports, membership (2 hours), MOUs, Annual Meeting Call for Abstracts, Cross Cultural Medicine Workshop, National Discussion of micro/micro aggressions something that has come up in discussions with ANAMS. And how schools identify students as Native. Dr. Kelliher stated that a round table or breakout will be held at CCMW. Discussion on how Native students are identified and have a good block of time. Have 5 hours for the meeting. Dr. Mathison – Part of the discussion should be in regard to data from the US Census that shows an 87% increase of people identifying as Native and there is not that this can be explained by birth rates, immigration or anything else. It's simply how people are identifying as Native American and why they are doing it. How are schools and organization dealing with this and how do they prove it and by what criteria. Need ½ hour to start the conversation continue and finish this summer. Dr. Kelliher – Would like a discussion and ask questions and have a legal discussion. Have a policy committee and be inclusive but lay it out completely. Looking at other indigenous nations and how they do this and have guided us in the past. Dr. Owen –

	<p>Have an expert panel and providing information and having a bigger discussion at the annual meeting. Anyone want to help with pulling panel together of people doing work in that area. Dr. Kelliher – Don Warne at UND and can ask him. Dr. Matheson will also help. Dr. Owen have some legal expertise such as NARF. Have a panel of 3-4 experts to introduce ideas and concepts. Dr. Owen – Requested that Dr. Matheson come up with a panel. Someone to discuss the legal aspect of the organization. AC – Opportunity to bring in GDI and good education for non-Native academic deans who are engaging in these discussions, think wide and attendance be 200 people, this so prevalence everywhere and so few have this knowledge and give them this information from AAIP and Native law experts. A much bigger discussion could happen in July and having a lot of people at that meeting and bring and invite the NHMA and NMA, good topic for all groups. Good agenda for the meeting and send out send out reminders to committee and reformed committee structure will be done by Lukejohn Day.</p> <p><u>Governance</u> – No report</p> <p><u>COVID Task force</u> – No report, saw videos</p> <p><u>Policy & Legislation</u> – One of the residents asked that P&L meet with the residents in the Albuquerque program and she is setting up the meeting but have not heard. Will let the board know and this is something that needs to be brought up. Dr. McCabe also wants a meeting with CDC regarding data but yet to have a meeting.</p> <p><u>AMP</u> – Nothing new</p> <p><u>Dr. Martinez</u> – Creating avenues for AAIP members to support ANAMS members as they confront micro aggressions, maybe the workshop is enough but it’s a pretty big issue. Medical school and post grad is hard enough without having to deal with micro and macro aggressions. Anything addressed in that regard which is different from identification for admissions. Dr. Owen will work with Brandon and Alec to develop an agenda to guide us through the discussion on how AAIP can ANAMS and what ANAMS would like from AAIP.</p> <p><u>Membership</u> – Had a few discussions regarding membership and</p>	
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	<p>opportunities on how members can become more involved with AAIP whether they are a voting member or not. We keep getting applicants who may be American Indian but then they are not physicians or MD or DO and other allied health so how can we create opportunities for them. Share a concept rather than write all the bylaws for discussion. Proposing 3 categories for voting members but up for discussion. Highlighted the various voting member categories and looked at other organization membership and how they can participate. AI/AN physicians and retired and non-voting AI/AN members seems as though medical student should be non-voting members. All the other groups of health care providers, documented AI/AN, increasing opportunities for collaborating and participation. All other non-voting members no proposed changes. Associate members all other non-Native professionals, honorary members no change, and supporting members no change. One point on all non-voting members and how to engage them in AAIP. Getting folks invested in the goal and inclusion. A workshop at the conference to go over AAIP activities, how they can participate. The terms of benefits – website access, discounted CME, an AAIP t-shirt celebrating 50th annual meeting. Get grant from COVID or other funding group where we can advise on the t-shirt but celebrating AAIP. On-line access to workshops and discounts for students. Discounts for students for the conference and can get support from various sources. Dr. Calac – Great inclusive approach and is there an institutional subscription that we can partner with or purchase for medical decision making like up to date in medical school and use through our website. Dr. Owen – Nothing like that but good idea. Dr. Begay – Just an overview of benefits and try to answer the question of why join AAIP. So, this will go on website and clear about the benefits specific and a draw to get new members. Is a working document, the other issue that pertain to the bylaws for discussion at the semi-annual meeting specifically around expanding what does the letter of descendency entail and put it out there do the current bylaws make sense in terms of the requirements listed and do we still need all those specific requirements. Also including the blood quantum and put the</p>	
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	<p>question out there and let the members to talk about. Put out a survey a couple week ago and will share the results. Dr. Owen – Two items for membership discussion is benefits of membership, membership and the expansion of categories. Dr. Begay – Sent out survey to 15 people and shared survey results. Comment by Dr. Matheson regarding friend who had to change Indian to Indigenous on her paper. Small sample but shows some regarding mission statement no longer fits. Tom Anderson – to make changes to bylaws and must be posted prior to the meeting need advance notice. Dr. Owen – Introduce some areas to be changed and will send 60 days before annual meeting.</p>	
<p>New Business</p>	<p><u>Cross Cultural Medicine Workshop</u> – Dr. Kelliher reported that she has been working on clinical site for 5 students at the University of New Mexico, Letters of invitation and donation request are done. Dates of workshop are 4/29/2022 – May 1, 2022. Theme is Harmony in this Moment and hope to have 80-100 attendees. Registration fee is \$150 for AAIP members, \$250 for non-members and \$75 for students. Traditional approaches to COVID. Require students and participants to show vaccination cards, wear masks indoors and show vaccination cards or negative test at the door.</p> <ul style="list-style-type: none"> • Dr. Begay – feedback about questions and send to larger AAIP • Dr. Martinez – Blank comment on mission statement • Dr. Owen – Explained changes to Bylaws • Dr. Begay – Vote to pose question 1) pose the question – proof of CDIB 2) word and letter of descendency • Dr. Mathison – important discussion – no proof of blood question • Dr. Kelliher – area is complex and have experts speak to members • Dr. Begay – Indigenous physicians of Canada, they do not require letter of Indian descent. ANAMS does not require CDIB • Dr. Kelliher – Have a student on the panel of experts <p><u>Workforce development meeting</u> – give money to AAIP, \$5,000 to support regional hubs and split 7 ways. Will decide in March follow up meeting. Permission to reach out and send out emails.</p>	

	<p><u>Annual Meeting</u> – funding letter and who to send it to. A Call for Abstracts is pending. Sites set up for traditional and Tim Tallchief connecting with people in the DC area. Poster in CA</p> <p>Liaisons – Dr. Day is clearing up list and will take a broad look at open position with other organizations and now is a good time as terms are ending: AAMC – Dr. Nicole Stern, NIHB, USPTF and PRIDOC. Call of nominations and be as transparent and members can self-nominate and reviewed by the board. Sent out 4 on content and website. Serves 2 years and has other responsibilities</p> <p>Dr. Owen – New members to vote on Liaisons. Call from Native America Calling look for someone to talk about prosthesis. Send notice out to members, someone needs as soon as possible. Dr. Day stated a surgeon might be the person to call.</p> <p>Dr. Owen – She is reaching out to other minority and health professions groups regarding the annual meeting.</p> <p>Dr. Begay – Facebook comments is an issue regarding the COVID vaccine on social media. There is a way to block comments and what other organizations do. Dr. Owen asked for a response and get back with AAIP asap. Dr. Owen stated there will be a board meeting before the business meeting</p>	
Adjourn	<ul style="list-style-type: none"> • Meeting adjourned. 	

Next meeting on **January 12, 2022** at 8:00 pm (CST)