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ACADEMIC PEDIATRIC ASSOCIATION

APA Focus

The Official Newsletter of the Academic Pediatric Association

Volume 48, Issue 5

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Communications Director's Message

Happy fall! Based on feedback from APA members, the APA Focus will no longer have specific issue themes. Newsletter articles and submissions can relate to any of the four pillars of the APA: Education, Research, Public Policy and Advocacy, and Health Care Delivery. We hope you'll be happy with this change! On the social media front, we now have about 300 APA members as Facebook friends. To all APA Facebook Friends - please feel free to post a message on the wall or start a conversation. We realize Facebook is just one social media outlet and we're in the process of exploring other venues for dialogue (such as Twitter or perhaps creating an APA Blog). This topic will be discussed at our upcoming APA Strategic Planning Retreat later this month. I've heard from a few folks expressing interest in joining a new APA Communications Committee. Please let me know if you are interested in joining this fun and 'stress-free' committee (not many committees can offer you this deal). We'll talk about friending, chatting, blogging, tweeting and much more. Just send a quick email to bsolomon@jhmi.edu.



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I wanted to be sure folks have some important upcoming deadlines on their calendars:

APA Election - November 4th, 2011

Young Investigator Awards - November 7th, 2011

New Century Scholars Program - November 15th, 2011

PAS Abstracts - November 17th, 2011

Barry Solomon

Communications Director

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President's Message

That wonderful letter "P".....

For the last few months, I have been seemingly obsessed by, and immersed in, the letter "P", that wonderful letter that stands for so many good things - pediatric(s), prevention, primary care, public policy, patient, parent, professional, play, positive, possible, and peace among others - words that are so important to all of us. What a letter! Of course "P" also stands for poor, poverty, prejudice, pain, panic, pestilence, and poison. So "P" has its duality, its yin and yang. It embodies what we are most *for* and what we are so *against*. Perfect!



"Pediatric(s)", the middle name of our organization and the last name of our journal, is also what the "P" stands for in AAP, APS, SPR, FOPO, PAS, AMSPDC, COMSEP, ABP, CoPS, SDBP, PHM, and PEEAC (pronounced "peace" of course), all organizations, consortia, or conferences that I have been involved with in the last several months. [Did I leave an acronym, or more precisely, an "initialism", of a pediatric organization or conference off this list? Email me if I did] And of course our colleagues at the APPD have figured out how to have two "Ps" in their name, the first for "Pediatrics" and the second ostensibly for "Program", though I suspect also for *emphasis*....pediatrics squared. However, I would like to focus on a few "P" words in addition to pediatric(s), and I have chosen "proud", "protect", "primary care", "professional collaboration", and "planning". Let's start with "proud"....

PROUD

APA Young Investigator Award Program: In mid September, I attended the APA Young Investigator Meeting in Elk Grove Village where our new Young Investigator Awardees who were funded by the Maternal Child Health Bureau (MCHB) Bright futures, the Commonwealth Fund, or Reach Out and Read met with Cynthia Minkovitz, Judy Shaw, Janet Serwint, and me. The meeting was joined by leaders from the AAP (Jon Klein, Fan Tait, and Errol Adlen) as well as Chris DeGraw from MCHB. Although we provided the awardees with several skills session and group discussions, the highlight, for me, was hearing the presentations of the works in progress by each young investigator, and the peer-feedback and peer-advice given by other young investigators to each presenter. I was extremely impressed with the quality of the works in progress, and further impressed with the high level and enthusiastic feedback these young investigators gave to their peers/colleagues. This is a program and a group of young researchers to be proud of! I would be remiss if I didn't mention the names of the young investigators who attended the meeting: Nerissa Bauer, Manny Jimenez, Ray Perry, Marianne San Antonio, Deepa Sekhar, Rashmi Shetgiri, Pooja Tandon, Meghan Treitz, and Katherine Zuckerman. I have seen the future, and it is them!

Pediatric Educational Excellence Across the Continuum (PEEAC) Conference: In early September I also attended the 2nd PEEAC Conference, which we co-sponsor with our colleagues in APPD, COMSEP, and CoPS (Council of Pediatric Subspecialties). This conference brings together pediatric educators who focus on all levels of learners. Although many APA members are involved in research, child advocacy, public policy, and innovations in health care delivery, almost all APA members are educators and are actively involved with medical student, resident, and/or fellowship education as well as faculty development. So the concept of this conference, the continuum of educational excellence, is at the heart of our mission. I had a great time at the meeting. Just being among a group of committed innovative educators was a pleasure in and of itself, reminding me of why I originally stayed in academic pediatrics, and why I still love what I do every day. I was very impressed by the scholarly approach to education that was so strongly demonstrated in the poster session and the workshops I was lucky enough to attend. It was my privilege to represent the APA at PEEAC, and I felt proud of our collaborative role in starting and sustaining this conference, as well as the scholarly and important work of many of our members and colleagues.

PROTECT

The Centers for Disease Control (CDC) PROTECT Initiative - - Prevention of Overdoses & Treatment Errors in Children Taskforce: I represent the APA in the CDC's PROTECT Initiative, which met in Atlanta in late September. The PROTECT Initiative is a collaboration bringing together public health agencies (CDC, FDA and Consumer Protection Agency), private sector companies, professional organizations (including the APA), consumer/patient advocates, and academic experts to develop strategies to keep children safe from unintentional medication overdoses. These overdoses include those due to unsupervised children taking medications on their own, as well as those due to parents/caregivers medication administration errors. In addition to my participation, Shonna Yin and Lee Sanders, the co-chairs of the APA Health Literacy SIG are "academic expert" members of PROTECT. PROTECT, under the leadership of Dan Budnitz from the CDC, focuses on over-the-counter (OTC) medications as well as prescription medication (PROTECT-Rx). One of the accomplishments of PROTECT was having Infant Tylenol changed to the same concentration as Children's Tylenol, as well as having a push-in syringe included for the Infant product. Testimony I gave at FDA hearings, based on Shonna Yin's research, concerning the potential for parent medication administration errors leading to overdoses due to the infant product paradoxically having higher concentration than the children's product, was an important factor in helping create this change. PROTECT members are presently working on standardizing measurement of liquid medications to "mL-only" for both OTC and Rx medications. For more information, take a look at the CDC PROTECT website, http://www.cdc.gov/medicationsafety/protect/protect_Initiative.html

PRIMARY CARE

Primary Care Organizations Consortium (PCOC): In early September I attended the semi-annual PCOC meeting in Washington, DC. This consortium brings together primary care organizations from pediatrics (APA, AAP, APPD), internal medicine, family medicine, nurse practitioner and physician assistant professional associations, medical school and medical student organizations, deans of primary care, and others to join with federal government agencies such as AHRQ and HRSA Bureau of Health Professions. PCOC sees as its purpose to advocate for programs and funding for the primary care specialties and professions, as well as to share information regarding educational and health care delivery service programs. Jack Pascoe, a past APA President, chairs the group. PCOC is an opportunity for the APA to work with our colleagues outside of pediatrics in a collaborative way regarding common goals.

PROFESSIONAL COLLABORATION

Overlapping circles of professional collaboration: By now, you may have noticed a theme of overlapping circles of collaboration with other professional organizations. These collaborations allow the APA to create strong educational activities for our members, to have a stronger platform on which to have our voice heard, and to advocate more effectively for children and families, for our members, and for our profession. These important professional collaborations include:

- o Conferences: The Pediatric Academic Societies (PAS) Annual Meeting is the most obvious, and most important, collaboration of our organization. We co-sponsor the meeting with the APS, SPR, and AAP. However, the meeting is further enriched by the many "alliance" organizations that participate as well,

including pediatric subspecialty groups (nephrology, neurology, infectious diseases, neonatology, developmental and behavioral pediatrics, adolescent medicine, endocrinology, and gastroenterology), international pediatric societies, and others (APPD, CTSA Child Health Consortium). In essence, the PAS annual meeting is a grand collaboration of pediatric organizations. And in a recent survey regarding the value of the APA, our members told us that the PAS meeting, including its activities and networking opportunities, was among the most highly valued APA activities. In addition to PAS, there is PEEAC (described above), and the Pediatric Hospitalist Meeting (PHM), which I wrote about in the August newsletter.

- o Consortia, Councils, Federations: I already described our involvement in PCOC (above). The Federation of Pediatric Organizations (FOPO) brings together many pediatric organizations to respond effectively and expeditiously to critical priorities impacting the profession and to try to envision the future of pediatrics and align activity to that vision. In the August newsletter I described the agenda of FOPO and in early October I attended another FOPO meeting to move this agenda forward. One critical issue we responded to, both individually as the APA, and collectively as FOPO, was the new ACGME program requirements revision for pediatrics. If you haven't read our response, follow this link: http://www.academicpeds.org/events/assets/APAResponseto_RC_ACGME.pdf

And for the FOPO response:

http://www.fopo.org/pdf/FOPO_Response_to_RC_for_Pediatrics_August_2011.pdf

In addition to PCOC and FOPO, there is also the Council on Pediatric Subspecialties (CoPS) and the Public Policy Council (PPC-here the letter "P" stands for those other important words, public policy). The APA is an organizational member of CoPS, as well as providing representatives of academic generalists to the CoPS council. CoPS is one of our educational collaborators in the PEEAC conference. More importantly, it networks academic and subspecialty pediatric organizations, with a special focus on pediatric workforce development, curriculum, and job satisfaction. I will be attending a CoPS meeting in October, so stay tuned.

The PPC is the major engine of governmental advocacy for children and families, and the pediatric profession, and includes the efforts of the AAP and its Washington office staff, as well as the APS, SPR, AMSPDC, and ourselves. It allows pediatrics to speak with one voice, and the APA Public Policy and Advocacy Committee is a major force in this council. To find out more about these activities, click on the "APA Advocacy in Action" link on the home page of our website.

Collaboration and Identity. While collaborations bring tremendous benefits, they also lead to the risk of losing our unique organization identity. For example, although most APA members value PAS strongly, some pine for the days when we met ourselves, and are concerned that we get "lost in the crowd". These are my thoughts... First, professional collaboration, like globalization, is here to stay; it is a way of life. Second, we need to strategically use our collaborations to strengthen our organization and better serve our members. And I think we have. At the PPC, we have been able to get our issues on its advocacy agenda and get the support of the entire PPC for those issues, as well as modify the response of the PPC to other issues so as to include our concerns. At FOPO, we have a seat at the table in the contemplation of the future of pediatrics, and our voice is listened to with great respect. The PEEAC collaboration was really a response of educators, many in the APA, to the "bigness" of PAS, and the feeling that there needed to be a separate meeting with a pure focus on education. Our core programs, and activities, like our many SIGs, the Educational Scholars Program, the New Century Scholars, and our Young Investigator Awards, are all strong and strongly identified with the APA. Within our professional collaborations, we sometimes lead from the front, we sometimes lead from behind, but we always lead from our strengths! Building these strong collaborative relationships, I think, is the surest path to the APA developing a more powerful identity in the pediatric community for the organization and for our members. However, please, share *your* thoughts!

PLANNING

This is really a heads-up. At the end of October, the APA Board and key APA members representing the SIGs, Regions, core activities (ESP, YIA, NCS, etc.), member constituencies (young members, existing and budding subspecialties), and colleagues (e.g., APPD and COMSEP) will be meeting for two days for a strategic planning retreat. We last had a strategic planning session five years ago, under the leadership of Clai Dungy (then APA President) and Peter Szilagyi (then APA President-Elect). That retreat led to a better articulation of our mission, vision, and core values, a change in our name, and a strategic plan that has been the blueprint for our organization ever since (and can be found on our website under "About Us"). In

preparation for this upcoming retreat, we sent out a Value of the APA Survey, which many of you responded to, and which will be our guide in discussions at the retreat and in planning for the future. Expect to hear a lot more about our plans for the future of our organization later in the fall. In the meantime, feel free to share any thoughts *you* have with me, or other Board members, directly.

As usual, it is my privilege to be President of this great organization, made great by the character and the accomplishments of its members. I look forward to our continued conversations.

Benard Dreyer
President
Academic Pediatric Association
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President Elect's Message

Reflections on Abraham and Lemonade

I am writing this column on the second day of the Jewish New Year. One of my great personal pleasures is attending community worship services at my synagogue and listening to our amazing rabbi's sermon, which, this year, provided me with the inspiration for this column. She began with the Torah story of Abraham's sacrifice, which is always reread on the New Year. This is the well-known and terrifying story in which God asks Abraham to offer his son Isaac as a sacrifice to prove his devotion. Although Isaac was saved at the last minute, the implications of the event and its repercussions are severe and disturbing. "Sometimes God gives us lemons that cannot be made into lemonade", said our rabbi.



Meanwhile, I have been receiving daily messages from Paul Chung, our wonderful Public Policy Committee Chair, about threats to funding programs important to children's health. Right or wrong, Congress and the Executive have agreed on a mandate to reduce the deficit largely by cutting funding for programs in the "discretionary" part of the budget. They have established a Joint Select Committee on Deficit Reduction (Super committee) with a mandate to propose selective budget reductions. In the absence of an agreement on cuts, there will be an "across the board" reduction. Potential targets include proposed reductions to the NIH budget, and the Title V Maternal and Child Health block grants (affecting local home visitation, therapy, and prenatal care services for vulnerable children). And, just today, I learned that the EMSC (Emergency Medical Services for Children) funding is again threatened because of the House of Representative Appropriations Committee recommendation yesterday to provide no funding for the Affordable Care Act, which includes authorization of the EMSC program. The EMSC program is a small, \$21 million program that funds the Pediatric Emergency Care Applied Research Network (PECARN), and State Partnership Grants and Targeted Issue Grants to improve Emergency Services for Children in the United States.

The recent severe recession, sluggish recovery with high unemployment, and budgetary threats to funding programs of tremendous importance to the health of American children, have, it seems to me, given us more than our share of lemons. As in the case of Abraham, it is sometimes hard to imagine making lemonade. Yet squeeze we must. We learned for example that "in response to tremendous ongoing advocacy efforts by pediatricians and child health advocates, an important victory for children's health was achieved when the U.S. House of Representatives, passed H.R. 1852, the Children's Hospital Graduate Medical Education Support Reauthorization Act of 2011", which would extend the CHGME program through 2016 and authorize funding at \$330 million per year. It must still be passed by the Senate, however. The APA provided strong support for this legislation. In addition, we have co-signed support letters for robust funding for the NIH and for funding the Title V MCH block grants. I trust that when and if the time comes, we will also support funding

the EMSC program.

As we approach our strategic planning retreat, all of us as members of the APA have challenged ourselves to think about the value of the APA and about the value of APA membership. Many of us completed the value of APA survey last spring. Our strong voice for children's health funding in these difficult economic times is, to me, a fabulous example of our value. I cannot imagine working as an academic pediatrician without the APA to give full-throated voice in child health advocacy. And this is only one domain of our work. We make lots of lemonade!

David Jaffe
President Elect
Academic Pediatric Association
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APA New Members

Welcome to all of the new APA Members!

Fahd Ahmad	George L. Foltin	Pariksha Patwari
Sarah Atunah-Jay	Nicole Hackman	Amber Pendleton
Marc Auerbach	Alanna Higgins	Sarah Ronis
Jeffery Bergman	MacKenzie Hillard	Jonathan Sayat
Nicole Chandler	Monique Howard	Mahnoosh Sharifi
Margaret Connolly	Keith J. Loud	Michael Silverstein
Steven Eagle	Elisa Muniz	William Southgate
Angela Ellison	Grant Mussman	Anne Warwick
Richard Engel	Eve Oster	David Wathen
Paul Evans	Amy Pattishall	

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Upcoming Conferences

Pediatric Academic Societies (PAS) 2012

[PAS 2012](#)
April 28 - May 1
The Hynes Convention Center
Boston, Massachusetts

Abstract Submission Deadline
November 17, 2011, 11:59 PM CST



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APA Leadership Meeting 2012

[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

Call for Content Submission Deadline:
October 18th, 2011 5pm EST



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Committees

Education

At the Education Committee meeting in May 2011, we engaged in a brief strategic planning exercise to identify priority initiatives for our committee and its members. In those conversations, three key issues emerged as items to potentially focus our collective energies on over the next year(s): 1) next steps for the Educational Guidelines project; 2) the use of technology for education, faculty development, networking and collaboration; and 3) continued and enhanced engagement with our educational colleagues from pediatric organizations whose focus is on education. In this edition of the newsletter, I want to share with you what has been done and the new opportunities that have been identified through exploration of the topics described above.

1. Updating Resources for the Educational Guidelines for Pediatric Residency-A

Scholarship Opportunity for Educators: with thanks to Teri Turner and the leaders of the Guidelines project.

- [Scholarship Opportunities for Educators: Updating Resources for the Educational Guidelines for Pediatric Residency](#)
 - [Topic Areas for Educational Guidelines' Revised Resources](#)
 - [Job Responsibilities of Educational Guidelines Resource Leaders and Contributors](#)
2. Formation of the Education Committee Technology Workgroup: with appreciation to Donna D'Alessandro and the members of the workgroup. The workgroup has collated information and input about ways in which the education section of the APA website could better serve the needs of our members. They have prepared a report for presentation to the board that includes recommendations to enhance the website by: a) providing a link to resources for personal professional development and for use with learners; and b) providing ways to link pediatric educators that will enhance networking and scholarly collaboration. More to come...
 3. Connection with pediatric educators from other organizations: Conversations have begun to explore ways to share information between organizations and to encourage participation by APA education committee members in projects being done by the Task Forces and workgroups of our colleague organizations. More to come on this topic as well.

Thank you to everyone for your continued interest in shaping the work of our committee. You will continue to see announcements on the list-serve for opportunities to get involved in educational initiatives, projects, and programs-my goal is to have as many people involved as possible. There is lots to do and lots to learn from our work together. Thanks again.

Maryellen Gusic
Education Committee Chair
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Health Care Delivery

Apply Now for the 2012 APA Health Care Delivery Award

The Health Care Delivery Committee encourages applications for the 2012 Health Care Delivery Award. [The application](#) has been revised for 2012 to simplify the process. There are many worthy programs out there (and yours is probably one of them) that don't receive the recognition they deserve. Share your success with the APA membership and become a role model for others. We're looking forward to receiving your application.

Jane Knapp
Health Care Delivery Committee Chair
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Core Activities

CORNET



As we prepare for fall, It is a perfect time to update you on CORNET and all that is happening!

Pediatric Residency Integrated Survey: Mental Health in Primary Care (PRISM-PC). The Principal Investigator for this study is Maya Bunik. This is a two phase study examining the approach to mental health issues from an educational and patient care perspective at CORNET sites. Phase 1 is complete and the second phase will compare patient and resident educational outcomes in clinical sites with integrated mental health programs to those sites that have a more standard approach to mental health care. *We are currently looking for funding for the second phase.*

Childhood Obesity Prevention, Treatment and Evaluation in Residency (COPTER). This proposal is spearheaded by Bill Stratbucker at Helen DeVos Children's Hospital. This proposal entails testing the implementation of a resident curriculum in addition to gauging resident attitudes and knowledge on the subject of childhood obesity. *This proposal was submitted fall 2011 to MCHB for grant funding.*

Play Nicely: Testing a brief intervention to affect attitudes toward physical punishment. This proposal with Seth Scholer as PI is for a national, randomized controlled trial examining a web based video on discipline strategies and methods to decrease aggressive behavior in young children. Sue Feigelman is serving as the CORNET Steering Committee member. *A pilot feasibility proposal was submitted summer 2011 to NICHD for grant funding.*

Adolescent Immunizations in Medical Homes Initiative (AIM HI). Peter Szilagyi is the PI of this study funded by the CDC. This is a 3 phase study that includes QI methods to enhance adolescent immunization rates within medical homes. This is a collaborative effort between two research networks, a regional practice based research network in Rochester (GR-PBRN) and CORNET. We are currently in the final phase which includes measuring the effectiveness of selected strategies for adolescent immunizations. *Phase I and II are complete. Phase III is underway as sites work on data collection.*

Thanks to the following sites for their endurance and patience during the IRB process: Anita Moonjely at University of Iowa Hospital, Heather Burrows at University of Michigan, Jan Drutz at Baylor College of Medicine, Texas Children's Hospital, Jeff Wright at University of Washington Medical Center, Marilyn Dumont-Driscoll at University of Florida, Mary Susan Heaney at St. Louis University School of Medicine, Melissa Meyer and Judy Groner at Nationwide Children's Hospital, Michelle Barratt at University of Texas - Houston, Natalia Golova and Chandan Lakhiani at Rhode Island Hospital/Hasbro Children's Hospital, Robert Bonner at St. Christopher's Hospital for Children, Ronald Samuels at Boston Children's / Combined Residency Program, Sandy Sanguino and Robert Tanz at Children's Memorial Hospital / Northwestern University, Shelly Baldwin at University of Arkansas Medical Sciences and Shirley Klein at Wilmington Hospital Health Center

The Preventive Services Improvement Project (PreSIP). This study is in the active QI phase with 24 practice sites around the country including 4 CORNET sites. The practices are working toward full implementation of Bright Futures recommendations from birth to 3 years of age. Project practice teams are participating in monthly conference calls and reviewing practice-specific data in their charts. The project will conclude with a follow-up in-person team meeting at the AAP November 2011 convention. *Data analysis is ongoing and results will be available soon after project completion.*

A special thanks to the following core improvement teams:

Ellen Link, George Phillips, Jessica Kaufman at University of Iowa Dept of Pediatrics, Kasey

Scannell, Kanitra Clyburn and Jeana Bush at CMC Myers Park Pediatrics, Mary Susan Heaney, Laurie Ferrer, Nancy Griffith at Danis Pediatrics, Ron Samuels, Holly Leith, Bob Flynn at Children's Hospital Primary Care Center

Evaluation of a Bright Futures Oral Health Intervention for Pediatric Resident Continuity Practice. The study has been completed. *A manuscript was submitted for publication in Pediatrics*

Welcome to this year's new members!

Albany Medical Center Pediatric Group and UCLA West LA Pediatrics

Have any ideas for CORNET projects?

We very much encourage you to submit your thoughts on new study ideas! Please develop a 2-3 page draft proposal that outlines your proposed study and send it to us at CORNET@academicpeds.org. We hope to hear from many of you as our continuity clinics have a wealth of potential translational research projects just waiting to be tapped! You can also discuss proposals with your Regional Research Chair.

Nui Dhepyasuwan
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Educational Scholars Program

The Academic Pediatric Association's Educational Scholars Program (ESP) will be recruiting another cohort of faculty scholars in the summer of 2012. The application website will open on July 1, 2012, and the deadline for online submissions will be October 1. To apply to this 3-year program, scholars complete an application, including a 2-page project proposal, and undergo a rigorous selection process. If you want to apply, now would be a good time to choose a mentor and begin planning your project. Applicants must submit a letter of support 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).

The ESP is a great way for academic pediatricians to refine their skills in educational scholarship and join a community of other dedicated educators, without doing a separate fellowship or degree program. The purpose of our program is to help faculty with a strong commitment to education 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. All scholars are guided in developing a well-crafted educator portfolio to support their future applications for promotion and advancement.

The ESP offers didactic and interactive activities at the PAS meeting each year. Scholars also complete self-directed modules between PAS meetings, and practice scholarship hands-on through completion of 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.

Since 2006, 31 scholars have graduated from the ESP program. Our current group of 41 scholars includes hospitalists, general and emergency medicine pediatricians, and a variety of subspecialists; many are residency program directors or associate directors. The ESP is supported by a faculty of 35 pediatric educators. Our hard working Executive Committee includes: Connie Baldwin, ESP Director; Maryellen Gusic, Co-director for Research; Latha Chandran, Co-director for Curriculum and Evaluation; Elisa Zenni,

Chair of the Faculty Advisor Committee; and our Cohort Leaders, Mary Ottolini, Teri Turner, and Lindsey Lane. These volunteers devote many hours to the ongoing success of this program.

To learn more about the Educational Scholars Program, go to:

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

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PRIS



PRIS Quarterly Update (July - September 2011)

Network Related Milestones

The PRIS Executive Council (EC) had its eighth in-person meeting in the day and half prior to the Pediatric Hospital Medicine conference in Kansas City. We were joined by Jacqueline Kueser and Matt Hall of CHCA for much of the meeting to discuss the upcoming work of the Prioritization Project (details below). In addition, we were pleased to have the Presidents Benard Dreyer (APA), and Joseph Li (SHM), join us for lunch and a Network update. We were able to meet during the PHM meeting with Judy Palfrey (AAP Past President) as well.

PRIS is currently open for new research proposal ideas from its membership. The PRIS Network Coordinator, 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 (jaime.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 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

We met many of you at the Pediatric Hospital Medicine Meeting, in Kansas City in July. PRIS EC members led several research workshops, including a Research 101, 201 and 301. Along with the PRIS Network update and the Roundtable, Pediatric Research in Inpatient Settings (PRIS) Network: A New Strategic Plan poster presentation and A Strategy for Prioritizing Pediatric Inpatient Comparative Effectiveness Research platform presentation were also given.

We would like to congratulate Dr. Raj Srivastava (PRIS Chair) for being invited to the CHIPRA Pediatric Quality Measures Program Expert Panel 2011!

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 31st, 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.

Much of the teams' effort during the quarter was focused on starting the first drill-down process - to choose a specific condition (diabetic ketoacidosis) and discover where variation is occurring, and try to identify warranted from unwarranted variation. We are currently working on establishing a common methodology to perform this analysis and will share the methods with the larger community, as others may wish to replicate these for the numerous other conditions that need further work. This common methodology will be applied to 3 other conditions as well using the PHIS data.

PRIS discussed this work with Carolyn Clancy (Director of AHRQ) during the PHM meeting. In addition, PRIS will meet with CHCA in October and the Quality and Safety Leaders forum and with the CEO's in November to receive input on choosing the other 3 drill downs.

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

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

The first year of the PHIS+ project wrapped up on 9/29/11. The beginning of the grant period focused on the laboratory data and determining how it would be mapped to the PHIS+ database. Now that the pilot sample of lab data has been mapped, a one year sample of approximately 300 labs has been requested from each of the sites. The data is currently being mapped and translated into the PHIS+ database. Once the clinical data is successfully matched with the existing PHIS administrative data, the group will start back loading the database to 2007.

Over the last few months the microbiology and radiology components of the project started taking shape. The microbiology working group established a file format and a one month sample of data will be collected within the next month. The radiology working group has representation from each site and has begun discussions about the file structure. The project stakeholders are currently evaluating de-identification solutions which will be needed to eliminate PHI in the free text sections of radiology report data. The microbiology and radiology components will pick up speed in the next few months and are expected to be finished with the one year data sample by December 2011.

Overall, significant progress is being made on the grant and the comparative effectiveness research (CER) project PIs are looking forward to beginning their studies next spring.

I-PASS: IIPE-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 move forward in studying the effectiveness of a "resident handoff bundle" to accelerate the adoption of safer communication practices in pediatric hospitals. With the planning phase complete, the study team has moved on to implementation of data collection protocols and the team training intervention.

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). During the past six months, trained research nurses and research assistants have collected data on patient safety outcomes and resident workflow, work processes, and satisfaction. Initial reports have suggested that research staff collected an expected number of medical errors and that there were remarkably high response rates (95%+) to the resident surveys.

The team training intervention and other aspects of the resident handoff bundle are being implemented at these first two sites in the six-month wash-in period before follow-up data collection begins in January 2012. 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 Team STEPPSTM program developed jointly by the Department of Defense and the Agency for Healthcare Research and Quality. The curriculum was revised based on feedback from March 2011 pilot in Boston, and was re-piloted in this setting in June 2011. The revised curriculum will be delivered in an initial 3-4 hour retreat or series of noon conferences and refresher modules.

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) - began baseline data collection in July 2011. The Study PI, Project Leader, Project Manager, and a representative from the DCC traveled to each site in June 2011 to train data collectors and coordinate with investigators at each site. IRB applications were submitted in advance of these site visits and data use agreements are finalized with institutional representatives.

Planning is already underway for the final wave of baseline data collection beginning in November 2011 for a third wave of sites, which includes St. Christopher's Hospital for Children (Philadelphia, PA), the National Capital Consortium (Washington, DC), Doernbecher Children's Hospital (Portland, OR), and the Hospital for Sick Children (Toronto, ON, Canada). Study working groups have been meeting weekly to coordinate implementation of the study protocol, plan for data analysis and validation, and work on various aspects of the curriculum. In the coming quarter, implementation of the team training intervention will be completed at the first wave sites and baseline data collection will begin at final wave of sites.

Executive Council

Rajendu Srivastava, MD, MPH, Chair
Christopher P. Landrigan, MD, MPH, Past Chair
Patrick Conway, MD, MSc
Ron Keren, MD, MPH
Sanjay Mahant, MD, MSc
Samir Shah, MD, MSCE
Tamara Simon, MD, MSPH
Joel Tieder, MD, MPH
Karen Wilson, MD, MPH

Submitted by
Jaime Blank
Research Associate, Network Coordinator
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Liaisons

Primary Care Organizations Consortium (PCOC)

Primary Care Organizations Consortium (PCOC) Meeting April 15, 2011

AAMC Headquarters
2450 N Street, NW
Washington, DC 20037

[April 15, 2011 Meeting Minutes](#)

Jack Pascoe
PCOC Liaison
pascoe@macc.wisc.edu

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Regions

Region V

Fall is in the air in Region V, but we are already thinking about spring!

This spring will mark the return of the Regional Meeting. The 2012 APA Region V Regional Meeting will be in Indianapolis, IN on Friday March 2nd starting at 12 noon and concluding on Saturday March 3rd at 1 pm. Featured will be the winners of our Trainee Abstract Competition to go along with the workshops and educational session. Look for a schedule of events and application forms to come out later in the fall. If you are interested in presenting a session at the meeting, please let us know.

Speaking of the Trainee Abstract Competition, check out [information](#) about the competition as well as the [application](#). If you are working on a project with a medical student, resident or fellow, please consider submitting to the competition. It is a great warm up for PAS and an excellent way to add to your scholastic efforts. We also could use abstract judges, so please make sure to let Allison know if you are interested. The due date for abstract submission is the same as the PAS deadline, Thursday November 17th.

Our latest Regional Teleconference was on October 5th, with Elaine Schulte, which was an informative discussion on mentoring and being mentored. The teleconference was recorded and a link to the recording will be sent out via email. The next Regional Teleconference will be in December.

Looking forward to some excellent Trainee Abstract Competition submissions as well as getting planning rolling for the Regional Meeting in Indianapolis!

Region Co-Chairs:
Allison Brindle

brindla@ccf.org

Michael McKenna
mpmckenn@iupui.edu

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Region VI

The Region VI Co-Chairs continue to investigate the technology needs for our Virtual Region VI Meeting tentatively scheduled for February. As we firm up our technology needs and dates, we will notify Region VI members regarding meeting specifics via our listserv and the APA Newsletter.

As you start thinking about PAS in Boston, encourage your trainees to submit an abstract since we will be able to offer more Trainee Travel Awards this year since we will need to spend less of our budget on our region meeting.

October is Health Literacy Month. If you would like to learn more about Health Literacy please go to our region's APA web page and review Benard Dreyer's keynote address on Health Literacy from last year's Region 6 meeting!

Need to check the reading level of patient resource materials you've created for your clinic? Did you know that Office Word's "Spelling and Grammar Check" includes readability as an option feature? To take advantage of this feature, hit the "tool" tab on your toolbar, then hit "spelling and grammar." Hit the "option" tab at the bottom of the box and click on readability. You will then be provided with the reading level of your document as part of your spelling and grammar check. My colleagues and I have found it very helpful as we work to achieve a reading level appropriate for our patients! Hope it helps you!

Region Co-Chairs:
Bernie Eskridge
eskridgeb@health.missouri.edu

Charlie Gaebler
cgaebler@mcw.edu

Sharon Wilkerson
swilkerson@cmh.edu

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Region VII

Hello Everyone!

Mark your calendars for the 2012 Southern Regional Meetings (SRM) to be held February 9-11th, 2012 in New Orleans, LA. This is our annual meeting for APA regions VII and VIII; however, it also includes other organizations such as the Southern Society of Pediatric Research, the Southern Society of General Internal Medicine, the American Federation of Medical Research, and the Southern Society of Clinical Investigation. This meeting provides an excellent opportunity for medical students, residents and faculty to present their work at a regional meeting and also the chance to enjoy the fun of New Orleans!

Workshop

Learn about innovative ways to provide feedback by attending "What's New in Feedback? S.T.O.P. the Feedback Sandwich" an exciting workshop that will be presented at the 2012 SRM by Drs. Mary Rocha and Julieana Nichols from Baylor College of Medicine.

Please welcome our newest Region VII APA Member:

Jeffery Bergman, DO
Baylor College of Medicine
6621 Fannin St
Houston, TX 77030

Thanks and have a wonderful fall season!

Region Co-Chairs:
Shelly Baldwin
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Nancy Kelly
Nancy.Kelly@childrens.com

Melissa Nass
mnass@lsuhsc.edu

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Region VIII

Fall is in the air. Resident recruitment season is upon us and we are busy preparing for the Southern Regional Meeting. This meeting is a joint effort of Region VII and VIII of the APA along with the Southern Society for Pediatric Research, the Southern Society for General Internal Medicine, the Southern Society for Clinical Investigation and the Southern Section of the American Federation for Medical Research. The meeting will be held [February 9-12, 2012 in New Orleans](#) and is shaping up to be another wonderful educational event. The APA will be presenting a workshop on giving feedback in a thoughtful and meaningful way and the combined plenary will bring together adult and pediatric perspectives on obesity. This meeting is a great way to expand your horizons into the adult world of medicine and network with colleagues with common interests. We hope to see many of you there!

I would also like to remind everyone about the [Health Care Delivery Award](#). The purpose of the award is to recognize an innovative and effective health care delivery program that incorporates teaching. The application is simple and short. It consists of a cover sheet with a 200 word program summary, a letter of support from the chairman and a six page or less description of the program. The description should include the program's innovative aspects, its scope, the extent of trainee involvement, data on outcomes and potential for sustainability and dissemination. I know there are a lot of great programs out there in our region that fit this description. Start your application today.

[Health Care Delivery Award application deadline is November 11, 2011.](#)

Region Co-Chairs:
Annamaria Church
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Michelle Stevenson
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Judy Theriot
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Regions IX and X

Our Joint Region IX and X Meeting, the Pediatric CARE (Community, Advocacy, Research and Education) Conference, will be held on January 28-29, 2012 in Monterey, California at the Naval Post Graduate School. In response to your feedback we have reformatted to a two day format. We really look forward to seeing everyone there!

Overview of conference includes: an address by APA President, Benard Dreyer, a keynote address on health care reform for children; poster, oral and works in progress presentations; NEW faculty development workshops; and networking opportunities.

We will have a call for abstracts and workshops shortly. Due date is Nov 17th timed with the PAS abstract deadline.

Residents or fellows who present posters or platform presentations at the Pediatric CARE Conference will be eligible for 2 travel stipend awards to the national PAS conference in Boston to present at our Regional Breakfast meeting.

We welcome any feedback or ideas for APA regional activities, either locally or at the national meeting.

Please feel free to contact in Region IX: Wendy Hobson-Rohrer or Christine Johnson and in Region X: Anda Kuo or Dean Sidelinger

Region IX Co-Chairs:
Wendy Hobson-Rohrer
wendy.hobson@hsc.utah.edu

Christine Johnson
christine.johnson@med.navy.mil

Region X Co-Chairs:
Anda Kuo
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Dean Sidelinger
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Webinar Shed Light on Intellectual Properties and Copyright Issues in the e-Learning Realm

e-Learning SIG Co-Chair, Heidi Saliba led a webinar Thursday, August 11, 2011 on the topic of "Copyright Considerations for Educators, Media Professionals, and Researchers." This one-hour presentation has been part of Co-Chair Kadriye O. Lewis' graduate medical education course at Cincinnati Children's Hospital Medical Center for the past two years. Its topics include copyright definitions and interpretation, the history and application of copyright, the Fair Use Doctrine, and not-so-common knowledge related to the subject. Presentation objectives were to: 1) Establish an understanding of the definition of copyright and how it applies to researchers and communication professionals; 2) Discuss the limits and extent of the Fair Use Doctrine; and 3) Identify practical, tangible suggestions for meeting the publication and communication needs of professionals while operating within the boundaries of the law. A question and answer period was built into the presentation, and participants were invited to share their experiences and insights.

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/>

Calls for Abstracts

PAS abstracts

If you will be submitting abstracts for the 2012 Pediatric Academic Societies' Annual Meeting (PAS), the deadline is Thursday, November 17, 2011.

Are You an Innovator?

Submissions regarding innovation in educational methods are sought for the 2012 Darlene Buczak Award for Innovations and Medical Education and Training, according to a posting on www.researchraven.com. The winner will be announced at the March 2012 conference of the Association of Pulmonary and Critical Care Medicine Program Directors in Carlsbad, California. Submission deadline is November 18. Contact Laura Nolan at apccmpd@chestnet.org for details.

2012 National School Based Health Care Convention

Also listed on www.researchraven.com is a call for papers for the National School-Based Health Care Convention scheduled for June 2012 in Albuquerque, New Mexico. Among other topics, workshops are sought on communications and social media (Track 6, Stakeholder Engagement), communications and messaging (Track 8, Youth Development and Engagement), and information technology (several tracks). Submission deadline is November 4; contact is listed as info@nasbhc.org.

Of Particular Interest

Extended abstracts are sought for submission to the 13th Biennial International Conference on Computers Helping People with Special Needs. The July 2012 conference is scheduled to be held at the University of Linz in Austria. Submission deadline is February 1, 2012; the conference link is <http://www.icchp.org/call/papers>.

APA e-Learning SIG in Medical Education Wiki site: <http://elearningsig.pbworks.com/>

SIG Co-Chairs:

Kadriye Lewis

Kadriye.Lewis@cchmc.org

Heidi Saliba

hsaliba@peds.ufl.edu

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Faculty Development

Although the calendar says October, temperatures in many parts of the country are still quite summerlike. Despite that, the Faculty Development SIG is looking forward to and starting to plan for the Boston meeting in May. We have been thinking about what type of program we want to have, but before anything gets set into stone, we want to hear from the SIG members. Last year we had two invited presentations providing examples of different types of faculty development. Sharing with the membership is a great way to add to one's repertoire. Let us know your thoughts and we will proceed. Also, please let Mimi know if you are interested in having a leadership role in the SIG. We are looking for someone to become a co-chair in May. We have found that overlap with leadership helps facilitate the transition.

SIG Co-Chairs:

Joe Lopreiato

jlopreiato@usuhs.mil

Miriam E. Bar-on

mbar-on@medicine.nevada.edu

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Hospital Medicine

The pediatric hospital medicine community continues to offer tremendous opportunities for individuals to contribute to the growth of our field. Deadlines for many of these opportunities are approaching, and we want everyone to be aware of them.

[Pediatric Academic Societies \(PAS\) meeting 2012 Boston](#) November brings the deadline for abstract submission for this spring's Pediatric Academic Society Meeting. The deadline is November 17, 2011. Abstracts can be submitted electronically at <http://www.call4abstracts.com/pas/>. This year's PAS meeting will be held in Boston, MA on April 28th through May 1st.

We are busy planning the SIG meeting and would be happy to hear from anyone who has suggestions for topics to be discussed. As was discussed at the SIG meeting in May 2011, we are planning an election. 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 next spring. Be sure you are included!

[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. The planning committee needs your help! This year, in order to continue to expand the participation of the hospitalist community in the annual meeting we are looking for two different types of submitted content proposals ! highly interactive workshops and lecture style short topics - in the areas of clinical care, clinical hands-on, education, research, quality improvement, and practice management. The online submission platform can be accessed at the following link: <https://www.degnon.org/secure/apa/hosmed12/> .

The APA will also be sponsoring its Leadership Precourse immediately prior to the main Pediatric Hospital Medicine meeting. To get a sense of material covered in past meetings, please visit the link: http://www.academicped.org/events/conference_2008.cfm. Please note that in 2012 the leadership meeting content will be modified to address hospitalists' interests and needs. Please mark your calendars now and plan on attending from July 18-19, 2012!

Education

The mission of the APA Educational Scholars Program is to assist pediatric educators in developing themselves as productive, advancing and fulfilled faculty members and to increase the quality, status and visibility of pediatric educators in academia. The Educational Scholars Program is offered to members who wish to earn a Certificate of Excellence in Educational Scholarship. The curriculum includes didactic sessions, development of an educator portfolio, participation in and review of workshops, and a mentored project. Scholars are expected to complete the full curriculum, including projects, over 3-4 years. For more information about the program, please see the following link:

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

Research

Please note the PAS abstract deadline is approaching - November 17, 2011.

Please also be on the lookout for the call for PHM abstracts, which will not be linked to PAS abstract submissions this year. However, if you indicate you are interested in hearing about the PHM meeting abstract submission process when you submit your PAS abstract, you will be emailed directly about the PHM abstract deadlines. Please note the call for PHM abstracts will come out earlier (November 2011) and close earlier (February 2012) than in years past. Also, in contrast to past years, research presentations will be interspersed throughout the meeting. We hope these changes will accommodate the huge increase in research submissions we saw last year.

Also, the APA Young Investigator Program will soon be asking for grant request submissions. These grants are open to fellows and junior faculty in a broad array of areas including hospital medicine, general pediatric clinical research, health services research and medical education. The submission is a two-step process. The deadline for the initial two-page proposal is November 7, 2011 5 PM ET. Visit The APA Young Investigator Program at http://www.academicped.org/research/research_YIA_APA.cfm for a full description of the program.

JCPHM

We recently posted links to the Joint Council governance document and the free html version of the PHM Core Competencies on the SIG webpage (above). Stay tuned - we will be posting the STP Committee's SWOT analyses to the APA SIG website. In addition, the APA SIG and SHM are collaborating on a project to promote hospitalist promotions. More to come-

Important dates to remember

October 15-18, 2011: AAP NCE in Boston, MA

November 17, 2011: PAS 2012 Abstract deadline

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:

Jeff Simmons

jeffrey.simmons@cchmc.org

Tamara Simon

Tamara.Simon@seattlechildrens.org

Doug Thompson

ethompso@drexelmed.edu

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Announcements

Academic Pediatrics Call for Systematic Reviews

The APA journal, *Academic Pediatrics*, now publishes a recurring section entitled "Systematic Reviews" and is calling for submissions of systematic reviews concerning health care delivery, public policy, education, and research methods. The new section creates a home for this form of scientific investigation. We expect submissions to be highly structured, rigorous reviews that follow the latest methodology for systematic reviews. Of course, submissions to the Systematic Reviews section of the journal will undergo the same level of rigorous peer-review as other submissions to the journal. Nonetheless, junior investigators can master the methods of systematic review and use a systematic review to launch their longitudinal efforts in a direction of inquiry. Those interested in pursuing such an investigation with the intention to publish in *Academic Pediatrics* may contact the section editor, Robert M Jacobson, MD, Mayo Clinic, ph: 507-538-1642, fax: 507-284-9744, and email: jacobson.robert@mayo.edu.

Submitted by

Robert Jacobson

jacobson.robert@mayo.edu

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APA Awards 2012: Call for Nominations

All APA members, including emeritus members, have the opportunity to send in a nomination, or self-nomination, for the Health Care Delivery Award, Public Policy & Advocacy Award, Research Award, Teaching Program Award, Miller-Sarkin Award, and International Health Research Award. We hope you will help us continue the tradition!

Each award conveys considerable prestige both for the program or individual and for the sponsoring institution. The recipient will be recognized at the annual PAS meeting taking place April 28-May 1, 2012 in Boston, Massachusetts.

For the selection process, please consult each individual award description. Thank you and good luck!

[2012 AWARDS: APA Call for Nominations](#)

Submitted by
Jennifer Padilla
jennifer@academicpeds.org

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Young Investigator Awards 2012: Call for Applications

The APA Board of Directors announces the 2012 award cycle of the Academic Pediatric Association Young Investigator Awards Program. The program provides awards of up to \$10,000 or \$15,000 (depending upon the specific program) for research by fellows or junior faculty related to child health promotion, health services research, teaching, or patient care. Projects must be consistent with the goals of the APA; preference is given to projects that have the potential to lead to further studies.

Projects supported by the Young Investigator Awards Program, as well as the start dates, numbers of awards available, and funding amounts, vary according to the specific program ([see attached Overview](#)). The three award categories are:

- The APA Young Investigator Program broadly funds projects in health services research, medical education, adolescent medicine, public health, epidemiology, emergency medicine, child maltreatment, hospitalist medicine, developmental/behavioral pediatrics, and other general pediatric clinical research domains.
- The APA Bright Futures Young Investigator Program supported by the Maternal and Child Health Bureau in partnership with the American Academy of Pediatrics funds projects aimed at enhancing the effectiveness of and research base for health supervision in primary care.
- The APA Reach Out and Read Young Investigator Program supported by Reach Out and Read funds research projects that focus on interventions in primary care intended to support the early stages of literacy development and school readiness among children at risk for reading problems or school failure.

Applicants may submit more than one proposal with different research questions. No more than one award per Principal Investigator, however, will be funded in a given year. The same proposal may not be submitted twice in a given award cycle.

The Young Investigator Award Program involves a two-step selection process:

Step One:

- Submission of a two-page initial proposal to be received by November 7, 2011, using the online submission program at the following link: <http://www.academicpeds.org/members/yientry/login.cfm>. Only electronic submissions through this site will be accepted. Each submission must include a brief overview of the project, purpose, methods, evaluation/analysis plan, and estimated budget. A peer-review study section, convened by the APA Research Committee Chair, Glenn Flores, will review the two-page initial proposals.
- Applicants will be notified by December 7, 2011, regarding whether they have been selected to advance to the second step.

Step Two:

- Submission of an invited full 10-page proposal by January 6, 2012. A second study section convened by the APA Research Committee Chair (including representation from the funding agencies) will review the full proposals, make recommendations for funding, and provide 1-2 page summary review statements for the Principal Investigator. These reviews serve not only to assist the Board in evaluating

proposals for funding, but also to support young investigators by providing constructive comments from established senior researchers.

- Applicants will be notified in January 2012 whether they have been selected for funding.

Only electronic submissions through this online submission program site will be accepted:

<http://www.academicped.org/members/yentry/login.cfm>.

Please read the [instructions](#) carefully prior to preparing your submission. Questions about this program can be directed to Connie Mackay at the APA central office by calling (703-556-9222) or via email (Connie@academicped.org).

Submitted by:

Glenn Flores

Chair, APA Research Committee

Chair, APA YIA Program

Judy Shaw

Project Director

APA MCHB/AAP YIA Program

Alan Mendelsohn

Project Director

APA/Reach Our and Read YIA Program

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PREP® Hospital Medicine: Call for Candidates

Are you interested in serving on the PREP® Hospital Medicine Self-Assessment Advisory Board?

The AAP, SHM, and APA are seeking pediatric hospitalists who have strong educational credentials and proven writing skills to fill positions on this NEW Advisory Board.

What is PREP® Hospital Medicine Self-Assessment?

Modeled after the established PREP (Pediatrics Review and Education Program), PREP Hospital Medicine Self-Assessment will be based on the Pediatric Hospital Medicine Core Competencies.

Who should apply?

Pediatric hospitalists with strong educational credentials and proven writing skills are encouraged to apply. Individuals with experience in both writing and teaching who enjoy the challenge of scientific inquiry are ideally suited for this position.

Each PREP Hospital Medicine Self-Assessment Advisory Board member is responsible for annually writing and revising 12 self-assessment questions and critiques that use graphics and/or multimedia. Questions and critiques cover patient cases and issues managed by practicing pediatric hospital medicine specialists.

What is the format?

PREP subspecialty self-assessments annual subscriptions have 96 questions published in a web-based interactive format delivered in eight question/month increments. Each question response leads to a critique that describes evidence favoring the preferred response and disfavoring the incorrect responses. The quality of evidence contained in selected literature supporting the critique is provided in references for the subscriber to pursue additional readings. Hospital Medicine Core Competencies will be cited with each question. In the

past year, PREP Self assessments have been (and are being) developed for pediatricians with specialties in critical care, development & behavior, emergency medicine, nephrology, infectious diseases, endocrinology, hematology/oncology, and pulmonology. Go to <http://prepiku.aap.org> to access a free trial to the PREP critical care self-assessment and see this on-line format.

How will board members be selected?

Memberships/credentials will be checked through the AAP, ABP, APA, and SHM. The summarized information will be shared with the Chair of the AAP Hospital Medicine Section, the SHM, and the APA. Merits of each potential candidate will be requested. This information may be shared with an Executive Committee for comments with the caveat that the overall confidentiality and sensitivity of the process be preserved.

The summarized comments from the AAP Hospital Medicine Section, the SHM, and APA will be reviewed by the Chair of the PREP Self- Assessment Group. Candidates will be vetted by an executive group which has Hospital Medicine representation. They will consider the complexity and variety of Hospital medicine subspecialists, including recommendations, writing criteria, content coverage and practice perspectives. The Chair of the PREP Self-Assessment Group will make the final selection based on input received and will resolve any potential conflicts of interest. This group has an impressive legacy of new start-ups in the PREP CME-accredited family of products.

What will a Self-Assessment Advisory Board member do?

New Member Training

- Attendance at a new member conference call provides training on developing high-quality self-assessment questions and critiques. Additionally an orientation to overall advisory board responsibilities is covered during this session.

Question/Critique Writing Responsibilities

- Develop 12 multiple-choice questions per year (6 in spring and 6 in fall) addressing key teaching points related to assigned Pediatric Hospital Medicine Core Competencies. Previous members have found it requires approximately 3 hours to complete a question.
- For each question, prepare a several paragraph critique (explanation), with suggested readings and evidence-based references. Previous members have found that it requires approximately 5-6 hours to complete a critique.
- Attend peer-review meetings to discuss and clarify content in small group settings.
- Meet question and critique deadlines.

Additional Responsibilities

- Contribute ideas for improvements to the PREP Self-Assessment (SA) formats, content, and policies. Solicit ideas and opinions from colleagues and fellows regarding content, layout, and usability of PREP SA.
- Activate an online subscription to PREP SA.
- Annually complete the required disclosure statements and advise staff of any changes.
- Maintain familiarity with the PREP product line.

Advisory Board member physicians who contribute to the development of peer-reviewed, published, self-assessment by researching, drafting and defending potential questions/content are eligible to earn a maximum of 10 AMA PRA Category 1 Credits™.

If you would like to be considered for this prestigious appointment, please complete the 5 required nomination materials:

- [Fact Sheet](#)
- [Voluntary Conflict of Interest](#)
- [Financial Relationship Disclosure](#)
- Current CV
- Writing Sample (short essay or question and critique of 1-2 pages that has not been published or reviewed by others)

Send the 5 required nomination materials to:

Nancy Zabel, Manager, PREP Subspecialty Self-Assessment Programs at nzabel@aap.org with subject line: PREP Hospital Medicine Candidate

If you have any questions, please call Nancy Zabel at (847) 434-4728 or e-mail at nzabel@aap.org.

Deadline for receipt of nomination materials: Monday, November 28, 2011

Submitted by

Nancy Zabel

nzabel@aap.org

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News from General Academic Pediatrics Division at Saint Louis University

We have had a few changes in the General Academic Pediatrics Division here at Saint Louis University.

First, we have a new Division Director. Effective August 1, M. Susan Heaney, has taken over with exciting plans to continue to build the Division.

We also have two new physicians joining us October 1st, Drs. Matthew Broom and Rashmi Narayan. Dr. Broom returns to SLU after spending 3 years at the U.S. Naval Hospital Okinawa, Japan, and 1 year at the Naval Medical Center Portsmouth, Virginia. Dr. Narayan will be coming from University of California at Los Angeles Mattel Children's Hospital where she has completed her chief resident year. We are very excited to be growing to meet the increasing demands of Cardinal Glennon Children's Medical Center.

Lastly, Elizabeth Sugarbaker, received the 2011 Distinguished Teaching Award for Clinical Teaching awarded by the medical students; and Jennifer Ladage, has been nominated for the St. Luke's Faithful Healer Award recognizing her exceptional dedication to the values of our institution: compassion, excellence, stewardship, community, and respect.

Submitted by

Donna Halloran

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