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ACADEMIC PEDIATRIC ASSOCIATION

APA Focus

The Official Newsletter of the Academic Pediatric Association

Volume 49, Issue 1

February 2012



Communications Director's Message

Happy 2012! As I finish up my month on the inpatient wards, I can't help but reflect on the central role communication plays in providing care to our patients and families. Throughout the day we communicate with our specialists, social workers, nurses and other clinical staff. At the end of a shift our housestaff communicate with one another to ensure a safe transition to the night team. Information about patients who have stayed in our PICU and NICU needs to be communicated to the accepting inpatient teams. As patients near the end of their hospitalization, we communicate with pediatricians, home nursing agencies and other service providers in the community. Perhaps most important is the ongoing communication we have with our



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families to ensure they feel included and part of their child's treatment plan.

Over the last few months, Kadriye Lewis (e-Learning SIG Co-Chair) has been educating a few of us on the APA Board and our Continuity Clinic SIG leaders about the use of wikis for enhancing collaboration and facilitating communication among members. Wikis appear to be an effective tool for sharing documents and creating meaningful discussions on a particular topic. We are continuing to discuss how wikis can be used for APA SIGs, Regions and the membership overall. I imagine many of you already use them in your own work. If so, please send me and Kadriye (kadriye.lewis@cchmc.org) your thoughts and ideas.

In this issue of APA Focus, be sure to check out your Region Co-Chair updates. While some regional meetings have already occurred, others are coming up in the next month. Regional meetings offer members and trainees a terrific opportunity to network, catch up with colleagues, participate in workshops and share research findings or works in progress. Wikis and other forms of electronic communication are terrific, but nothing beats in-person face-to-face communication! Hope you're able to attend your Regional APA meeting.

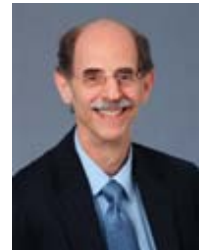
SWARF (Stay warm and RSV-free)

Barry Solomon
Communications Director
Academic Pediatric Association
bsolomon@jhmi.edu

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President's Message

New APA Research Scholars Program is starting! But first...



'Tis the Season of Regions:

One of the most enjoyable aspects of being APA President is attending all, or almost all, of the annual meetings of the APA Regions. And the Region meeting "season" is upon us! I have just returned from the Region 9 & 10 joint meeting in California. Like many of our regional meetings, it offered an opportunity to hear presentations and see posters by young investigators, especially trainees. It also provided the ability to network with colleagues both old and new, attend educational workshops, and hear exciting keynote speakers. Shale Wong, who spent two years as a RWJ Policy Fellow in the East Wing of the White House working with Michelle Obama on her Let's Move! Obesity initiative was the keynote and gave a fascinating talk that was definitely in the "must not miss" category. Many regions also have awards (best presentation by a trainee, young investigator research awards, and/or travel stipends). At the well-attended Region 9 & 10 joint meeting, travel stipends for trainees to PAS were given out for the best presentations to a medical student, resident, and fellow. Congratulations to the co-chairs of Region 9 & 10, Wendy Hobson-Rohrer, Christine Johnson, Anda Kuo, and Dean Sidelinger for a great meeting!

In February and March I look forward to attending other APA Region meetings, including meetings of Regions 7 & 8 (combined), Region 4, Region 1, Region 6 (virtual) Region 2 & 3 (combined). Dave Jaffe will be attending the Region 5 meeting this year. I encourage you all to join me, and Dave, at your Region's meeting!

New! The APA Research Scholars Program (RSP)

The APA Board of Directors is proud to announce a new faculty development program, the APA Research Scholars Program (RSP), which is designed to help APA members interested in enhancing their academic credentials to develop research skills and to plan, implement, and write-up a research project. I am excited

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[New! APA Research Scholars Program](#)

Reviews

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about leading this program for the APA!

1. Who should apply?

Fellows, junior faculty, and mid-career faculty in general pediatrics, pediatric hospital medicine, child abuse pediatrics, developmental-behavioral pediatrics, pediatric emergency medicine, and other related disciplines who want to increase their research skills, experience a mentored research project, and/or who are trying to define an academic focus in their careers.

2. What happens?

The APA RSP is a 3-year program modeled on the very successful APA Educational Scholars Program (ESP) and includes:

- o National research mentors, who will be chosen from senior researchers in the US and assigned to each APA Research Scholar. Each scholar will also choose a local mentor, with our help if needed.
- o Monthly webinars and wiki-based interactive sessions that will cover coursework in research design and statistics as well as faculty-facilitated and peer-mentored research-in-progress sessions. Peer/mentoring groups will be constituted based on commonality of research content and/or research methods.
- o PAS full day session that will focus on advanced topics (e.g., using statistics software, use of large datasets) and research-in-progress review; attendance at selected PAS workshops (such as qualitative research, manuscript writing, grant writing, reviewing abstracts and manuscripts).
- o Over the 3 years, the scholar will refine her/his research protocol, implement the research project, and end with a completed project submitted for presentation and/or publication.
- o Successful scholars will receive a Certificate in Research Scholarship.

3. How to find out more and to apply?

- o Look at the APA website, now. There will be a link on the home page to more information.
- o Applications will be online on the APA website by late April.
- o Talk to your Division Director and Chair about this program early on.
- o Tuition is the same as for ESP, \$5,000 for the 3 year program.

4. When does the program start?

- o Applications will be due September 2012
- o Accepted scholars will be notified November 2012
- o Program starts January 2012

I look forward to working with the APA Research Scholars in the coming years.

As usual, it is my privilege to be President of this great organization, made great by the character and the accomplishments of its members, and our shared focus on making the world a better place for children. I look forward to our continued conversations.

Benard Dreyer
President
Academic Pediatric Association
bpd1@nyumc.org

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Past President's Message

APA Mentoring Activities for the 2012 PAS meeting

We had a tremendous response to our call for APA members who were interested in participating as mentees at our upcoming activity. Almost 70 members responded after one email solicitation for the 60 positions we have available.



The APA Mentoring Activity for the 2012 PAS meeting is scheduled for Saturday, April 28, 2012 from 12:00 - 2:00pm. This inaugural activity, organized by the APA Mentorship Task Force, will include a dyadic speed mentoring activity followed by a small group discussion between the mentors and mentees. Each mentee will be assigned to a track (every attempt will be made to match to one of their top 3 choices) and will have 10 minutes for dyadic discussion with each of 6 mentors assigned to their track. After completion of the speed mentoring activity, the entire small group (the 6 mentors and 6 mentees) will meet for 30 minutes. One facilitator will be identified in each group to gather feedback about the process and suggestions for improvement. A secondary goal of the small group session will be to determine if there is an interest for development of future mentoring opportunities including peer mentoring. This group discussion will take place during lunch.

The Mentorship Tracks that have been requested include:

- o Advocacy
- o Career development
- o Clinical Research
- o Community based research
- o Educational scholarship
- o Health Services Research
- o Leadership skills
- o Public Health
- o Quality Improvement scholarship
- o Scholarship from Everyday Work
- o Work-Life Balance

Mentees will be notified by email in the next few weeks. In the next phase we will be soliciting mentors. We hope that APA members who have been faculty for 10 years or longer will volunteer to serve as mentors.

Thanks to the APA Mentorship Task Force Members for their help in designing and organizing this event:

Allison Ballantine, Melissa Cellini, Jennifer Christner, Donna D'Alessandro, Benard Dreyer, Glenn Flores, Maryellen Gusic, David Jaffe, Kathe Nelson, Nancy Spector, Tyler Smith, and Paul Young

We are also sponsoring an Invited Science Presentation at the 2012 PAS meeting that should be a nice companion activity to the speed mentoring event. The session is entitled; Mentoring Programs and Relationships: Essentials for Professional and Personal Development and will be held on Sunday, April 29 from 10:30am - 12:30 pm.

The speakers include: Janet Serwint, Nancy Spector, Benard Dreyer, Mario Cruz and Maryellen Gusic.

The objectives of the session include:

- o Understand the benefits of mentoring and articulate the essential components of an individual or institutional mentorship model
- o Describe the complementary roles and responsibilities of mentors and mentees
- o Detail methods of evaluation of mentoring programs and relationships.

Hope to see you there!

Janet Serwint
Immediate Past President
Academic Pediatric Association
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Treasurer's Message

There are three key developments that I would like to highlight in this month's newsletter. First, after careful and thoughtful discussion, the APA board approved the 2012 budget, which is both realistic and responsive to the APA's strategic plan and programmatic direction. Second, the APA's investment portfolio ended the last quarter of 2011 on a strong note, in spite of ongoing instability in global financial markets. Third, we are expanding our fundraising efforts and to that end, we are asking each member to please consider making a tax-deductible gift to the APA. The financial gift will support new programs that are aligned with the APA's mission, as well as Young Investigator grants and trainee scholarships to the annual meeting.



Treasurer
Denice Cora-Bramble
Academic Pediatric Association
dcorabra@cnmc.org

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APA New Members

Welcome to all of the new APA Members!

Stephanie Addison	K. Casey Lion
Elana Levites Agababa	Maren Lunoe
Vibha Anand	Gayatri Mahajan
Yasuyuki Aoki	Monica Marin
Muhammad Asif	Russell McCulloh
Amy Beck	Annie-Laurie McRee
Michael Bigham	Jeff Meyrowitz
Eric Biondi	Babak Moghimi
Sharon Bout-Tabaku	Laura Montague
Penny Brandt	Delene Musielak
Karissa Brazauskas	Diana Naranjo
Ryan Caltagirone	Vedika Nehra
Kerry Caperell	Katherine O'Connor
Erika Cheng	Tessie October
Sara Chrisman	Matthew Pantell
Erica Chung	Margaret Parker
Arlene Chung	Andrew Peterson
Molly Cousin	Thao-Ly Phan
Vanessa Curtis	Gregory Rebella
Ariel Daube	Jonathan Reisman
Teri DeLucca	Hope Rhodes

Marie Pier Desjardins
Andrew Dorais
Amanda Emke
Tracey Flood
Teasha-Lee Frattarelli
Anne Fuller
Kathleen Garland
Ian Goodman
Andrew Hahn
Diane Howell
Jose Jimenez Vega
Emilie Johnson
Courtney Judd
Guarav Kapur
Michelle Katzow
Chen Kenyon
Julia Kim
Amir Lahav
Esther Lee
Timothy Lefeber
Brenda Levy
Adora Lin

Sandeep Sadashiv
Benjamin Sanders
Sara Kristen Sexson Tejtel
Sural Shah
Rebecca Schlafer
Nakiya Showell
Jason James Silvas
Lalitha Sivaswamy
Erin Stubbs
Joanna Thomson
Dina Tom
Jeanie Tryggestad
Hong-Phuong Vo
Amelie von Saint Andre
Elizabeth Vukin
Tamara Wagner
Elizabeth Wallis
Fernando Windemuller
Lauren Wisk
Kelly Wood
Shahram Yazdani
Jeanne Ziter

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Upcoming Conferences

APA Quality Improvement

[APA Quality Improvement Conference](#)

April 27, 2012

2nd Annual Advancing Quality Improvement
Science for Children's Healthcare Research
Boston, Massachusetts

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Plan to attend!



**2nd Annual Advancing Quality Improvement
Science for Children's
Healthcare Research**

APA Conference for
Pediatric Quality Improvement
Methods, Research and Evaluation

APRIL 27, 2012
Marriott Copley Place in Boston, Massachusetts
www.academicpeds.org

This conference is supported by the Agency for Healthcare Research and Quality

 **ACADEMIC PEDIATRIC
ASSOCIATION**

Pediatric Academic Societies (PAS) 2012

[PAS 2012](#)

April 28 - May 1
The Hynes Convention Center
Boston, Massachusetts



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APA Leadership Meeting 2012

[5th Annual APA Leadership Meeting 2012](#)

July 18-19
Cincinnati Marriott
at RiverCenter



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Pediatric Hospital Medicine (PHM) 2012

[PHM 2012](#)

July 19-22
Northern Kentucky Convention Center

[Pediatric Hospital Medicine 2012 Call for Conundrums](#)

[Click here to Submit](#)

Submission Deadline:
Thursday March 1, 2012 5pm EST



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Committees

Health Care Delivery

Recommendations for Good Reads from the HCD Executive Committee and News for the Boston PAS Meeting

Have you ever been to a bookstore that posts the staff's recommendations for good reads? This month the HCD Executive Committee is starting a new feature that is our equivalent of recommended reading on a topic related to HCD. We start the series with commentary on an article recommended by David Link, Chief of Peds at Cambridge Pediatrics and a member of the HCD Executive Committee. Dr Link writes:

"Groupthink" - the brainstorming myth

Jonah Lehrer

New Yorker, January 30, 2012, page 22

For a provocative and exciting rebuttal of a long held, long cherished axiom of creative thinking, have a look at Lehrer's review of "Groupthink" (and, with a little bit of inference thrown in, "team players").

It is with some hesitancy that I submit this article on groupthink to your attention, as neither the topic nor the source are in line with the conventional materials reviewed by the APA. However, the topic, and especially the new conclusions, loom large for anyone with an administrative job (Director, Chief, Chair, etc.) because the new findings attack the very warp and weft of how we conventionally do things. Moreover, if you are one of those individuals occasionally labeled as "not a team player" this article will come as a presidential pardon for your sins and you will feel uproariously vindicated (include me in).

In the 1940's a partner in a major Madison Avenue advertising agency wrote a book in which he set out the lessons/wisdom he had learned in his successful career. "Your Creative Power" came out in 1948 and became a major bestseller. The premise of the book was simple: unleash the powers of your imagination and your career will flourish. However, when it came to laying out how to maximize creativity, Osborne put forth this key to his program: organize a squad to create ideas. He was very clear that a group should be formed and engage in "brainstorming". This was central to his agency's success and was the wellspring of creativity for his company.

Osborne went on to outline the "rules of the game" including - as a central dogma - complete absence of criticism and of negative feedback in the group process. Every idea was valuable, every effort won praise, and in the end, by freeing up everyone's imagination, the array of ideas would include the maximum creativity which could be achieved by the group. Subsequent to his book, brainstorming swept through American business organizations and schools and became a canon in the holy text.

Going back to those of you (with grey hair) who have held leadership positions, all of this will sound terribly familiar. While not necessarily labeled "groupthink" the model of hearing from everybody who is a "stakeholder" and making sure that the newest nurse's aide on the unit has had her say on any major problem is quite familiar. It is not only in our hospital environment that this is a typical approach to creative problem solving, but in many of our organizations - both at the national level and at the local level - there is a strong bias in favor of some version of groupthink.

Beginning in 1958 at Yale, the notion of how human creativity works began to come under study. The details

of the carefully designed studies are available in the New Yorker article. The conclusion, universally, can be summarized simply: "brainstorming did not unleash the potential of the group, but rather made each individual less creative". Keith Sawyer at Washington University summarized the science: "decades of research has consistently shown that brainstorming groups think of far fewer ideas than the same number of people who work alone and later pool their ideas". If you give this proposition a moment's thought, it seems totally consistent with your experience of science, for sure, and probably consistent with your experience of running things as well. There was no groupthink committee to help Galileo, Kepler, Einstein, Darwin, or Watson and Crick in their breakthrough creative thinking. And while scientific advances have increasingly become collaborative group efforts -because of the increasing complexity of science-groupthink is by no means the method by which the collaborators work. The article points out that most major papers today have multiple authors. But the excellent and detailed review carried out in the rest of the article put paid to the notion that what is going on is the old groupthink or brainstorming.

To cite two more items in the article:

"West Side Story" is one of the most successful Broadway musicals. The idea was conceived by Jerome Robbins and Leonard Bernstein who certainly knew their trade. However, it appears they got stuck and hired on a very young lyricist who was entirely new to the Broadway scene. This was Stephen Sondheim and the rest is history. No groupthink involved; just the three of them.

In another examination of the question, Isaac Kohane at Harvard Medical School carefully analyzed more than 35,000 peer-reviewed papers precisely mapping the location of each of the co-authors. He literally (using a multitude of graduate students) determined the physical distance among authors of the paper. Through a lot of analysis, he notes that "the best research was consistently produced when scientist were working within ten meters of each other; "the opposite was also true: more than a kilometer away collaborators produced the least cited work". So, his additional contribution to the question is you need to create intimate spaces where a few people work very closely together, presumably not in a groupthink setting.

Numerous other examples follow, including how Steve Jobs organized both Apple and Pixar along these principles; likewise, the Radiation Laboratory at MIT in 1942 was working on radar, and a legendary hot bed of creativity, "BuildingTwenty" was configured and operated just as Lehrer describes in terms of individual creativity (and very small workspaces available for the researchers per Kohane).

The article concludes: "the fatal misconception behind brainstorming is that there is a particular script we should all follow in group interactions." So, read the article, decide for yourself, think about putting aside this "fatal misconception" despite its hallowed acceptance in the organizations we work in.

ADDENDUM

Check the New York Times Sunday January 15, 2012 - Sunday Review. The entire front page in full color is devoted to "The rise of the new groupthink: collaboration is in. But it may not be conducive to creativity" by Susan Cain.

In other news from the HCD Committee, please plan to attend the ceremony for the 2012 HCD Award at the Boston PAS meeting. The Selection Committee faced a tough decision this year in choosing a winner among the seven strong applicants. Please consider submitting your program for 2013. The application has been simplified and the judges send their feedback to each applicant. Also, consider participating as a member of the selection committee next year. It's a form of peer review that contributes to the mission of the APA and allows you to participate in a meaningful way. If you are interested send Jane Knapp an email at jknapp@cmh.edu. Plan to attend the HCD committee sponsored topic symposium *Transforming our System from Fragmentation to Integration* at PAS. It will be Session 1620 in room 202 at the Hynes Convention Center on Saturday April 28th from 2:45 - 4:45. Four experts will discuss models for change in several areas of pediatric health care. It will be sure to stimulate your ideas for models of change and provide you the latest on the challenges we face in moving forward. We value your attendance and support.

Send your feedback, reactions, thoughts and comments to jknapp@cmh.edu. I'd love to hear from you.

Jane Knapp
Health Care Delivery Committee Chair
jknapp@cmh.edu

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Core Activities

BORN



*A few updates from the **Better Outcomes through Research for Newborns (BORN) network:***

Membership: There are currently 61 nursery sites in the network located in 31 states. At these sites, we have a total of 292 individual members. If you are a provider at a BORN nursery and aren't a member of the network, please consider joining. We are also looking for new nursery sites. Please contact the BORN administrative assistant, Allison Hartle (allison@academicpeds.org) for membership information.

TcB study: We are "in the field" with our first BORN study, designed to assess the real world clinical utility of transcutaneous bilirubin measurements in newborns. The first portion of the project, a survey of BORN sites regarding use of TcB or serum bilirubin to screen for jaundice is almost finished, with completed surveys returned from 95% of BORN sites. We are beginning to collect TcB and serum bilirubin data. If you are a participating site, please submit your IRB application. We are also looking for additional sites to collect data. Please contact Jim Taylor, the study PI (uncjat@uw.edu) or Nui Dhepyasuwan (nui@academicpeds.org), the BORN network coordinator for more information.

Delphi study: In order to determine the priorities for research studies, we are conducting a Delphi study of network members. This is a systematic approach of serial surveys asking members to list their choices for the most pressing research questions. A Delphi study working group (DWG) has finalized the protocol and is planning on submitting the proposal for IRB approval in the next few weeks. Once IRB approval has been obtained, BORN members will receive an electronic survey link to the initial survey. The study is designed such that the results will be publishable in a peer-review journal.

Jim Taylor
BORN Co-Managing Director
uncjat@u.washington.edu

Tony Burgos
BORN Co-Managing Director
drtonyburgos@gmail.com

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As we gear up for a new year, here's a brief update from CORNET...

CORNET responded to an AHRQ request for proposals to develop a research center within a practice-based research network. The centers will be positioned to respond to future studies needing a quick turn-around time. Nui and Janet did a great job getting this submission together in record time. If funded, this grant will allow CORNET to encompass new and innovative ways to conduct distance research, collaborate with APPD -LEARN, the research arm of the Association of Pediatric Program Directors (APPD) and also disseminate research findings more frequently and efficiently.

In addition, CORNET recently submitted a small grant proposal to APPD to fund collaboration between APPD, CORNET and the APA Continuity SIG. We are looking for funding to help support the effort to gather data on the "continuity" in continuity clinics before and after the Accreditation Council for Graduate Medical Education (ACGME) regulation changes. Stay tuned for additional information...

Ongoing projects include the AIM-Hi adolescent vaccine study while we anxiously await word on funding for projects on obesity, discipline and mental health issues. Manuscript writing continues for the past *Bright Futures* Oral Health and Resident Healthcare studies.

We encourage you to submit your thoughts on new study ideas! Please develop a 2-3 page draft proposal that outlines your proposed study and we will happily provide feedback. Please send it to CORNET@academicpeds.org.

CORNET also is preparing enthusiastically for PAS this year. Please keep an eye out for an email invitation to our CORNET members' meeting- this will be for new, old and potential CORNET members! It will be a wonderful networking opportunity to review past projects and brainstorm on future ones. We also plan to discuss opportunities for increased involvement in CORNET, the results of the "Value of CORNET" survey and strategic planning. Thanks to all of you who have completed the above survey and if not, we hope you will as your input is vital for CORNET to thrive and in developing our future plans.

Marilyn C Dumont-Driscoll
CORNET, Chair of Membership
dumonmd@peds.ufl.edu

Sue Feigelman
CORNET, Evaluator of Clinical Research
sfeigelm@umaryland.edu

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Educational Scholars Program

The Academic Pediatric Association's Educational Scholars Program (ESP) is recruiting its sixth cohort of faculty and scholars in 2012. The ESP meets for one day at the PAS meeting each year. Scholars also complete self-directed intersession modules (between PAS meetings), and complete a mentored educational research or evaluation project. All participants who complete these required activities, including a peer reviewed publication or presentation on their completed project, receive a Certificate of Excellence in Educational Scholarship from the Academic Pediatric Association. A [recruitment flyer](#) and other information are available on the ESP website:

http://www.academicpeds.org/education/education_scholars_program.cfm

The ESP aims to help developing faculty educators to build careers around scholarly activities related to teaching, learner assessment, curriculum development, and educational administration and leadership. Methods in educational evaluation and research are a special focus of our curriculum. Our faculty advisors offer career planning advice, and help scholars develop a well-crafted educator portfolio to support their future applications for promotion and advancement. The ESP is an ideal way for academic pediatricians to gain additional training to succeed as an educator and join a community of other dedicated educators.

Scholar Applications: The ESP application website will open on July 1, 2012, and the deadline for online submissions will be October 1. Scholars complete an application, including a 2-page project proposal, and undergo a rigorous selection process. For those interested in applying, get ready now by choosing your mentor and beginning to plan a project for inclusion in your application.

Applicants must submit a letter of support from their mentor, and also a letter from their supervisor that commits to payment of an enrollment fee of \$5000 and permission for the scholar to devote 10% FTE to the program over 3 years (May 2013 - May 2016). All scholars are expected to be or become members of the Academic Pediatric Association. For more information, contact Connie Mackay: connie@academicpeds.org

Faculty Roles: ESP faculty enjoy fine networking opportunities and the pleasure of working one-on-one with future leaders in the world of pediatric education. Our current group of 35 faculty serve in the following roles:

- o Faculty Advisors are assigned 2 scholars each. They serve as a career coach, with special emphasis on the scholar's educator portfolio, and as the facilitator of the scholar's academic project. Advisors convene on quarterly conference calls and facilitate a discussion with their scholar project group at PAS.
- o Cohort Leaders are responsible for managing the recruitment, application review, and monitoring of the scholars in a single cohort. A cohort includes 18 scholars who stay in the program for 3 years. Cohort Leaders are members of the ESP Executive Committee.
- o PAS Instructors teach scholars at the annual, all-day ESP teaching session at the PAS meeting.
- o Intersession Module Leaders plan, conduct, and evaluate one intersession module, which is conducted over a 3 month period, once every 2-3 years.
- o ESP Administrators meet monthly as an Executive Committee, setting policy, monitoring program functions, planning future activities, and managing the budget.

The ESP would be impossible without the hard work of its faculty advisors and members of the ESP Executive Committee, who devote many hours to the ongoing success of this program.

New faculty advisors for the incoming cohort of scholars are now being recruited. Previous ESP graduates are welcome to volunteer. ESP faculty are well positioned for future leadership positions in the APA. If you are interested, contact Connie Baldwin at constance_baldwin@urmc.rochester.edu.

Connie Baldwin
Educational Scholars Program Chair
constance_baldwin@urmc.rochester.edu

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PRIS



PRIS Quarterly Update (October - December 2011)

Network Related Milestones

The PRIS Executive Council (EC) had its ninth in-person meeting October 4-6th in Seabeck, Washington. This meeting focused primarily on strategic planning and sustainability of infrastructure funding for the Network.

PRIS is currently open for new research proposal ideas from its membership. The PRIS Network Manager, Jaime Blank, works closely with the Chair and the Executive Council to meet the needs of PRIS member hospitals. Please contact Jaime if you have any new research ideas or questions related to PRIS (jaimе.blank@hsc.utah.edu). Please also contact Jaime if you would like to be added to the PRIS listserv.

Membership

For those who are interested in becoming members but have not completed the membership survey yet, it can be found in the Become a Member section of our newly developed website www.prisnetwork.org or at http://www.academicpeds.org/research/research_pris.cfm. Thus far, interest has been overwhelming and we now have 76 member sites and over 600 members! We will be asking for the annual survey to be filled out in March of each year, until June. The four month window allows for more current information to be used for study planning and site selection purposes for new projects in the coming year. We will be using this information to improve communication with our past, current and future members and to create processes by which new ideas may be fostered through the network.

PRIS activities

Projects

PRIS has been fortunate to receive substantial infrastructure and specific project funding in recent months.

Infrastructure Funding + Prioritization Project

Grant Funding Period: March 1, 2010 - December 31, 2012

The aim of this project is to identify conditions that are prevalent, costly to the healthcare system, and demonstrate high inter-hospital variation in resource utilization, which signals either lack of high quality data upon which to base medical decisions, and/or an opportunity to standardize care across hospitals. This project will establish a priority list, focus on the highest ranking conditions that demonstrate the most variation of care, at a high cost/frequency, and that has actionable evidence that if followed in the inpatient setting, would lead to a decrease in unnecessary variation with no adverse or even superior patient outcomes.

The Prioritization phase of this project is complete and focus on the highest ranking conditions has been underway since the beginning of August. PRIS has begun work on 4 high ranking-conditions for drill-down analyses. The goals of each drill-down is to 1) discover the sources of variation in resource utilization across

and within hospitals, 2) identify condition specific risk adjustment and outcomes, 3) identify potential quality measures and 4) understand the relationship between the variation in resource utilization, potential quality measures and condition-specific outcomes. Work on the first drill-down process on DKA has been continuing and we had a very productive project meeting in Philadelphia at the beginning of November. We anticipate wrapping up this first drill-down early in the New Year. Tonsillectomy has been chosen as the second drill-down condition and the project start was kicked-off in mid-December. PRIS will work with hospitals in order to have them weigh in more formally on the choice of the last two drill-downs.

PRIS met with the Quality and Safety Leaders at Child Health Corporation of America (CHCA) in October and with the CEOs in November to receive input on the next two drill-down conditions. The final decision on the last two conditions will be made early in the New Year and PRIS will have a more formal process by which hospitals may weigh in on the choice.

A manuscript describing the methods used to develop the priority condition list has been prepared and will be submitted early in the New Year.

PHIS+: Augmenting the Pediatric Health Information System (PHIS) with Clinical Data

Grant funding period: September 30, 2010 - September 29, 2013

The objective of the PHIS+ project is to build on the existing infrastructure provided by Child Health Corporation of America (CHCA)- -a business alliance networking 43 of North America's leading children's hospitals-- to augment its existing database (PHIS) with laboratory, microbiology and radiology data for children seen in the ambulatory and inpatient departments of 6 large children's hospitals.

The PHIS+ project is making headway and achieving the milestones set forth in the grant application. Over the last quarter, all three project streams have taken shape. The laboratory component is in the final stages of being mapped into the PHIS+ database. The initial stage of the laboratory backfill of data has started, and is expected to be complete in the first few months of 2012. A one-month sample of microbiology data has been collected from each site and will be mapped by the bioinformatics core at the University of Utah. The next step is for the hospitals to extract one year of microbiology data, which is expected to be assigned in early January. A one year radiology data extract is expected to be submitted in early January. The backfills for microbiology and radiology will take place after the lab backfill is complete.

The Child Health Corporation of America (CHCA) will be operationalizing the PHIS+ database once it's received from the University of Utah. The first few months of 2012 will be dedicated to testing the software, building the necessary architecture and validating the data to get ready for the comparative effectiveness research (CER) projects. The CER project PIs will begin their studies as soon as the appropriate IRB protocols are in place and the data is available to be queried. We anticipate the projects to begin in the spring.

Over the next month the PHIS+ team will be preparing for the second annual in-person meeting in Park City, Utah. The meeting will be held over two days in February and will be used to discuss the status of the project to date and identify next steps for short- and long-term sustainability.

I-PASS: IPE-PRIS Accelerating Safer Signouts

Grant Funding Period: September 21, 2010 - August 31, 2013

This study is examining the effectiveness of a "resident handoff bundle" in accelerating adoption of safer communication practices in nine pediatric hospitals across the US and Canada, and was developed within the PRIS network and endorsed by the Initiative for Innovation in Pediatric Education.

The I-PASS Study Group continues to meet targets in studying the effectiveness of a "resident handoff bundle" to accelerate the adoption of safer communication practices in pediatric hospitals. Baseline data collection has been completed at the first wave of sites, which includes Lucile Packard Children's Hospital

(Palo Alto, CA) and UCSF Benioff Children's Hospital (San Francisco, CA). The second wave of sites - Cincinnati Children's Hospital Medical Center (Cincinnati, OH), St. Louis Children's Hospital (St. Louis, MO), and Primary Children's Medical Center (Salt Lake City, UT) - will complete baseline data collection in December 2011. A third wave of sites - Hospital for Sick Children (Toronto, ON, Canada), St. Christopher's Hospital for Children (Philadelphia, PA), National Capital Consortium (Washington, DC), and Doernbecher Children's Hospital (Portland, OR) began six months of baseline data collection in November 2011. During baseline data collection, trained research nurses and research assistants collect data on patient safety outcomes and resident workflow, work processes, and satisfaction. Initial reports have suggested that research staff have collected an expected number of medical errors and that there were remarkably high response rates (90%+) to resident surveys.

Post-intervention data collection will begin at the first wave of sites in January 2012. The team training intervention and other aspects of the resident handoff bundle have been implemented at these sites during the six-month wash-in period that began in June 2011. To this end, representatives from all sites have been deeply involved in developing a team training intervention which features a verbal mnemonic, printed handoff tool, and drawing on key aspects of the *TeamSTEPPS*TM program developed jointly by the Department of Defense and the Agency for Healthcare Research and Quality. Study working groups are participating in weekly teleconferences to coordinate implementation of the study protocol, plan for data analysis and validation, and various aspects of the curriculum. Preliminary dissemination efforts are underway, including workshop and plenary presentations at the 2012 Pediatric Academic Societies meeting and an article in *Pediatrics* which will be published early in the new year.

In the coming months, implementation of the resident handoff bundle intervention will continue and post-intervention data collection will begin, coincident with ongoing data analysis and dissemination activities.

Submitted by
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Liaisons

Council of Academic Societies (CAS)

The CAS is undergoing a review of its organizational structure to be more effective in representing faculty as the AAMC plans programs and policies. Presently faculty is represented through their society members of CAS but some societies do not participate and this mechanism does not allow for the broadest representation of the diversity of the academic faculty by discipline, age, gender, experience, region etc. Under the leadership of the Administrative Board, where I am the present Chair, we are looking to improve the structure so that it can be more representative. It is possible that the dues structure will also be reconsidered. Keep tuned as this is likely to occur within the next year!!

Submitted by
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Regions

Region I

You've saved the date, you've managed to wait, now here it is!

REGION I APA MEETING
"Where's the Evidence?"

Friday March 2, 2012, 8:30am-3:30pm
Publick House, Sturbridge MA

featuring:

Keynote Speaker

Anand Sekaran

From Evidence to Excellence: How Standardized Tools can Improve the Way We Practice
Dr. Sekaran is an academic pediatric hospitalist at Connecticut Children's Medical Center. His roles include: the Medical Director of Inpatient Services, Division Head of Pediatric Hospital Medicine, and co-chair of the Clinical Council, a group which reviews standardized tools of practice.

&

APA NATIONAL UPDATE:

Benard Dreyer

as well as:

***ABSTRACT PRESENTATION SESSION,
A FUN AND WORTHWHILE WORKSHOP,
FRIENDLY DISCUSSION,
and FOOD!***

Registration forms will be sent to you via listserv....
Meanwhile, stir up some excitement and prepare your abstracts -

ABSTRACT SUBMISSION GUIDELINES:

- Abstract text must fit on one 8 1/2 by 11 sheet of paper, using one inch margins and 12 point Arial font. One additional table or figure is allowed and may be positioned on an additional sheet.
- Abstracts should include: Title, Author(s) names/affiliations, Background, Purpose, Methods, Results, Conclusion.
- Submit to ada.fenick@yale.edu.
- You will receive notification of presentation by Feb 15th.

HOPING TO SEE YOU ALL THERE

-- Melissa, Marcia, & Ada

Region Co-Chairs:

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Melissa Held

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Marcia VanVleet
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Region II & III

Save the date! The joint APA Region II and III meeting will be held March 9th at Weill Cornell Medical College in NYC. Dr. Jane Aronson, founder and CEO of the Worldwide Orphans Foundation, will deliver the keynote address, and workshop topics will include Grant Writing, Bullying Awareness, and Clinical Reasoning. Abstracts from region members will be presented in poster and platform formats. We hope to see you there!

Region Co-Chairs:
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Carrin Schottler-Thal
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Region IV

Hello Region 4 APA members!

Register soon for our annual Region IV APA Meeting, February 25-26, 2012 at the Omni Hotel in Charlottesville, VA.

We have some great speakers lined up, including:

Dr. Benard Dreyer, APA President, will give an update on the Academic Pediatric Association activities.

Dr. Chuck Willson will deliver a keynote address on Medical Homes for Children with Complex Medical Needs.

Bob Hall, Assistant Director of the AAP Washington Office, is returning this year to update us on the progress and challenges to health care reform and child health policy in DC.

Our popular Meet the Professors Breakfast provides an opportunity to talk in small groups with senior faculty from the region about a variety of topics.

Hear about research across the region, participate in a workshop, and learn about resident QI projects. APA membership is not required to attend our conference - everyone is welcome!

Use our online Meeting Registration Form to register:
<https://www.degnon.org/secure/apa/region4meeting12/index.cfm>

Attendees who take advantage of this inexpensive rate help keep the overall cost of the conference down. Hotel information is available at <http://www.omnihotels.com/FindAHotel/Charlottesville.aspx>

We are hopeful that every program in the region will have faculty and trainees at the program and share in this terrific opportunity to network, learn and share all the incredible things that are going on in Region IV.

We look forward to seeing you!

2012 APA Region IV Meeting Planning Committee

Martha Hellems (Meeting Co-Chair)

Colleen Kraft (Meeting Co-Chair)

Rachel Dodge (Region IV Co-Chair)

Mike Steiner (Region IV Co-Chair)

John Olsson

Region Co-Chairs:

Rachel Dodge

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Mike Steiner

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Region V

Academic Pediatric Association - Region V Regional Meeting
March 2nd & 3rd, 2012
Riley Outpatient Center at Riley Hospital for Children

Register online: <http://www.degnon.org/secure/apa/region5meeting12/index.cfm>

Friday, March 2nd

12:00 pm	Registration/Lunch	
12:45 pm	Welcome and Introductions	Conference Room A
	Michael McKenna and Allison Brindle APA Region V Regional Co-chairs	
	D. Wade Clapp Chairman, Department of Pediatrics Indiana University School of Medicine	
	Benard Dreyer APA President, Professor of Pediatrics, New York University	
1:30 pm	Medical Home Christopher Stille	Conference Room A
2:30 pm	Career Development Dr. Emily Walvoord	Conference Room A
3:30 pm	Break	
3:45 pm	The APA and You Michael McKenna,	Conference Room A
4:15 pm	Quality Improvement - Simple Solutions with Significant Impact Kimberly Giuliano	

5:15 pm Trainee Abstract Symposium - Poster Session

6:00 pm Trainee Abstract Award Winners - Oral Presentations

Academic Pediatric Association - Region V Regional Meeting

Saturday, March 3rd

8:00 am	Business Meeting and Breakfast Michael McKenna	Conference Room A
9:00 am	New AAP UTI Guidelines S. Maria Finnell	
10:00 am	Break	
10:15 am	Patient Safety - A Resident Curriculum Jeri Kessenich	
11:15 am	From Child to Adult: Transitioning Care Mary Ciccarelli	
12:15 pm	Wrap-up Box Lunch	
1:00 pm	Optional Tours of Indiana University School of Medicine and Riley Hospital for Children	

Region Co-Chairs:

Allison Brindle

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Michael McKenna

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Region VI

Happy Leap Year Region 6 Members!

As we are feverishly preparing for the Region 6 Virtual Meeting to be held via WebEx (available online, as a download for your PC/MAC, and on your iDevice) from 9:00 AM to 12:00 PM on March 10th, we wanted to share with you some tips, tricks, and thoughts about the process.

Please visit www.webex.com and look around to learn information about the service prior to its use at the meeting. Alternatively, you can go to http://www.webex.com/go/us_quick_tour to view a brief overview of the service. At least being oriented to the software will be a great head start.

We have discovered that you can attend a meeting, present, share your video, and share your audio all from a Windows or MAC desktop/laptop with fair ease, although you may get superior audio quality by using a landline telephone to connect to the audio. Individuals who will need to present or share their desktop will have better video performance when using an Ethernet connection to their desktop or a strong WiFi signal to connect a laptop. While handy and functional, iDevices appear limited to viewing and sharing video, but are unable to share content (presentations) to others; they can also be used with the "chat" feature, but you are unable to "raise your hand" to ask questions during a Q&A period.

While we can have as many connections to the server (connected devices) as needed, any connections over

25 will incur a cost. Children's Mercy Hospital (the hosting site) has offered to defray that cost, but we would like to minimize that need. To do so, please consider setting up "Virtual Meeting Parties" in your home or using your campus facilities to get larger groups together in one location (one connection). If you so desire, during the last week of February, there will likely be an opportunity for people to log into a scheduled meeting to test connections, etc. It will likely just require a few minutes of your time just to check out the capabilities listed above. Sharon Wilkerson will host the meeting over several hours and you may just log in and chat with her for a few minutes. We will send those dates and times out via the listserv closer to that time.

I hope you find this information helpful and we look forward to seeing you on March 10th, when we will have the Virtual Meeting, see those vying for the trainee travel award, and announce the new Region 6 Co-Chair.

Region Co-Chairs:

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Charlie Gaebler-Uhing

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Sharon Wilkerson

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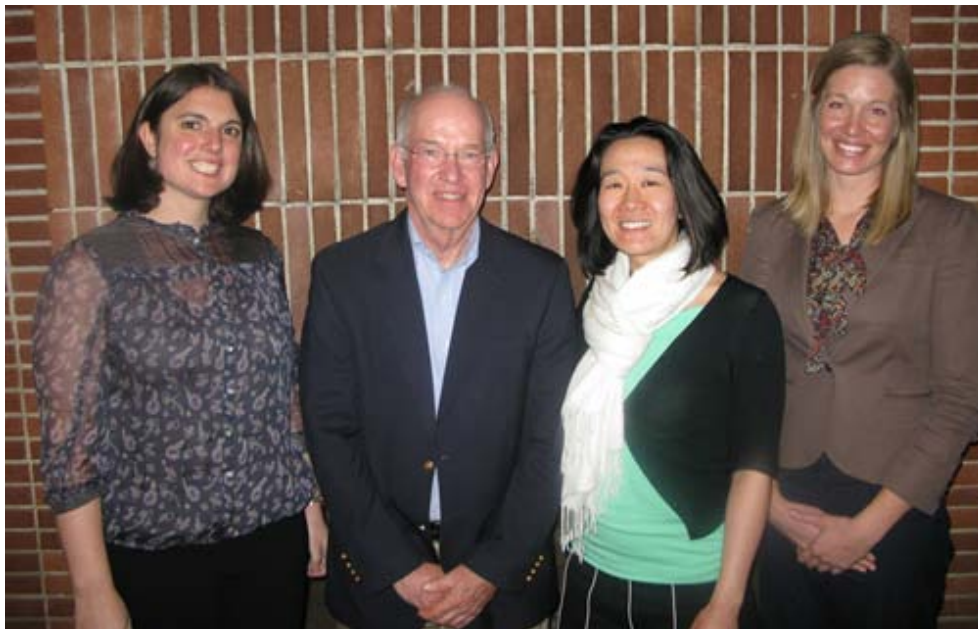
Region IX & X

We had a successful 2-day expanded meeting format this year with 52 attendees and a fantastic mix of trainees and faculty leadership. In addition to featuring nine oral research presentations and 20 poster presentations, our key note speaker, Shale Wong, inspired us all. Dr. Wong shared her experiences and key lessons learned during her two years as a Robert Wood Johnson Health Policy Fellow through which she worked in First Lady Michelle Obama's office on the "Let's Move" campaign. The second day of the meeting featured evidence-based medicine workshops by senior members, Thomas B. Newman and Paul C. Young.



*Region IX-X Community, Advocacy, Research and Education (CARE) Conference
Naval Postgraduate School, Monterey, CA*

We are extremely pleased to announce the three awardees of the Paul Young Travel Award to use toward attending the PAS meetings in Boston this year. They will share their outstanding presentations at our regional breakfast on Monday April 30th at 7am at the PAS meeting. Travel award recipients are: Katherine Osborn, a 4th year medical student from the University of Utah, Clinical scoring for Neonatal Abstinence Syndrome (NAS): Is there a simpler way; Mimi Choi, a 3rd year UCSF Pediatric Leadership for the Underserved resident, MotivateMe: A School-Based Motivational Interview Protocol to Address Obesity in Adolescents; and, Amy Beck, a UCSF general pediatric fellow, Trends in Sugar-Sweetened Beverage and 100% Fruit Juice Consumption Among California Children: 2003-2009.



Region IX-X Young Investigator Travel Awardees: Amy Beck, Fellow, UCSF; Mimi Choi, PGY-3, UCSF; Katherine Osborn, 4th year medical student, University of Utah with Paul C. Young, APA Member.

Other important news: Christine Johnson's term as Region Co-Chair for Region IX ends in May 2012. We are grateful for her service. If you are interested in being considered for Region Co-chair, please let one of us know by March 1st.

Thank you to all of our attendees. Please email us any feedback to help improve future meetings. If you did not attend, we look forward to seeing you at next year's regional meeting and welcome your suggestions to enhance our meeting.

Region IX Co-Chairs:

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Christine Johnson

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Region X Co-Chairs:

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Dean Sidelinger

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Special Interest Groups

Academic Fellows

The Academic Fellows SIG has been on the move expanding opportunities for fellow involvement in the APA. We have three new liaisons representing fellows' perspectives on task forces and committees, in addition to a newly formed Executive Committee to guide the SIG's agenda forward. In addition, any SIG member is welcome to participate in the Executive Committee by contacting Sara Slovin (sara.slovin@gmail.com) or Tracey Wilkinson (tracey.wilkinson@bmc.org).

Liaison Updates:

- The Mentorship Task Force has put together a fantastic speed-mentoring program, which will take place during PAS. Many SIG members will be participating and Melissa Cellini serves as the liaison for our SIG.
- The Career and Professional Development Task Force will be working to enhance fellows' transition to junior faculty. Candice Taylor Lucas represents fellows on this recently established Task Force.
- The Academic General Pediatric Accreditation Committee (AGPAC) is designed to strengthen fellowship training in Academic General Pediatrics. James Feinstein is our SIG's liaison to the AGPAC, which has accredited 11 programs since 2009.

The Academic Fellows SIG would like to thank Dr. Benard Dreyer for helping organize a Mentored PAS Abstract Review, in addition to all the faculty who volunteered as mentors. Ten fellows had the opportunity to participate in this pilot program, which received a lot of positive feedback and encouraged participants to serve as independent abstract reviewers in the future. We hope to expand this pilot program next year and are very appreciative of all the APA support to facilitate its success.

We are very excited about the progress the Academic Fellows SIG has made in the year since its inception and are eager to have new members become involved. All academic fellows and young faculty less than three years out of fellowship are encouraged to join. In addition, we are working on an exciting agenda for our PAS 2012 SIG meeting on Sunday, April 29th from 12-3pm that will include a session on how to negotiate the contract for your first job and an interactive discussion addressing how to serve the interests of academic fellows and young faculty moving forward.

SIG Co-Chairs

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Continuity

The planning continues for a great Continuity SIG meeting in Boston. Mark your calendars for our meeting on Sunday, April 29, from 8-11. Please remember that we plan on increasing the opportunities for discussion with two break-out sessions. The first is to tackle continuity issues with respect to the possible revisions of the RRC guidelines. The second will be for Cwick Conti Consults, a chance to problem solve your continuity

dilemmas with other experienced continuity directors. We will have more details in the April newsletter.

The Continuity SIG and CORNET have collaborated on a Special Grants submission to the APPD. This would help launch the SIG study on determining the effect of the ACGME changes on the level of continuity over time. We are looking for funding to support a site for organizing the study (APA/CORNET headquarters) and a site for collecting and analyzing data (Oklahoma). Thanks to Paul Darden, Susan Feigelman, and Lynn Garfunkel for putting the grant together. We will be sending out additional information and an IRB template in February.

See you in Boston!

SIG Chair
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E-Learning in Medical Education

Webinar Cast Light on Community-Based Learning Activities in Online Medical Education

Jennifer McVay-Dyche, Director of Distance Education at Southern Oregon University in Ashland, Oregon, led a webinar on Thursday, January 26 on the topic of Using Community-Based Learning Activities in Online Medical Education. Here is the summary of Jennifer's presentation:

Community-based learning (CBL) strategies provide learners with opportunities to work and learn with a community partner to develop a deeper awareness of local issues as well as to engage in real-world application of course theories. CBL was introduced as a pedagogical approach in 1982 when Harvard University's Derek Bok proposed the changing of higher education's social responsibility and suggested a shifting of focus toward community service. Since then, CBL has become an important part of curricula in educational programs around the United States because it supports the service component in numerous institutional missions. CBL is an ideal tool for medical education as it moves beyond the traditional lecture hall or clinical setting and into the local community, exposing learners to real problems, real situations, and real people. The benefits to learners include opportunities to (a) observe disease progression in the patients' environment; (b) develop and participate in disease prevention and awareness campaigns; and (c) address health disparities; and (d) build leadership skills. The relationships that evolve from community-based learning benefit our learners, our institutions, and our local communities.

Can we actually support community-based learning online? Absolutely! One of the critical components of CBL is reflection on the learning experience as it applies to course concepts. The World Wide Web offers numerous tools to help facilitate reflective practices in learners: discussion boards, wikis and blogs, audio and video production software, online journaling, and web conferencing systems. Many of these tools are available in course management systems (CMS) such as Blackboard, Moodle, or Sakai, but you can also draw from many cloud-based, low-cost services if your institution does not have a CMS. What's holding you back? With 24/7 access to communication tools that are well-suited for supporting reflection, there's no better time to start thinking about how you can move your teaching outside of the lecture hall or clinical setting and into your local community.

Note: If you were not able to attend this webinar, you can still view the presentation on our e-Learning SIG wiki <http://elearningsig.pbworks.com/>.

Co-Chair in Training

Michal Cidon has just joined us and will be trained to take over the Co-Chair position as of 2013 replacing

Heidi Saliba who will be stepping down to focus on her pursuit of a graduate degree in Global Strategic Communication.

Dr. Cidon is an instructor of pediatric rheumatology and general pediatrics at Lucile Packard Children's Hospital at Stanford. She received a B.A. from Brandeis University. Prior to her medical school training in the Technion-Israel's Institute of Technology, she received an M.C.R.P in urban planning with a focus on environmental health policy. Subsequently, she completed her pediatric residency training and chief residency at University of Medicine and Dentistry of New Jersey as well as fellowship training in pediatric Rheumatology at Lucile Packard Children's Hospital. Currently, she pursues a Master's Degree in medical education at Cincinnati Children's Medical Center. In addition, she is an APA Educational Scholar and a participant in the Bone and Joint Decade Program.

Dr. Cidon supervises the educational activities of residents and fellows within the pediatric rheumatology division at Stanford. Her research is connected to her longstanding interest to teach the clinical management of complex pediatric chronic illness to residents. During her clinical fellowship, she focused on developing instructional methods to enhance general pediatricians' familiarity and management of pediatric rheumatologic illnesses. As a faculty member in the Division of Rheumatology, her current research has shifted to explore how online teaching-learning experiences translate into web-delivered evidence of learner competence.

She is the recipient of the 2012 American College of Rheumatology Clinician Scholar Educator Award. Her research focuses on developing a web-based tool (Web-based Learning Portfolios) which teaches clinical reasoning in pediatric rheumatology by utilizing curriculum-embedded formative assessments. Formative assessments are known for their application during the learning process but little is known about their role in the teaching-learning process when they are strategically placed at "junctures" (key areas to attain mastery of a sub-goal) within the medical curriculum.

Agenda for 2012 e-Learning SIG

The 2012 PAS meeting is not far away, and we are trying to finalize the program by selecting the presenters and organizing the agenda. Our meeting is scheduled for Saturday, April 28 at 8:30-11:30am. Just like previous years we will feature a variety of speakers and topics whose message content offers enrichment opportunities across all spectrums of the e-Learning field. Let us announce one of the presentations in this newsletter. Edward Sepe from Children's Pediatricians and Associates at Foggy Bottom, Washington, DC will be presenting his e-learning initiative. His presentation is titled "Virtual Learning Communities: Implementing OnLine Learning Collaboration in Pediatric Residency."

The objectives and the description of his presentation are below:

Learning Objectives:

1. Describe important considerations for implementation of an online learning tool that incorporates Web 2.0 capabilities
2. Compare and contrast capabilities of Web 2.0 collaborative software with traditional internet based software tools that simply provide storage
3. Identify potential uses for collaborative user centered interfaces, such as Wikis, Blogs, and Forums, in a residency learning environment

Description: In July of 2011, our residency program implemented an on-line learning community. It provided us with a platform that incorporates Web 2.0 capabilities (such as information sharing, user-centered design, social networking, and collaboration) on top of traditional on-line data storage for curricular documents. We will present important considerations for thoughtful implementation of a collaborative system in a pediatric residency program to help avoid low user adoption of yet another piece of software.

Two Exciting News Items from the University of Florida

New UF Master's Degree Program: The University of Florida has established a new master's degree program geared toward helping physicians be better teachers and training them to be scholars in the field. To learn more, please click on the following link: <http://goo.gl/pswvs>

Digital Health Communication Extravaganza: The University of Florida is having a conference on digital health communication on February 15-17, 2012 at Peabody Orlando Hotel Orlando, FL. To learn more, please click on the following link: <http://conferences.dce.ufl.edu/dhcx/default.aspx?page=895>

SIG Co-Chairs:

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Heidi Saliba

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Ethics

Dear Ethics SIG members,

We are excited for our meeting in Boston!

Our meeting is scheduled for April 28, 2012, 2:45-4:45. Room number has not been announced yet.

Here is our agenda:

2:45-3:00: -Introductions

-Announcements of first APA Ethics SIG essay contest winners

3:00-4:15: -"*Ethical issues surrounding interventions for infants with Trisomy 13 & 18*"-panel discussion

-*Annie Janvier*, M.D., Ph. D., Associate Professor of Pediatrics, Neonatologist, and Clinical Ethicist, *University of Montreal, and Hospital Saint Justine, Montreal, Quebec, Canada*

-*Felix Okah*, MD, MS, Professor Pediatrics, Children's Mercy Hospital, Kansas City, MO

-*Barbara Farlow*, BS, MBA, deVeber Institute for Bioethics and Social Research (Advisor), Toronto, Ontario

4:15-4:45: -"*Not by the Book: Complexities in Palliative Care for Adolescents*" Jennifer Linebarger, MD,

Assistant Professor Pediatrics, Children's Mercy Hospital, Kansas City, MO

Look forward to seeing you again in Boston!

Warmest wishes!

SIG Co-Chairs:

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Evidence-Based Pediatrics

This year at the annual PAS meeting in Boston, on Sunday, April 29 from noon to 2 p.m. the EBP SIG will have a session devoted to the teaching of EBM in training programs. This format was highly rated last year and members have asked we continue the tradition. There will be a variety of presentations of successful teaching tips and methods used by faculty across the country to teach EBM to medical students and

residents. Topics include using small groups to teach EBM, teaching pearls for teaching EBM statistics, and using iPads to bring EBM to the bedside. We will also review the on-line EBM resources we have compiled and set an agenda for the upcoming year.

Save the date and plan to join us!

SIG Co-Chairs:

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Health Literacy

Health Literacy continues to be an important theme for efforts by federal agencies to improve health and health care. See the recent article in Health Affairs by Howard Koh, Deputy Director of US Department of Health and Human Services: "New Federal Policy Initiatives To Boost Health Literacy Can Help The Nation Move Beyond The Cycle Of Costly 'Crisis Care'" (Health Affairs 2012; 31(2).)

Consideration of health literacy principles as part of federal public health campaigns is one way to help increase the effectiveness and reach of health messages. Last year, APA Health Literacy SIG members provided advice to the CDC as they developed materials for their "Up and Away" campaign to prevent unintentional medication ingestions. Each year, over 60,000 children are taken to emergency rooms due to unintentional medication ingestions. Data from the CDC suggest that many children get into medicine because adults forget to close the child-resistant packaging and put medicine up and away and out of children's sight and reach.



As a result of a recommendation from the APA Health Literacy SIG, the APA joined the CDC's recently launched "Up and Away and Out of Sight" campaign (<http://www.upandaway.org/>) as a Program Partner in December 2011. The "Up and Away" educational program is part of a larger public-private partnership, called the PROTECT (Prevention of Overdoses & Treatment Errors in Children Taskforce) Initiative (www.cdc.gov/MedicationSafety/protect/protect_initiative.html), which aims to reduce unintentional medication overdoses in children. In addition to the APA, other partners in the campaign include the US Consumer Product Safety Commission, US Food and Drug Administration, the Consumer Healthcare Products Association, American Association of Poison Control Centers, Institute for Safe Medication Practices, National Consumers League, American Academy of Family Physicians, and the American College of Preventive Medicine.

SIG Co-Chairs:

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Hospital Medicine

Announcements

Three prominent pediatric hospitalist pioneers have recently been named to important new positions. Jeff Sperring, former SIG co-chair, is now the CEO of Riley Children's Hospital in Indianapolis. Mary Ottolini was named as a representative to CoPS, the committee addressing the future of fellowship training across all disciplines in pediatrics. APA President, Benard Dreyer, was instrumental in getting pediatric hospital medicine representation on this committee. Dan Rauch has been named to the APA Nominating Committee. Congratulations to all three and thank-you for your continued service to our field.

Pediatric Academic Societies (PAS) meeting 2012 Boston

This year's PAS meeting will be held in Boston, Massachusetts from Saturday, April 28th through Tuesday, May 1st, 2012. The SIG meeting is scheduled for Sunday, April 29th from 12:00 - 3:00 pm. We have a busy agenda planned and look forward to seeing you there. We will hear updates from key groups including the STP committee, VIP-QUINN network, PRIS network, and the education taskforce. Those running for election as a SIG Co-chair will briefly introduce themselves and their motivation for wanting to serve (see below for more details.). We will conclude with a panel discussion with editors from several key pediatric and hospital medicine journals to learn more about what types of hospital medicine research they are interested in publishing. In addition, look for a new hospital medicine opportunity at PAS: the AAP SOHM is sponsoring a Hospital Medicine Club meeting on Monday, April 30th.

Call for Hospital Medicine Co-Chair Nominations!!!

We are currently accepting nominations for the position of Co-Chair of the Academic Pediatric Association (APA) Special Interest Group (SIG) for Hospital Medicine. The available position is one of three Co-Chairs to serve a three year term. Core duties include planning and leading SIG activities at the Pediatric Academic Societies meeting annually in May, as well as managing ongoing communication with the pediatric hospital medicine community and the APA. SIG Co-Chairs will also be eligible to represent the APA in the planning of the annual Pediatric Hospital Medicine meeting as well as the Joint Council of Pediatric Hospital Medicine (JCPHM). The JCPHM's core mission is to coordinate the advocacy activities for our field and those practicing in it.

As outlined at the May 2011 SIG meeting, we are initiating an election process for the SIG Co-Chair position. One Co-Chair position will be up for election each year. Elected Co-Chairs will be limited to two consecutive three-year terms. This mechanism is intended to provide true representation, while allowing for both continuity and the infusion of new ideas. Hospitalists will be eligible to vote if they are active members of the APA and self-identified members of the Hospital Medicine SIG. If you are a member of the APA, please be sure you are signed up for the Hospital Medicine SIG. Send Jennifer Padilla (Jennifer@academicpeds.org) an email to be sure you are on the SIG roster. We will be using the SIG roster to send out information about the election and our ballot soon. Be sure you are included! The APA has set up a SIG listserv to facilitate this communication. The intent is to efficiently provide SIG members with information. If you are on the SIG roster you will get instructions on how the new listserv works via email.

Candidates themselves must also be members of the APA in good standing and have self-identified themselves as members of the Hospital Medicine SIG. Prospective candidates should include the following in their submission:

1. A 150 word biography

2. A position statement including the candidate's credentials and their ideas on how they plan to promote the mission of the APA within the hospitalist community (250 words or less)

Submissions should be forwarded to Doug Thompson via email at ethompso@drexelmed.edu by Friday, March 16, 2012.

Prior to PAS bios and statements will be available for SIG members to review via a web platform and voting will conclude several weeks after PAS. More details will follow via the SIG listserv.

Pediatric Hospital Medicine (PHM) 2012 Cincinnati: The Future of Hospitalized Children Is In Our Hands

The PHM 2012 meeting will be held July 19-22, 2012 in Cincinnati. Workshop and research abstract calls have closed, but call for clinical conundrums remains open. See link to PHM website on APA SIG page for more details. The meeting looks to once again be a great opportunity to network and learn from a broad array of workshops and didactic sessions. The theme of accreditation of our specialty will be prominent throughout the meeting, and both our opening and closing keynote speakers will address this issue from the perspective of the internal medicine experience and the ACGME's evolving view of pediatric training.

The APA will also be sponsoring a Leadership Precourse immediately prior to the main Pediatric Hospital Medicine meeting. The meeting content is being developed to meet the needs and interests of the hospitalist community. Please mark your calendars now and plan on attending from July 18-19, 2012!

APA Hospital Medicine SIG Website

Our SIG website includes links to the Joint Council governance document, the free html version of the PHM Core Competencies, PRIS and the VIP Network. Stay tuned - we will be posting a summary of the STP Committee's analysis of potential future pathways for pediatric hospital medicine a working version becomes available. Check it out at

http://www.academicpeds.org/specialInterestGroups/sig_inpatient_med.cfm .

Important dates to remember

February 13-16, 2012: SHM Leadership Academy in New Orleans, LA

April 1-4, 2012: Hospital Medicine 2012 in San Diego, CA

April 28-May 1, 2012: PAS 2012 in Boston, MA

July 18-19, 2012: APA Leadership Precourse in Cincinnati, OH

July 19-22, 2012: PHM 2012 in Cincinnati, OH

Please take advantage of these opportunities for personal professional growth and to contribute to advancements in Pediatric Hospital Medicine.

SIG Co-Chairs:

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Tamara Simon

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Doug Thompson

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Newborn Nursery

We are busy planning a full agenda for the Newborn SIG meeting which will be Sunday April 29th at 8 am. Come prepared to enjoy networking with colleagues from around the nation and hear updates about exciting ventures of the SIG like participation with the National Child & Maternal Health Educational Program and the Better Outcomes through Research in Newborn Nurseries Network.

Are you frequently looking for key resources on core curriculum topics? Would you like to become more involved with the SIG? Then you will not want to miss the SIG educational resource page discussion. Come with your ideas ready to discuss how to best implement this important resource.

Finally, we look forward to a keynote clinical update on Safe Sleep & Infant Falls in the Nursery.

We look forward to seeing you in April! If you have questions or comments regarding the upcoming SIG meeting, please contact us.

SIG Co-Chairs:

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Terry Wall

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Obesity

Please join us for the Obesity SIG, "Educating Trainees in Childhood Obesity Prevention, Management and Advocacy" on Sunday, April 29th from 12-3 pm. We have an exciting lineup of speakers and topics!

Welcome and introductions: Sandy Hassink and Sarah Hampl SIG co-chairs

Fit for Residents Curriculum Project: Update and Future Directions: Wendelin Slusser, Mattel Children's Hospital/UCLA

HOPE - An Opportunity for Education and Intervention: Jeannie Huang, Rady Children's Hospital/University of CA-San Diego

Brief Motivational Interviewing for BMI (BMI:4:BMI) Curriculum: Motivational Interviewing Tailored for Weight Management: Karen Dorsey, Ada Fenick, Yale University School of Medicine

Everyone Swims: Resident Advocacy for Obesity Prevention: H. Mollie Grow, Kristin Kan, Faisal Malik, Seattle Children's Hospital

Residents Give Parents the GreenLight to prevent Obesity in the First Two Years of Life: A Literacy and Numeracy Approach: Eliana Perrin, UNC Chapel Hill School of Medicine

SIG Co-Chairs:

Sarah Hampl

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Sandra Hassink

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Pediatric Clinical Research Network

The Pediatric Clinical Research Networks Special Interest Group (PCRN SIG) will be meeting at PAS from 8:30-11:30 on Monday, April 30th. The PCRN SIG is a forum for PAS members who either are involved in or are planning to establish clinical research networks (defined as enduring multi-site clinical research collaborations). Representatives of a diverse group of primary care (practice-based research networks or PBRNs), specialist, and disease-specific networks meet to discuss common challenges and potential solutions to those challenges, hear updates on innovations, and offer consultation to those planning or launching new networks.

In addition to the usual updated on network activities, this meeting will feature a presentation by Anne Junker, MD, FRCPC of the University of British Columbia and the BC Children's Hospital. Dr Junker is Director of Canada's Maternal, Infant, Child and Youth Research Network (MICRYN), which links 17 participating academic health centers and hundreds of investigation teams across Canada, including over 200 clinical research networks! We look forward to seeing both new and experienced network researchers on the morning of April 30th.

SIG Co-Chair:

Mort Wasserman

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Simulation-based Medical Education

The APA Approves a New Special Interest Group on Simulation-based Medical Education

Introduction:

Simulation-based medical education (SBME) is a training method in which learners practice tasks and processes using models or virtual reality, with feedback in order to improve skills. SBME allows individuals to review and practice procedures and skills as often as required to reach proficiency without harming patients. The use of SBME has been referred to as an 'ethical imperative.' In recent years there has been a huge surge of interest and research in the use of SBME in pediatrics. Given its increasing importance in pediatric medical education we felt it was important to propose a new APA Special Interest Group (SIG) on Simulation-based Medical Education.

The initial proposal was submitted to the APA Chair of Workshops and SIGs on November 8, 2011. The proposal was discussed and unanimously approved by the APA Board of Directors on November 15, 2011. The APA SIG on SBME defines SBME to encompass a wide range of training methodologies including: standardized patients, task trainers, mannequins/patient simulators and computer-based/virtual reality simulation. The APA SIG on SBME is proposed to promulgate the use of SBME within the academic pediatric community and to improve the quality of SBME in pediatrics.

SIG on SBME Mission and Vision:

The APA SIG on SBME is a forum for pediatric educators with an interest in the use of simulation to facilitate teaching and learning. With support from the APA, the SIG will provide an opportunity for APA members to network, share ideas, resources, and experiences in the development and use of simulation in pediatric medical education. The SIG will enable members to keep up to date with national simulation initiatives and potential funding opportunities as well as provide support, help, and advice on the effective design,

development and evaluation of SBME initiatives. Annual meetings will take place at the APA annual conference, and on-demand meetings will be conducted via teleconference.

SIG on SBME Goals:

The goals of the APA SIG on SBME are to:

- o Provide expertise and training to pediatric educators on effective design, development and evaluation of simulation-based medical education initiatives.
- o Educate APA members and other pediatric educators on the use and benefits of simulation-based learning through conference workshops and meetings.
- o Encourage pediatric educators to take advantage of the benefits of simulation-based training.
- o Establish a sustainable and expanding network of pediatric simulation educators to share knowledge and experience and showcase innovative practices and developments in pediatric simulation.
- o Share the latest developments in medical simulation technologies and ideas on the APA SIG on SBME listserv.
- o Contribute educational content on medical simulation to the APA Educational Guidelines for Pediatric Residency website.
- o Establish best practice standards for the development of pediatric simulation-based training curricula and encourage research to examine the effectiveness of simulation-based medical education.
- o Keep SIG members abreast of current simulation programs and review national and international developments in simulation-based medical education.

Inaugural SIG on SBME Meeting

The inaugural meeting of the APA SIG on SBME will be held at the Pediatric Academic Society meeting in Boston on Tuesday May 1, 2012 from 8:30-11:30 AM. Prior to the initial meeting we will be conducting an email-based needs assessment of the SIG members. The results of the needs assessment will be discussed at the meeting in order to maximize the benefits of SIG membership. In addition to the needs assessment review, there will be several outstanding presentations at the inaugural meeting. These include presentations from simulation societies, like the Society for Simulation in Healthcare (SSiH), the International Pediatric Simulation Society (IPSS), and the U.S. Army Central Simulation Committee (CSC). Also, the newly formed International Network for Simulation-Based Pediatric Innovation Research and Education (INSPIRE) collaboration will be discussed. We are sure that the meeting will be insightful and productive to any APA member with an interest in SBME. We encourage APA members to contact the SIG Co-Chairs if they are interested in joining this new and exciting SIG.

SIG Co-Chairs:

Taylor L. Sawyer

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Marc Auerbach

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Announcements

Award Winners

Congratulations to all the Award Winners

Health Care Delivery Award: John Cowden, MD

International Health Research Award: Prithi Inamdar, MD

Miller Sarkin Award: Fred Rivara, MD, MPH

Research Award: Glenn Flores, MD

Teaching Program Award: Office of Pediatric Medical Education at Duke University Medical Center
Program Directors: Kathleen A. McGann, MD and Shari A. Whicker, MD

Public Policy Award: Tina Cheng, MD, MPH

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Calling All Educators

Looking for a New Year's Resolution? Are you searching for ways to help facilitate promotion of your career and establish a national presence in education? Is Educational Scholarship and networking with colleagues something that sounds exciting and rewarding? Then Look No Further - The Educational Guidelines in Residency Education can help you achieve your 2012 goals!

The Educational Guidelines Working Group in collaboration with the Education Committee is looking for volunteers to update or build new resource lists in about 70 topic areas. Topics cover all the typical residency experiences, such as continuity and general inpatient pediatrics, all subspecialty electives, and special learning experiences in areas such as advocacy, public health, or chronic illness (for suggested list of topics [click here](#)).

This is an excellent opportunity to be involved in a highly visible and influential national level project, and also to network with a wonderful group of educators across the medical education continuum. You do not have to be intimately involved in residency education or be an expert in the content area to volunteer (although if you are, do join us!). EG Contributors may sign up for 1-3 resource topic areas. We are seeking eager and willing participants to commit to finding and collating resources for learners and those who teach them. (For job descriptions of Section Editors and Contributors, [click here](#).)

If you are interested in this great networking and scholarly opportunity, please contact Teri Turner at tturner@bcm.edu

Submitted by
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Environmental Health Fellow

The Academic Pediatric Association (APA) held the 10th annual Pediatric Environmental Health (PEH) Scholars retreat on December 9-11 in Reston, VA bringing together fellows in children's environmental health from across the US and Canada. APA initiated the development of PEH fellowships in 2001 and sponsors this retreat each year to create a forum for fellowship training, research education and mentorship that brings together fellows, their mentors, and national leaders in the field of pediatric environmental health. During the retreat, fellows present their research, receive feedback, network and acquire critical academic skills. PEH fellows also learn about policy initiatives affecting children's health as well as new developments in this emerging discipline. This year 12 fellows representing programs based at Mount Sinai Hospital, Children's Hospital, Boston, University of British Columbia, Seattle Children's Hospital and Children's Hospital of Milwaukee attended the retreat, along with their fellowship directors and APA president, Dr. Benard Dreyer. Drs. Robert Wright and Phil Landrigan organized the retreat with superb assistance from Marge Degnon and Jennifer Padilla.



Pediatric Environmental Health Fellows and Friends: (left to right) Abby Fleisch, Emily Moody, Glenys Webster, Kevin Chatham-Stevens, Andrea Deirlein, Cappy Collins, Mana Mann, Manish Arora, Steve Rauch, Sarah Evans, Maitreyi Mazumdar, Marcela Tamayo-Ortiz.

The retreat began with a workshop on Scientific Writing given by James Perrin, Professor of Pediatrics at Harvard Medical School and former editor of *Academic Pediatrics*, and was formally opened by the APA President, Benard Dreyer, MD. Dr. Dreyer welcomed the scholars to the retreat and expressed his admiration for the good work that they are doing in advancing the science of environmental pediatrics. He also agreed that the APA Academic General Pediatric Accreditation Committee (AGPAC) will work with the Fellowship Committee to establish goals and objectives as a concrete step to accrediting the EH Fellowship Programs. Dr. Shanna Swan, Professor of Preventive Medicine, Mount Sinai School of Medicine, gave an illustrative talk on "*Creating Compelling Presentations*" which paid homage to many principles of presentation developed by the late Steve Jobs. That evening Dr. David Michaels, Assistant Secretary of Labor for Occupational Safety

and Health, spoke on: *Translating scientific data into intelligent advocacy on behalf of exposed populations*. This talk highlighted issues surrounding the interface between economics and the environment, and how economic issues drive policy and the interpretation of scientific studies. Much of this talk was a cautionary tale regarding the implications of industry's strategy to "manufacture doubt" about science in order to forestall regulation. The closing keynote address was given by Dr. William Suk, Director, NIEHS Superfund Research Program Director, entitled: *"International Children's Environmental Health."* This was an overview of the critical research needs that exist globally. Dr. Suk noted that globalization has driven issues such as climate change and industrial pollution to the forefront internationally, often times in areas of the world that are ill-equipped to deal with their environmental impacts. In many developing countries, the "unfinished agenda" of eradicating childhood infections is now competing for scarce public health funding with rising rates of non-communicable diseases, such as asthma and neurodevelopmental disorders. Such a situation is in effect producing a double burden of disease. Dr. Suk closed with a presentation of the Barker Hypothesis of fetal origins of adult diseases, presenting the fellows with a challenge, as the true impact of today's environmental contamination may not be evident for decades.

Fellows' presentations of their own research were the true highlight of the retreat. Each fellow gave a 15 minute overview of their ongoing research. The range of research topics was impressively broad and included studies on health disparities, tobacco exposure, asthma incidence, endocrine disruptors such as phthalates, the role of exercise and built environment in obesity prevalence among urban children, pesticides, chemicals and fetal growth, the global burden of environmental diseases, the role of prenatal/childhood lead exposure in adult behaviors, PTSD, obesity, and the role of social stressors as modifiers of chemical toxicity.

Pediatric Environmental Health is growing subspecialty which recognizes the critical role of the environment in shaping health and disease in childhood. The APA established three fellowship programs in Pediatric Environmental Health in Boston, New York City and Washington DC in 2001. Additional programs now exist in Vancouver, Milwaukee and Seattle. The goals of these fellowship programs are to: 1) expose generalist pediatricians to issues in environmental health; 2) educate pediatricians about the biological, social and cultural interactions that occur between children and the environment; 3) increase the quality and quantity of research and teaching in pediatric environmental health and; create a cadre of leaders in this emerging discipline. The programs are closely linked to Hospitals/Universities which have both Pediatric Environmental Health Subspecialty Units (PEHSU) and NIEHS/EPA Centers for Children's Environmental Health. These connections facilitate integration of clinical and research training and provide synergy among various government and Pediatric organizations for which Pediatric Environmental Health Training is a priority.

Submitted by
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Global Health Task Force

The APA Global Health Task Force was launched in October 2010 to provide a forum for communication and collaboration for diverse pediatric academic societies and groups to advance global child health. It responds to the APA Strategic Plan to 'Intensify the APA's efforts in setting the course for achieving child health equity from a national and global perspective'.

The Task Force includes members from the Academic Pediatric Association, the Association of Pediatric Program Directors, American Academy of Pediatrics, the Canadian Pediatric Society, and the Programme for Global Pediatric Research.

The Task Force will host a 3 hour meeting with a focus on faculty development issues on Sunday April 29th

from 9 am until noon. If you are interested in faculty development with regard to global health, please mark your calendar to join us.

More information can be found on the APA website at

<http://www.academicpediatrics.org/leadership/GlobalHealthTaskForce.cfm>

Submitted by

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National Child and Maternal Health Meeting

APA Represented at National Child and Maternal Health Education Program (NCMHEP)
Fourth Coordinating Committee Meeting

It was my privilege to represent the APA at the fourth annual NCMHEP meeting on Tuesday January 24, 2012 at the National Institute of Health. This important activity of the National Institute of Child Health and Human Development (NICHD) brings together key stakeholders to address critical issues to improve outcomes for mothers and babies.

The meeting agenda included in-depth discussions of the current focus topic: Elective deliveries before 39 weeks. The NCMHEP's purpose is to raise awareness that, unless there are complications, birth at or after 39 weeks in the womb improves outcomes for both mothers and babies.

Dr. Triesta Fowler-Lee, Coordinator of NCMHEP, reviewed the current dissemination progress of a "Late Preterm" Medscape educational module developed by this committee. Additionally, we were shown multiple iterations of a new public service video "Is It Worth It" which educates pregnant moms about the risks of elective birth before 39 weeks. Dr. Fowler-Lee sought feedback from all of the participants. We also discussed focus topics for future consideration. A special presentation was made by Dr. James Mills, Senior Investigator with the NICHD. Dr. Mills discussed his recent work on the link between maternal obesity and congenital heart disease.

I appreciate this opportunity extended to me by the APA. I hope to be able to continue my involvement with the NCMHEP during my term as APA Newborn Nursery SIG Co-Chair. It was very valuable to network with and to hear the varied perspectives of the meeting participants. Additional stakeholders at this meeting included representatives from the American Academy of Pediatrics, the American Medical Association, the Pediatric Academic Society, the American College of Obstetricians and Gynecologists, multiple nursing professional organizations, as well as governmental and community groups such as the Indian Health Service, First Candle and The March of Dimes.

Submitted by

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The APA Board of Directors is proud to announce a new faculty development program, the APA Research Scholars Program, which is designed to help APA members interested in enhancing their academic credentials to develop research skills and to plan, implement, and write-up a research project. The mission of the APA Research Scholars Program is to assist pediatric clinician-educators and clinician-researchers in developing themselves as fulfilled faculty members engaged in important and exciting research and to increase the quality and breadth of child health research.

1. Who should apply?

Fellows, junior faculty, and mid-career faculty in general pediatrics, pediatric hospital medicine, child abuse pediatrics, developmental-behavioral pediatrics, pediatric emergency medicine, and other related disciplines who want to increase their research skills, experience a mentored research project, and/or who are trying to define an academic focus in their careers. APA membership is a requirement.

2. What happens?

The APA Research Scholars Program is a 3-year program modeled on the very successful APA Educational Scholars Program and includes:

- o National research mentors, who will be chosen from senior researchers in the US and assigned to each APA Research Scholar. Each scholar will also choose a local mentor, with our help if needed.
- o Monthly webinars and wiki-based interactive sessions that will cover coursework in research design and statistics as well as faculty-facilitated and peer-mentored research-in-progress sessions. Peer-mentoring groups will be constituted based on commonality of research content and/or research methods.
- o PAS full day session that will focus on advanced topics (e.g., using statistics software, use of large datasets) and research-in-progress review; attendance at selected PAS workshops (such qualitative research, manuscript writing, grant writing, reviewing abstracts and manuscripts).
- o Over the 3 years, the scholar will refine her/his research protocol, implement the research project, and end with a completed project submitted for presentation and/or publication.
- o Scholars are expected to complete the full curriculum, including projects, over 3-4 years. Successful scholars will receive a Certificate in Research Scholarship.

3. What are the requirements for completion of the APA Research Scholars Program?

To complete the program and receive a Certificate of Excellence in Research Scholarship, participants will be required to:

- o Enlist the support of your department for the program: Scholars will be expected to commit 10% FTE to the program in order to complete the full curriculum, including projects, over 3 years. A tuition fee of \$5,000 will be charged to all scholars for their three years in the program, due at time of enrollment. An additional application fee of \$50 is charged at the time of submission of the application. Departmental support will also need to include access to statistical software used in the Program (SPSS), and purchase of statistical and research design textbooks. Talk to your Division Director and Chair about this program early on in the application process.
- o Make a commitment to:
 - Attend monthly wiki-based webinars and prepare by doing required assignments
 - Attend PAS each year, including participating in full day session during an extra day at the meeting and attend recommended workshops
 - Conduct a mentored research project: develop the aims and hypotheses, implement it, and present/publish it. Applications to the program must include a project proposal. Program faculty are available for discussion of project ideas prior to application submission, if needed. Projects may be modified after enrollment in the program after discussion with the project mentor and the project monitor and approval of the new topic by the ESP director
 - Scholars are responsible for finding their own local mentors before they apply. If you are unable to do so, program leadership will facilitate connection with a mentor. For assistance in identifying a mentor, contact the APA Office at least one month prior to the application deadline.

4. What is the timeline for the application and when does the program start?

- o Applications will be online on the APA website by late April 2012.
- o Applications will be due September 2012

- o Accepted scholars will be notified November 2012
- o Program starts January 2012

5. Who is leading this program?

The APA Research Scholars Program is sponsored by the Academic Pediatric Association, and is managed by the Academic Pediatric Association's Research Scholars Program Executive Committee, directed by Benard Dreyer (benard.dreyer@nyumc.org)

[Frequently Asked Questions](#)

Submitted by

Benard Dreyer

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Reviews

Environmental Health Review

From J Exposure Sci and Env Epidemiology (2010) 20, 503-515

Indoor airborne fungi and wheeze in the first year of life among a cohort of infants at risk of asthma

Paula F. Rosenbaum, Crawford JA, Anagnost SE, Wang CJK, Hunt A, Anbar RD, Hargrave TE, Hall EG, Liu C, and Abraham JL (From SUNY Upstate Medical University, Syracuse NY)

Mold, common in many communities where flooding, hurricanes, or simply poor repair is the norm, is increasingly becoming a public health concern. A growing body of literature links mold and fungi levels to increases in the frequency of common respiratory conditions, including wheeze and asthma. As we seek to understand the complex interplay of genes and environmental factors that lead to the development of asthma, information about specific mold and fungi agents becomes more important, especially in discussion of prevention efforts.

A recent study conducted by researchers at SUNY Upstate Medical University aimed to elucidate some of these specific agents. Researchers conducted an intensive environmental investigation in the homes of 103 children at risk for developing asthma, given a maternal history of the same. In addition to collecting information about demographic and specific risk factors for wheeze, such as exposure to tobacco smoke in the home, researchers sampled homes for airborne fungi and inspected particulate dust and home conditions. After controlling for season of environmental assessment, known risk factors for wheeze - including exposure to maternal smoking in utero, exposure to smoking at home, and day-care attendance (a surrogate for respiratory infection) - and demographic factors that were confounders, researchers found that high levels of the mold *Penicillium* were significantly associated with wheeze in the first year of life. Researchers also found that dampness, musty odors, and visible mold were not associated with wheeze, although visible mold was associated with the presence of *Penicillium*.

Although this study was limited by a small sample size, these results augment the findings of previous studies that suggest that the presence of mold - specifically, *Penicillium* - contributes to the development of wheeze, and likely in a dose-response relationship. It also suggests that mold levels may be a health concern even in the absence of visible mold, musty odors, and damp conditions.

Submitted by
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