PRESIDENT’S COLUMN
Susan Guralnick, MD
Stony Brook University School of Medicine

It’s that time again. Recruitment season, that time of year when program directors are achieving the impossible, doing more work than a single person can possibly perform at one time, doing it well, and usually with a smile. I hope you are all surviving your recruitment seasons. Try to remember why you do this, and that working with the residents really is worth it all.

At every APPD Board meeting we review our strategic plan in order to determine whether we are on track with achieving our goals, whether we are meeting our timelines, and to identify any objectives that have been left behind. Upon reviewing the strategic plan this fall, I was very excited to realize how much we have achieved since this plan was written two years ago. I would like to review for you some of what we have accomplished, and areas of current focus.

Probably the greatest achievement over the past two years has been the opening of, and recent revision of, the Share Warehouse. In case you haven’t been to that section of our website, the Share Warehouse is designed to create an infrastructure for pediatric educators, specifically program directors, to submit and receive academic recognition for their work, while fostering collaborative at a real and meaningful level. We hope that program directors will share their materials with others, and adapt materials from the site for use at their home programs. On an exciting note, the APPD has been contacted by several other organizations interested in posting their materials on the Share Warehouse, and we are in discussions about how this process might occur.

We are developing the framework for implementation and to pursue funding for LEARN, the Longitudinal Educational and Research Network. This network will provide the home for collaborative educational research projects, allowing implementation and evaluation of innovations across programs throughout the country, providing the resources needed for many programs to be involved in research and curricular change.

At both our spring and fall meetings this year, in addition to the tracks for Program Coordinators and Program Directors, we incorporated specific...
programs designed for Associate Program Directors and Fellowship Directors. In response to our membership, we have identified these as tracks that we must continue to develop in order to meet your needs. Our Task Forces and Regions have been active, as you will learn when you read their reports included in this newsletter. We encourage members not already involved with a Task Force to join one now. The only requirement is interest. No special knowledge or skills are necessary. Please take advantage of this opportunity to share and network, and hopefully innovate.

Good luck to all in your recruitment!

and we must continue our progress to preserve the future of child health through graduate medical education through all economic times.

Finally, as we all worry about our programs and departments, we must also take care of our own personal and career development. As we shared with new members at the Fall Meeting—even in stressful times—to have longevity and satisfaction, you must hold on to aspects that you find regenerative and personally fulfilling while our Chairs and CEOs will pull harder in other directions….no matter what the Dow Jones is today.

The 12th Annual Fall Meeting began with great weather as blue skies greeted us upon our arrival to Alexandria, Virginia. It was wonderful seeing new, as well as seasoned, coordinators attend this meeting. The participation of the subspecialty coordinators is evidence of the continued growth and evolution of this association.

Our evening festivities began with cocktails and dinner in one of the Westin’s ballrooms, followed by our keynote speaker, Dr. Stephen Ludwig, Associate Chair for Education, Children’s Hospital of Philadelphia and recipient of the 2008 APPD Robert S. Holm, M.D. Leadership Award. Dr. Ludwig began his speech, entitled “Program Directors - The Thrill of Victory and the Agony of Defeat,” with thoughts of how he loves being a Program Director and a member of the APPD and how residency directors are many things: teacher, advisor, mentor, coach, but, most importantly, an agent of change. Creating change can lead to victory, but it can come slowly. He emphasized that change should be embraced. Change is always good. We should be optimistic and hear both sides as well as be good pediatricians and have fun!

The conferences were filled with valuable information for all those in attendance. Representatives from ABP, ERAS, ACGME, and AAP were there, and this was a great experience for our new attendees including Program Directors, Associate Program Directors, Fellowship Directors and Coordinators, and Residency Coordinators (165 in attendance of which 75 were coordinators). Those in attendance were motivated to participate and ask very detailed questions on how best to reach goals and how to implement their evaluation systems in the best way possible.

The coordinators had an evening out at Gadsby’s Tavern in Old Town Alexandria, an area filled with quaint shops and historical character. Gadsby’s Tavern, a family-oriented establishment with great food and servers in colonial period attire, was a wonderful experience for all those who attended. This tavern is where George Washington discussed battle strategies and had several meals, including his last. It was where his contemporaries within a 15 mile radius converged to discuss the events of the day. The dinner was attended by 28 coordinators from all over the country. We enjoyed an excellent meal, got to know each other and discussed our respective programs. Their questions were reminiscent of when I began as a coordinator. We have all been there, and we continue to learn and grow as change occurs. We left the tavern with a better understanding of what our job entails but, most importantly, knowing that it is a team effort that leads to growth, progress and success for all coordinators.
Our last morning in Virginia began with, “A Year in the Program,” “ILP’s,” “Surviving a Successful Recruitment Season,” “Mentoring,” “Chief Resident/Director/Coordinator Team Dynamics,” and our Lunch Chat Session. The Chat Session was a wonderful opportunity to sit and discuss what topics coordinators would like to see on future agendas. We have informed all the subspecialty members of how important their involvement is to the APPD Task Force for coordinators.

It was a great conference, and we hope to see you all in Baltimore!

NEWS FROM THE MPPDA

Bradley J. Benson, MD, FACP, FAAP
President, Medicine-Pediatrics Program Directors Association (MPPDA)

This has been a busy year for the MPPDA! As the first combined residency program to undergo independent accreditation we are alpha and beta-testing the new process. For our Program Directors it has seemed like a never-ending accreditation cycle but there is light at the end of the tunnel. By next fall, every Med-Peds program will have undergone their first independent Site Visit and we’re all working for 5 year cycles! We have appreciated the opportunity to be involved with the ACGME in the continuous quality improvement of this process and think the work will pay off for future combined specialties as they follow the same evolutionary path.

While accreditation was a major topic at our Spring Meeting in New Orleans, we also focused on reflective practice, continuity clinic curriculum, inaugurated an annual Distinguished Lectureship on leadership, and shared curricular and program management tools. For the first time, we used a wireless audience response system that increased the interactive nature and real-time involvement for all. Our Subcommittees met and discussed their charges for the coming year and that work is progressing as described below.

MPPDA Recruiting Committee
Chaired by Allen Friedland, MD
The recruiting committee is charged with communicating with organizations that interface with medical students; updating materials used for medical student recruitment; keeping a list of active committee members for yearly submission to Executive Committee for documentation of participation; and preparing and presenting quarterly reports to the Executive Committee.

MPPDA Transition Committee
Chaired by Mary Ciccarelli, MD
The transition committee is charged with cataloging activities of MPPDA members; developing a curriculum for resident education; keeping a list of active committee members for yearly submission to the Executive Committee for documentation of participation; and preparing and presenting quarterly reports to Executive Committee.

MPPDA Curriculum Committee
Chaired by Alex Djuricich, MD
The curriculum committee is charged with developing a standard curriculum template for directors to adapt for use; continuing to develop an organized clearinghouse of materials that can be adapted for program use; keeping a list of active committee members for yearly submission to the Executive Committee for documentation of participation; and preparing and presenting quarterly reports to the Executive Committee.

MPPDA Research Committee
Chaired by Michael Aronica, MD
The research committee is charged with interacting and helping to coordinate the research activities of organizations studying med-peds; maintaining a database of publications of med-peds programs; creating an environment for med-peds collaborative research amongst programs; keeping a list of active committee members for yearly submission to the Executive Committee for documentation of participation; and preparing and presenting quarterly reports to the Executive Committee.

Lastly, we are preparing for the Spring meeting in Baltimore with APPD. We will focus on shared challenges including management of the continuity clinic experience, increasing recruiting with the development of Med-Peds elective rotations for students, our annual Q and A with the Boards and RRC representatives and our Second Annual Distinguished Lectureship. We look forward to seeing you there.
Attendees gather in anticipation of the Keynote Dinner and Address by Dr. Stephen Ludwig, seen above chatting with APPD President Dr. Susan Guralnick.
Sessions were stimulating and informative while providing hands on learning opportunities
AFTER R'P: WHAT NEXT?

M. Douglas Jones, Jr., MD
American Board of Pediatrics

The Residency Review and Redesign in Pediatrics (R’P) Project is close to concluding its work. Accomplishments thus far are summarized at www.abp.org and will be described in detail in 12 manuscripts to be published as a supplement to Pediatrics in January, 2009. The hope is that the R’P Project has initiated a different way of thinking about change in pediatric residency education. Heretofore, occasional changes in ACGME program requirements have been based almost entirely on expert consensus as interpreted by the RC, formerly the RRC, for Pediatrics. This has served us as well as it can, but most would agree that it is not optimal. The R’P Project proposes that pediatric residency education needs to be more flexible, that change needs to be constant and ongoing rather than occasional, and that expert consensus be better supported by evidence. Finally, it proposes mechanisms by which evidence would be acquired and disseminated.

A subcommittee of representatives from R’P and the RC for Pediatrics has drafted a document to solicit proposals for innovative change in residency education designated as I-Plan’s (Innovation/Improvement Plans). If approved by the RC and the R’P committee, the document will be distributed in early 2009. As stated in the draft: “The aim of the Innovation/Improvement Plan (I-Plan) is to catalyze changes in pediatric residency education that will improve the health of children, adolescents and young adults.” Plans will be directed toward one of three primary goals identified by three intense colloquia and three years of discussion within and beyond the R’P Committee: 1. Pediatricians should be prepared for diverse careers in the care of children, adolescents and young adults. 2. Pediatric education should provide a continuum of education that ties residency learning to medical school and post-residency learning. 3. Pediatric education should document that residents acquire the knowledge and skills needed to close the gap between current and optimal health care outcomes for children, adolescents and young adults.

Proposals might include requests for waivers of selected ACGME Program Requirements. The RC has discussed how requests will be handled and methods by which waivers would be monitored. Applicants would need to measure outcomes; proposals for dramatic change would be expected to have correspondingly sophisticated plans for measurement and analysis. I-Plan experiments are important, but not sufficient in themselves. The R’P Project also proposes establishment of a formal education learning collaborative within APPD. Specific objectives and how a collaborative would relate to the LEARN initiative remain to be determined. The goal would be to accelerate transformation of residency education by measuring and sharing outcomes, with programs learning from one another.

How will all of this be administered? R’P will end soon. The purposes of the still unnamed successor organization will be to monitor the culture and climate of ongoing adaptive innovation and change in residency education and to assist in measuring and disseminating lessons learned. Formation of the steering committee of this organization is underway. It will include a chair/executive director, representatives of APPD, the AAP Section on Residents, the Association of Medical School Pediatric Department Chairs (AMSPDC) and the American Board of Pediatrics (ABP) and, tentatively, a liaison representative from the RC. It will report to the Board of Directors of the Federation of Pediatric Organizations (FOPO) (the three Academic Societies, the AAP, APPD, AMSPDC and ABP). In addition to distribution of the I-Plan, the steering committee will create a committee of experts to review proposals. Finally, it will create a group of program evaluation experts with two responsibilities: to assist in experimental design, data analysis and monitoring of I-Plan’s and to facilitate and advise the learning collaborative.

The R’P Project has created a plan for fostering innovative change in pediatric residency education. The exciting work of implementation on behalf of children, adolescents and young adults is just beginning.

UPDATE FROM THE AAP RESIDENTS SECTION

Amy Jost Starmer, MD
Chair, AAP Section on Medical Students, Residents, and Fellowship Trainees (SOMSRFT)

Looking back on this year’s fantastic meeting of the Section on Residents at the AAP NCE in October, I am amazed by the high energy of our attendees and the great work that the group is able to accomplish. I left our meeting encouraged and invigorated by the direction in which the Section is moving and the substantive work we are supporting within the Academy.

I was privileged to be able to welcome over 200 residents to my new hometown of Boston for the Section’s Saturday assembly. During each annual session, we elect the members to fill leadership positions at the national and district levels. This year, residents at the conference authored and debated 27 resolutions on topics ranging from economic hardship loan deferments to the need for increased regulation around the topic of high-caffeine energy drinks.

This year, one of the conference highlights was launching one of our strongest advocacy programs to date. Our focus this year is on tobacco and smoking cessation. For this effort,
members of the Resident Section have worked side by side with representatives of the AAP Julius B. Richmond Center of Excellence and the AAP Committee on Federal Government Affairs. This exemplary teamwork has produced a toolkit of advocacy resources and suggested projects targeting tobacco cessation from the individual, state, national, and international levels. The toolkit was provided to each Program Delegate in attendance at the NCE and also available on the Section’s website at www.aap.org/ypn/r/advocacy. I strongly encourage you to ask your program delegates to use the materials to deliver one of the presentations at morning rounds or noon report at your programs.

It is important that the Section be agile and responsive to the needs of the pediatricians in training who comprise our membership. Our name simply does not accurately reflect the residents, post residency training fellows, and medical students that this section has been chartered to include since our founding in 1989. To this end, I am pleased to announce that at the 2008 NCE we formally announced the renaming of our section from the Section on Residents to the Section on Medical Students, Residents, and Fellowship Trainees (SOMSRFT). This is more than a name change, it’s formalizing our desire that pediatricians in all stages of their career are able to find a home within the Academy. It is my hope that this strategic change is the first of many coming steps to continue to increase our membership, be more inclusive of the talent available in our field, and better serve our membership by drawing from within.

As we continue to look towards the future with a strategic eye, the SOMSRFT Executive Committee will be working with the PediaLink Resident Center Workgroup to ensure the ongoing website redesign will offer our members the latest educational resources to enhance the training experience and promote lifelong learning. In the coming year, the Executive Committee will also work with staff to develop a Resident to Candidate Bridge Packet. Our goal is to retain Section members as Academy members as they make this career transition. I also hope to continue to apprise Program Directors of opportunities for residents through the continued publication of the Director’s Digest newsletter (www.aap.org/appd).

I have gained so much from my involvement with the Academy and this Section over the last few years. I am thrilled and honored to have been elected to serve as this year’s chair. I look forward to the great year ahead and know that with our great team of colleagues we will be able to accomplish much. Most importantly, I hope you will encourage your residents to get involved and, for those who are already involved, to stay involved in this exciting group. We look forward to an exciting year ahead!

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IN MEMORIAM – RALPH D. FEIGN, MD, BAYLOR COLLEGE OF MEDICINE

Dr. Ralph Feigin, Chair of the Baylor Department of Pediatrics and an internationally acclaimed pediatric infectious disease specialist, died Thursday, August 14, 2008 at the age of 70. He had been a member of APPD since 1996.

Considered one of the nation’s foremost pediatricians, Feigin made Texas Children’s Hospital one of the country’s best medical centers dedicated to children’s health. He also was responsible for training almost half of the region’s pediatricians.

APPD extends sincere sympathy to the family of Dr. Feigin and the entire Baylor community. Gifts in Feigin’s memory may be made to the Ralph D. Feigin Memorial Fund.

http://www.texaschildrens.org/drfeigin/
http://www.bcm.edu/pa/feigin/

WHAT IS THE APPD SHARE WAREHOUSE?

- A place where pediatric fellowship directors, coordinators, program directors...ALL APPD members...can get pertinent and useful information.....easily!
- A resource designed to help members NOT have to re-invent the proverbial wheel each time we do a new task or job.
- A way to disseminate your good works to help colleagues, and receive academic credit!
- A wonderful tool for interacting with members and collaborating (feedback, improvements, research, good conversation with other educators!!)

Who Needs a Share Warehouse?

- Members were asked “What 5 categories of shared resources could you have used in the past two weeks?”
- In response, 459 “categories” were identified by members.
- Common themes: curriculum, human resources, evaluation, administration, residents, and RRC requirements

APPD Share Warehouse: The Concepts

- Built with APPD members in mind...fostering growth and professional development:
  1. Philosophy of Collaboration
  2. Academic Credit (with reports for contributors)
  3. Honor system for acknowledgement of work done by others

Visit the APPD Share Warehouse today and begin your adventure of discovery!

http://www.appd.org/members_only/login.cfm

(If you need help with your log-in information, please contact info@appd.org.)
The APPD Mid-America region held its fall regional meeting on Friday, October 24, 2008. Dr. John Mahan hosted the meeting at Nationwide Children’s Hospital in Columbus, Ohio. Over forty participants registered to attend this meeting. This year’s theme was “Faculty Development.”

Presentations at this meeting covered a variety of practical and easy to implement faculty development ideas. Presenters at this meeting included:

Dr. Abdulla Gori
Metro Health Medical Center

Dr. Aleece Caron
Metro Health Medical Center

Dr. Jerry Rushton
Indiana University

Dr. John Phillips
West Virginia University-Morgantown

Dr. John Mahan
Nationwide Children’s Hospital

Dr. Raheel Khan
West Virginia University-Charleston

Dr. Ann Burke
Wright State University

Dr. Rhett Lieberman
Children’s Hospital of Pittsburgh

Jeri Whitten
West Virginia University-Charleston

Fran Carbone
Metro Health Medical Center

Residency program coordinators had a separate breakout session led by Jean Ashley (University of Louisville) and Mariah Barnes (Nationwide Children’s Hospital) to discuss topics of common interests including, “A Year In The Life Of A Residency Program” – Annual/Monthly Tasks and Resident Files/Portfolios.

The event that has had the most impact on our region this season is Hurricane Ike and the effect it has had on medical education in our region. While several pediatric residents in the Houston area suffered damage to their homes, and other areas were hit by a lot of rain and wind, it has been the University of Texas Medical Branch in Galveston that has suffered the most. After Hurricane Ike, the UTMB facilities were closed due to extensive damage and power outages. A number of residents, students and staff had severe damage to their homes and lost just about everything they had. In order for medical students and residents to have the least amount of disruption in their medical education and training, plans were made immediately after the hurricane to find places for these young people to continue their training. Help and offers poured in from many parts of the country, partly through the efforts of the ACGME notification and announcements at meetings such as the APPD Fall Meeting in Alexandria, Virginia.

It’s inspiring to see how communities cope with disasters. UTMB students and residents have been temporarily reassigned to programs in Austin, Houston, San Antonio, and other areas. They are quickly adapting to new places and routines. Some are living in university dormitories. Others have found lodging with family
and friends or others who have opened their homes. With university buildings closed, temporary facilities were set up all over the area, with a number of people working from their homes. One example is the letters of recommendation for fourth year medical students for their ERAS residency application are now being re-routed to the Dean’s home!

We appreciate the work of all those associated with UTMB in trying to minimize the impact of student education and resident training, as well as the schools and programs who have accepted them on a temporary basis – not knowing just how long temporary is going to be. But most of all we applaud the students and residents for their courage, good humor and tenacity in the face of these challenges. Aren’t these characteristics that we are looking for in a new generation of pediatricians?

**Western Region**
*Cindy Ferrell, MD, MSEd, Oregon Health Sciences Univ*

The APPD Western Region held their regional meeting on October 17, 2008. The meeting was held at The Children’s Hospital in Denver, CO. Adam Rosenberg, MD, and the University of Colorado Pediatric Residency Training Program staff hosted. Attendees at the meeting included 5 chief residents, 5 coordinators, 2 associate program directors and 8 program directors. Eight western programs had representation at the meeting. The meeting agenda was varied and included the following topics: R3P update, mental health services in (continuity) clinic, and mentoring of residents. The region is planning a collaborative project to address outcome measurement for residents in one of the competency areas. In order to facilitate a collaboration, conference calls will be planned and interested parties will be encouraged to meet for dinner one evening at the PAS meeting in Baltimore. More detailed information will be sent via the list serv so keep your eyes open! Interested programs in the western region can contact ferrellc@ohsu.edu as well.

**TASK FORCE REPORTS**

**Curriculum Task Force**
*Susan Bostwick, MD, Chair*
*Karin Hillenbrand, MD, Vice Chair*

The Curriculum Task Force is continuing to work with our colleagues at COMSEP on developing a curriculum for the medical student fourth year subinternship experience. The curriculum has moved forward and members of our committee are currently working on refining the competency based goals and objectives with COMSEP members. The next steps will be to develop learning activities and evaluation strategies.

We plan to present the curriculum, including goals and objectives and drafts of learning activities and evaluations, at the joint APPD/COMSEP Meeting in Baltimore for discussion and further development.

**Faculty Development Task Force**
*Surendra K Varma, MD, Chair*
*Clifton E. Yu, MD, Vice Chair*

The APPD Faculty Development Task Force solicits your advice and opinion regarding the topics for workshops and presentations at our annual meeting. Your input will help us in planning our annual meeting more effectively. Please send your suggestions to Surendra.varma@ttuhsc.edu. Best wishes for the Holiday Season.

**Learning Technology Task Force**
*Abhay Dandekar, MD, Chair*
*Joel Forman, MD, Vice Chair*

The Learning Technology Task Force was active at the Fall meeting this year, represented by Rajesh Donthi, who gave a presentation entitled: “Learning Technology 101: What you need to hit the ground running!” The presentation highlighted some key tools that are useful in the program director’s arsenal for site visit preparation, recruiting, and general program management. Also highlighted again were some of the promising utilities of the Share Warehouse and its practical applications.

Our group is hoping to revisit some of this material again at the Spring Meeting in the form of another similar workshop, particularly focusing on useful educational learning technology tools that would be applicable across the continuum of pediatric education. We are also working on a “user’s guide” to Learning Technology, developing more reviews on learning technology tools, and brainstorming about new ways to aid members with direct learning technology consultations and new tools to make our local and global tasks easier. We are looking forward to collaborating with our COMSEP colleagues in Baltimore and invite all members to participate with their ideas, enthusiasm, creativity, and innovative thinking!
APPD CALL FOR NOMINATIONS

The Association of Pediatric Program Directors’ Nominating Committee is soliciting nominations for the following positions:

♦ One Associate Director At-Large Board Member (Begin May ’09 for three year term) – to replace Monica Sifuentes, MD
♦ One Nominating Committee Member (Begin May ’09 for two year term) – to replace George Johnson, MD
♦ Two (Pediatric Residency Coordinators’ Executive Committee Members (Begin May ’09 for three year term) – to replace Valarie Collins, C-TAGME and Judy Behnke

All nominations should be sent to the APPD office (info@appd.org) no later than December 15, 2008. You may self-nominate. This is a great opportunity for you or a colleague to get more involved in the growth and development of APPD.

SAVE THE DATE

2009 Combined Annual Meeting

Association of Pediatric Program Directors

AND

Council on Medical Student Education in Pediatrics

Baltimore, MD
April 28 – May 2, 2009
Hilton Baltimore Convention Center Hotel

~ Housing opens in December ~

Registration opens in early 2009

Visit the link below for the preliminary schedule
http://www.appd.org/ws_submission/abstract09/sched09.pdf