

## February 2021 Newsletter

### FROM THE GOVERNOR

*“When day comes, we step out of the shade, aflame and unafraid.  
The new dawn blooms as we free it.  
For there is always light,  
if only we’re brave enough to see it.  
If only we’re brave enough to be it.”*

– *Amanda Gorman*



Dear Colleagues,

The new year has dawned and with it both a peak in COVID-19 cases and deaths quickly followed by redoubled efforts to vaccinate our community. I have been pleasantly surprised to see Connecticut as one of the top four states in vaccination rates (at least one shot given) the past few weeks. I have been thinking on how our small state has managed this feat.

1. Communication. We started with four sites, similar to a PDSA (Plan-Do-Study-Act) cycle in quality improvement work. Those sites hammered out some of the challenges in logistics and then we opened up additional sites. We had discussions that allowed honest and transparent communication. By the end of January, 90-100% of skilled nursing facility residents had received at least one dose of the COVID-19 vaccine and many had received both. The effort gained momentum when health care workers (physicians and nurses) gave of their own free time to answer questions for patients and their families. Governor Lamont and the Department of Public Health (DPH) were open to bidirectional communication in order to adjust protocols. This allowed for more time allotted to those 75 years of age and older who were thwarted by technology, transportation, or language barriers.
2. Preparation. The state had a Vaccine Advisory Task Force to start creating our plan knowing direction from the federal government was likely to be vague guidelines that left states the freedom to determine their processes. The DPH sent several surveys to health care practitioners to determine if they were willing to be a location for

vaccination, if they were interested in vaccination, and if they would be interested in helping vaccinate at outside locations. Data from these surveys was used to inform locations around the state for vaccination sites ensuring more equitable access.

3. Grit and Collaboration. Vaccine delivery delays, cancelled appointments, and patients missing appointments all created a semi-stable chaos within the black and white description of vaccine protocols. I have listened to Governor Lamont advocate for the vaccine doses we were promised, I have seen my own institution scramble to vaccinate 1000 people in just over a 24-hour time period, and I have witnessed vaccination clinics working together alongside the National Guard to solve some of the more challenging aspects of delivery and storage.

Does any of this make our state perfect or infallible? Most certainly not, but the energy generated from a possible end to masks, quarantines, deaths, and isolation has been harnessed here for the betterment of our friends, family, and community. We should take a moment to look around, thank those we are working with, be proud of just how great a role Internal Medicine physicians have played in the fight.

## **The Business of the College**

ACP National has its Board of Governors (think House of Representatives) and Board of Regents (think Senate) as its two governing bodies. The Board of Governors is an advisory board to the Board of Regents, the College's policy-making body. The Board of Governors (BOG) is comprised of popularly elected Governors who implement national projects and initiatives at the chapter level and represent member concerns at the national level. The Board of Regents manages the business and affairs of ACP. It is the main policy-making body of the College. The Board of Regents (BOR) is composed of elected Officers, who serve ex-officio on the Board, and Regents, who have been elected by the combined membership of the Board of Regents and the Board of Governors.

Policies adopted by the College begin as resolutions. Below is a link to our Chapter's forum on the spring 2021 resolutions. Here you can comment and learn about the upcoming ACP's Board of Governors' (BOG) bi-annual resolutions. Resolutions initiated by ACP members and endorsed by a chapter council and the BOG become ACP policy when adopted by the BOR after hearty discussion and voting at each of the BOG meetings (spring and fall).

Please make your voice heard to improve our future policies. Click the link below and add your comments.

<https://www.acponline.org/forums/connecticut>

# National Tidbits

[Register Now: ACP State Health Policy Networking Webinar- Full Agenda Included](#)

Please plan to participate in [ACP's State Health Policy Networking Webinar](#) on **Thursday, February 18, 2021** from **3:00 - 4:30 PM ET**. The [agenda](#) includes updates on key state legislative advocacy that may arise..

The State Health Policy Networking Webinar is a forum for Governors, Governors-elect, Chapter Health and Public Policy Committee (HPPC) members, and staff to learn about key state health issues and to discuss common concerns. The webinar provides the opportunity to share ideas on how to strengthen chapter advocacy on the issues that come up predominantly at the state and local levels, and to develop effective strategies to help lead to policy change. ACP also believes these webinars to be timely and helpful in light of the myriad of policy directives that are now and will be coming down to the states.

Register today for the State Health Policy Networking Webinar on Thursday, February 18, 2021 (3:00-4:30PM ET). For more information, please contact [Shuan Tomlinson, Senior Analyst, State Health Policy and Grassroots Advocacy](#)

[Please Register in Advance for this Meeting](#)

[Incoming Council Representatives – Welcome to the Board of Governors](#)

We would like to welcome the following incoming Council Representatives to the Board of Governors!

Amanda Collar

Vice Chair Designee, Council of Student Members

MD-PhD Candidate, University of New Mexico School of Medicine  
Albuquerque, NM

Tracey Henry, MD, MPH, MS, FACP

Chair-elect Designee, Council of Early Career Physicians

Assistant Professor, Emory University

Attending Physician, Grady Memorial Hospital  
Powder Springs, GA

Romela Petrosyan, MD

Chair-elect Designee, Council of Resident/Fellow Members

Nephrology Fellow, Brigham and Women's Hospital/Massachusetts General Hospital  
Boston, MA

# Social Media

Enrique Pacheco MD

## The Different Uses of Social Media

Most of us have used social media in different ways. To share a big event in our lives, comment on friends' posts, support a cause, entertain, or even keep up with news. Healthcare is not exempt from social media and in fact there is significant engagement.

In healthcare, social media has been used for sharing viewpoints, learning, and advocacy. For being vocal about a disease or cause, sharing a great teaching point, or healthcare policy advocacy, social media can serve as a professional tool up to the point that some academic places are starting to consider these as alternatives in career advancement evaluations.

From the viewpoint of patients, there are organized foundations and initiatives that have started on social media with significant traction to get national and international recognition ("ALS Bucket Challenge" anyone...?). Some of these examples include: our very own past CT ACP Governor and past ACP President Robert McLean (@rmmclean84) who shares multiple topics, The Curbsiders (@thecurbsiders) or CORE IM (@COREIMpodcast) which share discussions and teaching points, or even Adam Rodman with Bedside Rounds (@BedsideRounds) who talks about history of medicine. @ACPinternists also does significant sharing of health topics, and updates in medicine and advocacy through their social media channels.

In the meantime, join us in the discussion @ConnecticutACP in Twitter and on our group in Facebook or reach out to me personally at @EPachecoMD for any questions.

(Disclaimer: accounts mentioned are examples of different use of Social Media. They are not presumed to represent the views of the CT ACP chapter nor ACP national. For official ACP content, follow @ACPInternist or @ConnecticutACP.)

# Health and Public Policy

Anthony Yoder DO, MPH and Benjamin Cherry, MD

## LEGISLATIVE UPDATE FROM HPPC

The Health and Public Policy Committee has had an active start to 2021. Members have had sessions with Connecticut House Speaker, Matt Ritter, and State Senator, Saud Anwar, MD to discuss advocacy in the state and the legislation planned in the current session. There are two proposed bills of interest to ACP members for which we have recently offered testimony.

- ACP Past-President Dr. Robert McLean spoke before the Insurance & Real Estate Committee regarding SB 842: An Act Concerning Health Insurance and Health Care In Connecticut. HPPC Co-Chairs, Dr. Ben Cherry and Dr. Anthony Yoder, submitted written testimony also supporting the bill. ACP supports efforts to develop a public option to expand affordable health coverage while ensuring payment structure is not based on current Medicare and Medicaid reimbursement and is sustainable for physicians, particularly small practices, and hospital systems.
- HB 6423: An Act Concerning Immunizations is scheduled for a public hearing in the Public Health Committee and will be heard on Tuesday, February 16. We are preparing additional testimony in support of this legislation eliminating non-medical exemptions for vaccines.

Legislation regarding Physician Assistant scope of practice will also likely be considered later in the session and we will be actively following this.

We are forming subgroups to work on each of these issues. Members with interest or questions should contact Ben Cherry ([Benjamin.cherry@gmail.com](mailto:Benjamin.cherry@gmail.com)) and Anthony Yoder ([yoder308@gmail.com](mailto:yoder308@gmail.com)).

## Outside Influence

I sent out a wider call for pieces this month for the newsletter. George Abraham MD, who is the incoming ACP President, sent this beautiful poem by Mario de Andrade. Andrade (San Paolo 1893-1945) was a poet, novelist, essayist, and musicologist. He was also one of the founders of Brazilian modernism.

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### *MY SOUL HAS A HAT*

I counted my years and realized that I have less time to live by, than I have lived so far.

I feel like a child who won a pack of candies: at first he ate them with pleasure

But when he realized that there was little left, he began to taste them intensely.

I have no time for endless meetings where the statutes, rules, procedures and internal regulations are discussed, knowing that nothing will be done.

I no longer have the patience to stand absurd people who, despite their chronological age, have not grown up.

My time is too short: I want the essence, my spirit is in a hurry. I do not have much candy in the package anymore.

I want to live next to humans, very realistic people who know how to laugh at their mistakes, who are not inflated by their own triumphs, and who take responsibility for their actions.

In this way, human dignity is defended and we live in truth and honesty.

It is the essentials that make life useful.

I want to surround myself with people who know how to touch the hearts of those whom hard strokes of life have learned to grow with sweet touches of the soul.

Yes, I'm in a hurry.

I'm in a hurry to live with the intensity that only maturity can give.

I do not intend to waste any of the remaining desserts.

I am sure they will be exquisite, much more than those eaten so far.

My goal is to reach the end satisfied and at peace with my loved ones and my conscience.

We have two lives and the second begins when you realize you only have one.

*Mario de Andrade. Andrade  
(San Paolo 1893-1945)*

## Follow Us

<https://www.facebook.com/groups/ctacp/>

<https://twitter.com/ConnecticutACP>

***“The Pessimist Sees Difficulty In Every Opportunity. The Optimist Sees Opportunity In Every Difficulty.” – Winston Churchill***

Best Regards,

Rebecca Andrews, MD, FACP - Governor