President's Message

Patricia Hicks, MD
Children's Hospital of Philadelphia

Growth, Change and Opportunity for Innovation

The APPD is a dynamic, creative and ever-developing organization! It is almost impossible to touch on all of the activities, changes and creative work being done by the many talented members of APPD! The APPD Board is thrilled to have so many additional opportunities for leadership with the new governance structure; we hope each member realizes their opportunity to participate at a level that is right for their individual career stage and area of interest. We appreciate and welcome the innovative ideas you bring forth that continue to make APPD such a dynamic organization - thank you!

The APPD Annual Spring Meeting in San Antonio was an enriching experience for all with tremendous networking, mentoring and information-sharing through workshops, presentations and task force activities. With so much new information to share, this meeting was packed with excitement (and some anxiety) about the changes taking place. We are all grateful to the 2012 Annual Meeting Program Committee, led by Susan Guralnick and orchestrated by Kathy Haynes Johnson to make it all happen! A few key topics from the meeting mentioned below point to opportunities that lay before us.

Drs. David Stevenson and Rob Spicer presented ideas under consideration regarding subspecialty training, describing the American Board of Pediatrics' (ABP) thorough and thoughtful process underway to address the training needs of pediatric subspecialists. Together with the Council of Pediatric Subspecialties (CoPS), this ABP Initiative on Subspecialty Clinical Training and Certification (SCTC) is considering what optimal training for subspecialists should be. This initiative considers that subspecialty training may call for a differentiated approach where one size may not fit all. There are many issues under consideration including: 1) how much time should be spent within a particular training phase; 2) what outcome measures would be used to determine achievement of that training; and, 3) what impact would such changes have on certification. Look on the ABP website for updates on this initiative.

Dr. Joe Gilhooly, Chair of the Pediatric RC and Caroline Fischer, MBA, Executive Director for the Accreditation of Pediatric Standards and of the Review Committee for Pediatrics of the ACGME presented information on the Next Accreditation System (NAS) and invited questions and discussion. Shortly after the APPD Annual Spring Meeting, the new Pediatric Program Requirements were released for comment with categorization of requirements by "core", "detail", and "outcomes" tags. Relief from prescriptive requirements, for programs in "substantial compliance" is outlined in the new requirements; resident outcomes, surveys of residents and faculty and other outcomes will be used to determine "substantial compliance" using criteria that have not been finalized at this time. Where answers are known, Joe and Caroline have been very helpful in helping to provide clear responses so that programs can begin program redesign and innovation in an informed fashion. A huge thanks to Caroline and Joe for their responsiveness and assistance in addressing all of our questions!

One of the changes within the new program requirements is the specification of 6 months of "individualized" curriculum for each trainee. These six months of program-directed, educational units are intended to develop and prepare residents for their individualized careers. Faculty mentors of residents and program leaders are expected to design, implement and evaluate this career-focused curriculum as well as assess resident outcomes. During a recent APPD-member call, programs already offering components of individualized training presented their ideas and lessons learned. The 2012 APPD Fall Meeting in Arlington, October 3-5, 2012, will provide...
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This is an exciting time to be a member of APPD. There are many changes taking place, with new program requirements and a corresponding Next Accreditation System (NAS). As APPD President, Ann Burke worked closely with the membership in assembling a consensus of response to the proposed new program requirements. We all celebrate the results - program requirements that call for less prescription of percentages of inpatient and outpatient curriculum and removal of other process specification. With an emphasis on program innovation and outcome measures, these new program requirements offer a renewed challenge of providing evidence of outcomes. Our membership continues to be collaborative in developing a member response to the latest iteration of the program requirements; we will continue to work together to share our ideas and known strategies for curriculum and assessment. The fall meeting planning is underway, with plans to update the agenda to offer content to address the many different needs of program team members in a changing landscape of program structure and requirements.

As part of curricular redesign and improvement, programs will need to assess residents' outcomes, in the aggregate, as one means of informing the effectiveness of their program. At least two separate and distinct processes are necessary to inform programs regarding the effectiveness of their curriculum: 1) assessing the achievement of the various goals established for the program's chosen curricular experiences, and 2) to assess whether graduates, having achieved all curricular goals, are subsequently successful as practicing general pediatricians or are ready to enter into subspecialty training. Categorical program graduate success, if assessed, could inform programs of the impact of their training curriculum and allow them to then explore the critical components of their curriculum in determining the success of their graduates. Equating achievement of program goals (i.e. successful completion of all rotations) may not be sufficient evidence for competence. Thus, while there is now tremendous freedom, the shift from process to achievement of program goals (i.e. successful completion of all rotations) may not be sufficient evidence of outcomes. Our membership continues to be collaborative in developing a member response to the latest iteration of the program requirements; we will continue to work together to share our ideas and known strategies for curriculum and assessment. The fall meeting planning is underway, with plans to update the agenda to offer content to address the many different needs of program team members in a changing landscape of program structure and requirements.

To assist APPD members in developing the knowledge and skills to allow each pediatric educator to participate in meaningful assessment, a number of efforts are underway. The APPD Evaluation Task Force is taking the lead on developing individual faculty development modules using the ABP and APPD's publication, Assessment in Graduate Medical Education: A Primer on Assessment for Pediatric Program Directors to create a series that can be distributed to all APPD member programs.

Program directors and other program leaders seeking additional development now have an opportunity to grow in their knowledge and directly apply their learning to their own program improvement. APPD's Leadership in Educational Academic Development (APPD LEAD) has accepted its first cohort of APPD members for the 2012-2013 academic year. This new certificate program offers a focused and practical curriculum for program leaders. The continual development of future leaders is critical to sustain excellence in pediatric resident education. We are thrilled to have an extraordinarily talented LEAD Council and look forward to learning from the projects of the members enrolled.

For those interested in developing knowledge and skills in assessment, there are exciting ways to engage in outcomes research, using the Pediatrics Milestones as a framework for developing assessment tools within your own program. Getting involved in shaping the milestones makes sense since they will be the outcome required for the Next Accreditation System (NAS). We all want to have practical and meaningful assessment instruments, to select when and where observations or evidence is naturally present to capture and how best to aggregate and report the evidence gathered for formative feedback and important decisions. Just underway, through collaboration between APPD LEARN and the National Board of Medical Examiners (NBME), is a feasibility pilot using 7 sub-competencies observable in the inpatient setting. Any interested program that wants to participate in this pilot is welcome - just become an APPD LEARN member! With the recognition that meaningful assessment is ideally constructed with the input of both individuals in the real clinical context (program faculty) and experts in assessment, APPD's collaboration with the NBME aims to provide assessment tools and implementation strategies that will allow for all program leaders to engage in meaningful assessments that can contribute to learner assessment and program evaluation. Stay tuned for an opportunity to contribute in a way that fits your interest, time and resources!

This is an exciting time for Pediatric medical education and for APPD! The incredible talent and collaborative nature of APPD members makes this organization ideally positioned to lead creative and complex change. I look forward to working with and for all of you to minimize struggles, to
facilitate progress and to disseminate lessons learned and associated materials as we strive to develop the best pediatricians.
It gives me great pride to join the APPD Board and assume the role as Communications Director. This is a wonderful organization and I look forward to working for each member program within the APPD and hope to contribute to fostering the energy and momentum of our most recent meeting in San Antonio. Before we move to the theme of this column, I want to first recognize Jerry Rushton, my predecessor as Communications Director on the APPD Board. During his tenure on the board, Jerry provided us with thoughtful leadership and a focused commitment to providing information important to each of us in our program leadership roles.

As I developed this column, I wondered about the many important challenges we face in the leadership positions we hold within our graduate medical education programs. As you will see in Patty Hicks’ Presidents column in this newsletter there are a number of important processes underway which impact us at the very core of our training programs. They relate to curriculum reform, assessments at the program and trainee level and a frame shift to a new accreditation system. Patty has described these efforts and provided an update on these various processes. To augment her column I would like to focus on a commitment to sharing our educational creativity and programmatic innovation that I think is crucial for this organization and critical to the future success of our graduate medical education programs.

What do I mean by sharing our educational creativity and programmatic innovation? I am always impressed what I learn from my colleagues throughout this organization. As Communications Director my hope is to foster further exchange of ideas and interactions between colleagues that are a hallmark of the APPD. As we move forward to meet new training and monitoring requirements that challenge the core structure of our residency programs, we must develop strategies to share in your successes, while also understanding the challenges you have faced. Most important will be to hear the creative solutions to these challenges and how you have addressed them in your programs. One practical idea will be to broaden the goal of the APPD Fall Meeting. While we cannot underestimate the importance of this meeting for new PD’s, APD’s and residency coordinators, the APPD Board is developing plans to modify the focus of this meeting. We are in the planning stages of creating educational sessions related to the new requirements which will be stimulating and informative for both our new educational colleagues and our more seasoned educational leaders, as well. By expanding the scope of the Fall Meeting it will give us an opportunity to learn from you and to share in your educational creativity and programmatic innovation. Don't underestimate the lessons you have learned and the benefit of sharing them with your colleagues.

This is a period of extraordinary educational change - perhaps the most innovative and most challenging period many of us have witnessed in our careers. Throughout the plenary sessions and workshops at our meeting in San Antonio one of the constant themes I heard from colleagues across the country is how to address the many unanswered questions which lay before us. The educational horizon, while bright, is still distant and to get there we may have to travel through some uncharted waters. In her presidential column Patty Hicks has highlighted a number of resources available to us. Think of other ways we can continue to share in our educational wisdom and vision and
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let me know how I can facilitate that in my role as Communications Director. Send me your comments and suggestions (bob.vinci@bmc.org). As you utilize the APPD website what changes would you suggest? What other information or educational resources would be helpful to you? I appreciate the trust you have placed in me by electing me to the APPD Board and I look forward to working with you and learning how I can help promote and enhance communication, especially as it relates to our most important goal; refining our programs to meet the educational needs of our trainees. Send me your ideas and suggestions and, of course, your creative solutions.

Enjoy the summer, your new interns and the excitement related to educational innovation.
As APPD grows in size and influence, the leadership remains focused on preparing the organization for the future, while continuing to be relevant and responsive to the membership.

A few changes to the bylaws are needed as a result of our new structure. The request to vote on these will soon be sent to the Programs for program team consensus decision; the vote will be cast by the Program Director.

In the meantime, please refer to the following communications to learn more about the new governance changes. If you have any questions please feel free to contact Laura Degnon, CAE, APPD Executive Director (laura@appd.org) or Patty Hicks, MD, APPD President (hicksp@email.chop.edu).

Letter from the APPD President 5-31-2012
Audio Message from the APPD Executive Director 5-31-2012
Election Results and Leadership Appreciation

The passing of the gavel: Ann Burke receives a plaque, commemorating her APPD Presidency, from the new President, Patricia Hicks.

During the Plenary Session at the recent APPD Annual Meeting in San Antonio, the following election results were announced by Immediate Past President, Susan Guralnick, MD:

President Elect (2012-2014)

Dena Hofkosh MD, MEd
University of Pittsburgh Medical Center Medical Education Program/Children's Hospital of Pittsburgh

Board Communications Director / Newsletter Editor (2012-2015)

Robert J. Vinci, MD
Children's Hospital/Boston Medical Center
Nominating Committee Member (2012-2014)

Debra Boyer, MD
Children's Hospital/Boston Medical Center

Coordinators' Executive Committee (2012-2015)

Ambrosya Amlong
University of Iowa Children's Hospital

Kelley Pike
Albany Medical Center

Dr. Patricia Hicks joined Dr. Burke in bidding a grateful farewell to the following out-going leaders:

Susan Guralnick, MD (Past President)
Jerry Rushton, MD, MPH (Board Member/Communications Director)
Richard Shugerman, MD (Nominations Committee)
Jaime Bruse, C-TAGME (Coordinators’ Executive Committee)
Avis Grainger, C-TAGME (Coordinators’ Executive Committee)
Linda Waggoner-Fountain, MD, MEd (Research and Scholarship Task Force Chair)
Cliff Yu, MD (Faculty and Professional Development Task Force Chair)
Joel Forman, MD (Learning and Technology Task Force Chair)
Franklin Trimm, MD (Learning and Technology Task Force Chair)
Each year, APPD recognizes individuals who have made significant contributions to pediatric graduate medical education through mentorship, advocacy and leadership.

**The Robert S. Holm, MD Leadership Award** honors a Program Director or Associate Program Director (past or present) for extraordinary contribution in pediatric program director leadership and/or support of other directors as a mentor, advisor or role model.

The 2012 Recipient is:

John Frohna, MD, MPH  
Program Director  
University of Wisconsin Pediatric Residency Program

![Dr. John Frohna receiving the Holm Award](image)

**The Walter W. Tunnessen, Jr. MD Award for the Advancement of Pediatric Resident Education** honors a Program Director or Associate Program Director (past or present) for extraordinary or innovative contribution(s) in pediatric graduate medical education.

The 2012 Recipient is:

Greg Blaschke, MD, MPH  
Associate Professor of Pediatrics  
Oregon Health and Science University
Adam Pallant, MD, PhD (2010-2013)
Executive Director
Laura Degnon, CAE
Associate Director
Kathy Haynes Johnson

Board of Directors
Cynthia Ferrell, MD, MSEd (2010-2013)
Lynn Garfunkel, MD (2009-2013)
Javier Gonzalez del Rey, MD, MEd (2010-2013)
Ann Guillot, MD (2011-2014)
Christopher Kennedy, MD (2011-2014)
Robert J. Vinci, MD (2012-2015)

Coordinators Executive Committee Co-Chairs
Patricia Jacobi (2012-2015)
Kathryn Miller, BS, C-TAGME (2012-2015)

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Dr. Susan Guralnick (left) presents the Tunnessen Award to Dr. Greg Blaschke.

The Carol Berkowitz Award for Lifetime of Advocacy and Leadership in Pediatric Medical Education honors a Program Coordinator for a lifetime of advocacy and leadership in pediatric medical education. The 2012 Recipient is

Cindy Colpitts, C-TAGME
Residency Coordinator
University of Nebraska Medical Center/Creighton University Pediatric Resident Program

Cindy Colpitts (left) is lauded by Dr. Carol Berkowitz in the presentation of the Berkowitz Award.

For further information on these awards and past recipients, please visit www.appd.org/about_us/awards.cfm. Deadline for receipt of nominating is February 12 of each year.
Approved funding for three important projects through the APPD Special Projects grant program was announced at the recent APPD 2012 Annual Meeting in San Antonio. Those projects and their primary investigator(s) are as follows:

**Characteristics of the learning environment that lead to successful use of learning goals in pediatric residency**
Principal Sponsor: Tai Lockspeiser, University of Colorado, School of Medicine
Co-investigators: Ann Burke, MD, Su-Ting Li, MD, MPH, Janice Hanson, PhD EdS, Adam Rosenberg, MD

**Quality Improvement in Pediatric Residency Education: Evaluating Resident Self-Efficacy and Discovering Best Practices in QI Education**
Principal Investigator: Mark S. Craig, MD, University of Rochester
Principal Sponsor/Mentor: Lynn Garfunkel, MD
Co-Investigators: James Moses, MD, MPH, Keith Mann, MD, MEd, John Patrick Co, MD, MPH, Constance Baldwin, PhD, Peter Szilagyi, MD, MPH

**Striving for the Optimal Balance between Service and Education**
Principal Investigator: Jennifer Kesselheim, MD, MEd, Dana-Farber Cancer Institute and Children's Hospital Boston
Co-Investigator: Debra Boyer, MD, Children's Hospital Boston

Congratulations to these excellent projects and thanks to all who submitted proposals! Click [here](#) for a complete list of funded projects.
Meeting presentations and handouts from our extremely successful 2012 Annual Meeting in San Antonio are posted on the APPD website:

**FINAL PROGRAM**

Meeting Presentations

Meeting Highlights and Photos

Day 1: Gathering in sight of the Alamo and adjoining the Riverwalk, the first morning of the APPD Meeting began with the engaging Forum for Chief Residents and Forum for Directors of Small Programs, followed by two very popular pre-conference workshops. The afternoon included an Orientation, Mini-Plenary and workshops for the Coordinators, as well as Grassroots Sessions for PDs, APDs and FDs.

Grassroots Forum for APDs Report

Grassroots Forum for FDs Report

That evening, we all joined together, both old friends and new, for the Networking Reception.

APPD 2012 Spring Meeting Day 1 Photos/Slideshow
Day 2: Early the next morning, attendees were enthralled to hear details from the four best research and QI abstracts during Platform Presentations. During the APPD business session which followed, leadership changes and election results were announced, awards were presented and we heard about APPD's fiscal health. After task force meetings, some attendees participated in a Mentoring Session, with active discussions between mentors and mentees over lunch. In the afternoon, we heard from the ABP, the Subspecialty Clinical Training Initiative, APPD LEARN, and Milestones, followed by an extended session with the RRC regarding the Next Accreditation System (NAS). These reports are posted with other meeting presentations on the APPD website. In addition, please refer to these Written Reports from Other Pediatric Organizations.

Day 3: This day was packed with workshops, regional lunch meetings, a lively poster session with 65 very interesting poster presentations, the second set of task force meetings and a session on Global Health. After a long day of meetings, many attendees enjoyed their escape to the Riverwalk for boat rides, delicious Tex-Mex food, and strolling mariachi bands.
Day 4: The final day of the meeting brought the morning wrap-up session from the grassroots forums and more exciting workshops! Then it was time to head for home...tired, but, at the same time, so energized by all of the rich discussion and learning experiences.
APPD 2012 Spring Meeting Board Activity
The APDs had a very successful program at the recent APPD San Antonio meeting. We officially thanked Dr. Aditee Narayan and Dr. Marsha Anderson for their leadership of the APD SIG for the past three years and welcomed Dr. Heather McPhillips as a co-Chair of the APD SIG.

In the APD Grassroots Forum, we discussed the new RRC requirements, the milestones project, and the next accreditation system. Additionally, we received an update on what the APPD Board has been working on. The APD SIG leadership reviewed survey data on the many roles APDs have within their program and we had a group discussion on the needs of APDs. Ideas included an “APD toolkit or survival manual” and a template for an Academic Development Plan tailored toward APDs. Finally, we were all treated to 3 outstanding presentations by APDs, selected from submissions from around the country:

1. Dr. Ryan Bode from Phoenix Children’s Hospital described a unique track system that helped their program individualize resident education and might be a model for compliance with the new RRC requirements.
2. Dr. Rosina Connelly from University of South Alabama shared their program’s experience with changing their inpatient rotation to meet duty hour requirements and standardize the handoff process between residents.
3. Drs. Frey and Zella from Mass General showed us how to teach at night from home using Skype!

This was both one of the best attended grassroots sessions we’ve had to date and clearly one of the liveliest with terrific participation by all. The slides of the presentations have been posted to the APPD website under the Meetings/Spring Meeting tab from the home page. Scroll down to the Grassroots Forum for Associate Program Directors (you will need your login and password to access the APPD website): **APPD 2012 Spring Meeting Presentations**. In addition to the PowerPoints, Dr. Connolly sent along a more thorough example of the rubric they developed and used at her program for implementing change which you might find interesting and useful, and this will be posted as well.

The APD SIG also sponsored a workshop headed by Dr. Marsha Anderson that reviewed...
setting an academic roadmap as an APD. This information is also available on the APPD website.

Finally, after soliciting interest from our membership at the spring meeting and in follow-up email, Dr. Lynn Gardner was selected as the third co-Chair of the APD SIG for a three year term. Welcome Lynn!

Click here to return to the 2012 Annual Meeting page.
Grassroots Session for Fellowship Director's Report

Christopher S. Kennedy MD, Fellowship Director Board Representative

We welcomed twenty-one participants representing fellowship educational staff and program directors from GI, Critical Care, Developmental/Behavioral Pediatrics, Pediatric Emergency Medicine, Child Neurology, Child Abuse, Endocrine, Cardiology, Pulmonary, Infectious Disease and Hematology/Oncology.

Three main topics were discussed during the session and included:

1. Subspecialty Clinical Training & Certification Initiative (SCTCI)- Program directors’ thoughts and opinions related to clinical subspecialty training
2. Are incoming fellows prepared to start training?
3. Is there a changing culture around “patient ownership”?

Topic 1 - Subspecialty Clinical Training & Certification Initiative

Rob Spicer presented a brief orientation to the American Board of Pediatrics (ABP) and Council of Pediatrics Subspecialties (CoPS) joint grassroots sessions with subspecialties to gather thoughts and opinions about subspecialty clinical training in pediatrics. Subspecialty program directors then discussed a series of questions posed by Dr. Spicer.

What is good about current training?

Flexibility was highlighted as the best part of subspecialty clinical requirement from the program directors’ viewpoint. Because the guidelines are general, rather than restrictive, directors can design how they want to satisfy them. This permits a wide variety of solutions to clinical training needs tailored to the program strengths. This allows for fellows to develop niche interests, and programs to develop expertise. Other current strengths cited included the ILP’s process, and the clarity and guidelines for the scholarly process. Program directors’ expressed consensus that program length is okay at 3 years, and that programs should self-determine based on the training they provide fellow careers- such as research based, teaching/educator.

What needs to change?

Lack of specific detail in clinical guidelines may challenge new programs’ development. The need for clinical coverage may challenge fellows’ personal development at some programs not others. Most program directors expressed strong support for the Pediatric Milestone/EPA concepts but expressed equally strong concern for the lack of specific subspecialty milestones developed. They expressed deep concern regarding how to solve this issue. Current status of the problem is that there is variation but little expertise at the individual program director level to address this issue. Subspecialty program directors expressed a need for resources and identification of where to go for help related to the Milestones concept. They felt strongly that the subspecialty milestones should be in continuity with
milesstones from general pediatrics- so that they build on one another.

Do we need clinical oversight committees?

Consensus was that another committee was not needed. Currently some programs detailed evaluations of clinical ability, while others rely on the “gestalt” of faculty for clinical evaluation.

General Issues were also identified in the course of the discussion- Lack of interaction to discuss key issues on the local regional and national level is a significant problem among individual fellowship programs. Some programs are isolated with little external structure or support, contrasted with other training programs that have institutional coordination and infrastructure to provide joint conferences for all fellows.

**Topic 2- Are incoming fellows prepared to start training?**

Council of Pediatric Subspecialties (CoPS) conducted a survey of program directors in subspecialty pediatrics regarding the new duty hours and training requirements for categorical residents and the major themes of the results were reported. 89 programs responded and the major themes identified included: Limiting clinical exposure may compromise interest in subspecialty care and pipeline; Residents may lack awareness of the concept of patient ownership; Limited procedural exposure will limit community readiness to care for the newborn and ill child in rural settings; and that General pediatrics capabilities may be compromised which may affect the medical home in the community.

Program directors during the grassroots session agreed with these concerns and expressed that even in their programs some have the ability to adjust fellows’ clinical coverage responsibilities to match their ability and recognize that fellows seem to need extra help. Program directors expressed strong concerns that training programs with high procedural needs must offer pre-training, or boot camps to fill in gaps in preparedness. All program directors present felt that a system to monitor global changes in fellow gaps is needed.

**Topic 3 Is there a changing culture around “patient ownership”?**

During the final 10-15 minutes of the session program directors were asked about their thoughts regarding the concept of patient ownership and responsibility. Strong concerns were expressed about residents’ and now incoming fellows’ lack of commitment to patients. Both short-term and long-term changes/concerns were indentified for individual patients, commitment to colleagues and commitment to profession over all. Concerns discussed included the impact of “shiftwork training mentality.” Directors expressed the need for a survey of attitudes of trainees, paired with tracking their level of involvement.

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Leadership

President
Patricia Hicks, MD (2012-2014)

President-Elect
Dena Hofkosh, MD, MEd (2012-2014)

Past-President
Ann Burke, MD (2012-2014)

Secretary-Treasurer
Adam Pallant, MD, PhD (2010-2013)

Executive Director

Coming together to learn & share at the

2012 APPD Fall Meeting
October 3-5, 2012

Renaissance Arlington Capital View Hotel
Arlington, VA

Early Registration Opens late July

Preliminary Meeting Overview

Managing the Basics while Looking Toward the Future
Pre-meeting (October 3rd 1-5pm)

Introductory Basics for Program Directors and Coordinators

- For new members of the program team who want a small group interactive afternoon with exposure to experienced program team members

Keynote Dinner
Guest Speaker: Grace Caputo, MD, MPH – PD and DIO at Phoenix Children’s
(October 3rd, 7-9pm)

Core Meeting (October 4-5, 8am-5pm)

Key Strategies & Practical Examples for Addressing New Program Requirements:
Innovating for the Future

- Designing curriculum that offers Six Career-focused Educational Units
- Development and design of a faculty mentor-for-residents program
- Faculty development opportunities in an innovative program
- Participating in meaningful assessment of residents
- Program evaluation for the Next Accreditation System

New Program Director Tips and Pearls: Basic Program Leadership Skills

- Year in the Program
- Successful Recruitment
- Overview of key pediatric organizations and their roles

Something for All Program Members: Stay Connected to each other

- Associate Program Directors’ Curriculum
- Coordinators’ Curriculum
- Fellowship Program Directors’ Curriculum
- Mentoring
APPD LEAD Selects First Cohort: New Program Director School Begins

Franklin Trimm, M.D.
APPD LEAD Council

APPD’s new Program Director school is called APPD LEAD, Leadership in Education Academic Development. Starting with a vision of the APPD Board and expressed needs of the membership, the concept of a Program Director School has developed into a program that will start with the first cohort of participants this July.

It began with the APPD leadership developing some core concepts about what the school would be and how it would be developed and run. A call was sent out to the APPD membership for individuals who would be interested in being involved in the Council, the group that would further develop and implement the school. There was a strong response to this call, making the decision making process for APPD leadership a challenging next step.

The individuals selected for the Council are:

- Susan Bostwick, MD; New York Presbyterian – Weill Cornell
- Grace Caputo, MD, MPH; Phoenix Children’s Hospital
- John Frohna, MD, MPH; University of Wisconsin
- Hilary Haftel, MD, MHPE; University of Michigan
- Su-Ting Li, MD, MPH; University of California-Davis
- Franklin Trimm, MD, Council Chair; University of South Alabama
- Linda Waggoner-Fountain, MD, Med; University of Virginia

The Council has further developed the overall goals for LEAD, set up and completed the first application round for participants and is finalizing the curriculum. LEAD will be a one-year program beginning with a stand-alone 3-day meeting followed by additional time and activities coupled with the Fall and Spring APPD meetings. Participants will also develop a project to complete over this time frame. The first meeting is scheduled for late July, 2012 and the Council is looking forward to getting to work with the first cohort of LEAD participants.

Members of this cohort include residency program directors, residency associate program directors and fellowship directors and represent a notable level of experience in educational leadership.

Members of the first cohort are:

- Marsha Anderson, MD; University of Colorado
- Chad Brands, MD; All Children’s Hospital Johns Hopkins Medicine
- Susie Butcher, MD; Emory University
- Michele Carney, MD; University of Michigan
- Joseph Cernich, MD; Children’s Mercy Hospital
- Stephanie Dewar, MD; Children’s Hospital of Pittsburgh
- Diane Ferran, MD, MPH; Columbia University / Harlem Hospital Center
- Geoffrey Fleming, MD; Vanderbilt University School of Medicine
- Bruce Herman, MD; University of Utah
- Jay Homme, MD; May Clinic
LEAD is off to an enthusiastic start in establishing a nationally recognized program to develop and promote excellence in pediatric graduate medical education leadership. Stay tuned for updates over the course of the year. Now is a good time to begin planning for you or others in your program to apply to the 2013-2014 cohort. Additional information on APPD LEAD is available at: https://www.appd.org/ed_res/LEAD.cfm
Since the Spring Meeting, APPD LEARN, your educational research network, has been active. We have begun to contact programs to participate in our pilot study with the National Board of Medical Examiners to study assessment of a subset of Pediatric Milestones. A small number of APPD LEARN sites have been serving as an early test group for this pilot, and their experiences will help us provide support to the next set of programs. We expect to announce additional studies related to Milestones in partnership with IIPE later this year.

APPD LEARN also recently published its first call for proposals from member sites to submit educational research projects that would benefit from using the APPD LEARN network, data repository, and project support. The first review cycle will include proposals received by August 31, 2012. Complete details may be found on the APPD LEARN website, http://learn.appd.org. As these proposals are approved, we will be contacting member sites to invite you to participate in these study opportunities.

Behind the scenes, we have been continuing to work on network infrastructure. We have developed a de-identification tool for APPD LEARN studies that can also be used by other sites and networks that want to conduct their own studies but make their data linkable to APPD LEARN data and share it through our repository. We are in the process of publishing a set of authorship principles for scientific communications arising from APPD LEARN data. The APPD LEARN Educational Development Committee is actively considering ways to provide members with additional training in educational research, and the Proposal Review Committee is refining the procedures it will use for reviewing new proposals.

As always, Eric Shropshire and I welcome your questions and feedback by email at learn@appd.org.
Kelley Pike, Albany Medical Center
On behalf of the APPD Coordinators’ Executive Committee

The 2012 Annual Meeting in San Antonio, Texas this spring had the theme of “The Evolution of Residency Training: Adapting and Innovating In a New Era.” With all the changes on the horizon, that was the perfect theme. Day one of the meeting welcomed new coordinators with a short orientation and then seasoned and new coordinators joined for the mini-plenary session and a few workshops to get started. Weighing on everyone’s minds was the NAS (Next Accreditation System) and the Milestone Project and how it was going to affect residency education. The coordinators’ section had workshops on dealing with changes, embracing technology, ensuring the continuity of the program, coordinator and the academic year, and, lastly, NAS: What We Know and Don’t Know. Each year the coordinators raise the bar and the workshops and presentations just get better and better. Thank you to all the presenters.

These first-time attendees were heartily welcomed in San Antonio!

We want to give thanks and appreciation to Jamie Bruse and Avis Grainger for their three years of service as members of the Coordinators’ Executive Committee. Their commitment and dedication has continued to strengthen the coordinators’ section and helped increase the quality of the sessions for coordinators.

Many thanks to out-going Coordinators’ Executive Committee Chairs, Avis Grainger (left) and Jaime Bruse.
Lastly, again this year, mentors were assigned to new coordinators to help them along their journey as a coordinator. If you are interested in being a mentor or in having a seasoned coordinator as your mentor, please contact Jean Ashley at jean.ashley@nortonhealthcare.org

Many coordinators attending the APPD 2012 Annual Meeting took a break between sessions for this group photo!

Task Force Updates
Our task force committees continue to receive positive feedback and we thank the respective chairs of the Management/Supervision, Professional Development, and Tools Task Force. During the meeting in San Antonio, there were two dedicated task force sessions during which members met to continue their work.

The Professional Development Task Force co-chairs are Vanessa Goodwin (University of Vermont) and Therese D’Agostino (Massachusetts General Hospital). The goals of the task force are to assess the educational needs for coordinators, develop workshops for APPD meetings, increase professional development within the coordinators’ section, update the APPD coordinator job description, and help to promote a better understanding of the role of coordinators and their duties at many levels (institutionally, nationally, regionally). If you are interested in joining this task force, please contact Vanessa Vanessa.goodwin@vtmednet.org or Therese tdagostino@partners.org

The Management/Supervision Task Force co-chairs are Celeste Farley (University of Buffalo) and Teresa Woods (St. Louis University School of Medicine). The goals of the task force are to create a forum where coordinators can discuss their experiences supervising assistants, developing a job description for assistants, and develop management/supervision workshops for APPD meetings. If you are interested in joining this task force, please contact Celeste cfarley@upa.chob.edu or Teresa twoods11@slu.edu

The Tools Task Force co-chairs are Sandra Barker (Phoenix Children’s Hospital/Maricopa Medical Center), Kathleen Sheppard (Children's Hospital of Michigan) and Mary Anne Wesner (Geisinger Medical Center). The goals of the task force are to help simplify the tasks of coordinators, gathering information on software and technology used in training programs, enhancing and revising the Coordinators’ handbook annually, developing technology workshops for APPD meetings. If you are interested in joining this task force, please contact Sandra sbarker@phoenixchildrens.com, Kathleen ksheppard@dmc.org or Mary Anne mwesner@geisinger.edu.

The summaries above are just a sampling of what each group is working on. Please get in touch with any of the co-chairs to participate.

TAGME (Certification) Update
Congratulations to our newest TAGME diplomats:
Rebecca Hasegawa, C-TAGME from the Medical University of South Carolina
Ambrosya Amlong, C-TAGME, University of Iowa
Karen Ariemma, C-TAGME, University of Tennessee
Vanessa Goodwin, C-TAGME, University of Vermont
Ellen Marr, C-TAGME, Southern Illinois University
Kathy Morten, C-TAGME, Children's Hospital of Colorado
Teresa Woods, C-TAGME, Saint Louis University
If you are interested in becoming certified as a Training Administrator of Graduate Medical Education, please visit the TAGME website at www.tagme.org for information about eligibility, application materials, and deadlines for the upcoming fall 2012 and spring 2013 assessment cycles.

**Congratulations**
Cindy Colpitts of the University of Nebraska Medical Center was honored as the 2012 Recipient of the Carol Berkowitz Award for Lifetime of Advocacy and Leadership in Pediatric Medical Education. Cindy received a standing ovation at the meeting in San Antonio for this special recognition.

**Mark your calendars** for the 16th Annual APPD Fall Meeting, October 3-5, 2012 at the Renaissance Arlington Capital View Hotel in Arlington, Virginia. This meeting is being totally revamped this year to include an *Introduction to Basics for NEW Program Coordinators and their Directors* pre-meeting course, plus a wide variety of sessions addressing the Next Accreditation System, updates from the AAP, ABP, ERAS, and NRMP, and other important information for coordinators and fellowship coordinators needing a refresher, new ideas and networking opportunities.

You also won't want to miss the APPD/COMSEP 2013 Combined Annual Meeting April 10-13, 2013 in Nashville, Tennessee.
It is a great privilege to succeed Patty Hicks as Associate Editor for the View from the APPD pages of Academic Pediatrics. I know I speak for the entire APPD membership in thanking Patty for all that she has done to create what has become a vitally important voice for APPD related to pediatric graduate medical education. For those of you who do not know me, I have been a residency director for over 15 years and am currently the Program Director at the University of California, San Francisco. My research efforts focus on developing better ways to measure competencies and skills in medical education and understanding how these measures are related to clinically important outcomes in patient care.

As members of APPD, we serve as leaders in pediatric graduate medical education at a time of tremendous change in medical education. No doubt these changes present great challenges, but also tremendous opportunities. The purpose of the APPD Pages is to provide a voice for APPD membership to help shape the discussion about and direction of pediatric graduate medical education.

Anyone associated with APPD may submit a manuscript for consideration for publication in the View from the APPD pages. Although any topic will be considered, we are particularly interested in manuscripts that address curricular innovation, implementation of the new ACGME program requirements and compliance with the new accreditation system, implementation of the Pediatric Milestones, competency-based assessment (including the development and use of EPAs), and other innovative approaches to pediatric training. In general, manuscripts should be less than 2000 words and the use of figures or tables will need clear justification. All manuscripts should be well grounded in evidence published in the medical and education literature. Manuscripts that pair more junior authors with well-established senior authors are particularly desirable. Finally, all manuscripts will undergo peer review consistent with the policies of Academic Pediatrics.

I look forward to working with you in the years to come. If you have questions, ideas for manuscripts, or wish to submit a manuscript, please email me at westdc@peds.ucsf.edu.
# Regional Happenings

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## Leadership

**President**
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**President-Elect**
Dena Hofkosh, MD, MEd (2012-2014)

**Past-President**
Ann Burke, MD (2012-2014)

**Secretary-Treasurer**
Adam Pallant, MD, PhD (2010-2013)

## Midwest Region

**APPD Southeast Region Meeting**
September 7-9, 2012
All Children's Hospital, St. Petersburg, Florida
[Click here for more information](#)

**APPD Midwest Region Meeting**
October 26-27, 2012
Minneapolis, Minnesota

**APPD New England Region Meeting**
October 29, 2012
Dartmouth-Hitchcock Medical Center, Lebanon, NH

**APPD New York/New Jersey Regional Meeting**
October 26, 2012

## APPD Regions by State (for a listing of programs by region, [click here](#))

**Mid-America:** West PA, OH, WV, KY, IN, MI

**Mid-Atlantic:** Southern NJ, East PA, DE, MD, Washington DC

**Midwest:** IL, WI, MN, IA, MO, KS, NE, OK

**New England:** ME, NH, MA, CT, VT, RI

**New York:** NY, Northern NJ

**Southeast:** VA, NC, SC, GA, FL, AL, MS, LA, AR, TN, PR

**Southwest:** TX

**Western:** CA, NV, OR, WA, HI, CO, NM, UT, AZ, AK
The Midwest region met in San Antonio, having a wonderful lunch and active discussion about the Next Accreditation System. The group has agreed to hold the fall meeting in Minneapolis, Minnesota on October 26-27 with a Friday evening meal and programming on Saturday. The region also said farewell to our Program Director Chair, Stacy McConkey, who will be leaving the University of Iowa to start a brand new pediatric residency at Florida Children’s Hospital, Walt Disney Pavilion. The group all wished her the best, and encouraged her to come back to the Midwest. Since Dr. McConkey would have one year remaining as the Program Director Chair, we opened the floor for nominations. Dr. Amy Stier, who will be replacing Dr. McConkey as the Program Director at the University of Iowa, has agreed to serve in this role for the upcoming year. Our group discussed the possibility of creating “areas of expertise”, a forum for programs to share their strengths, as an opportunity for other programs in the Midwest to model. Everyone left the meeting excited about the pending changes with the Next Accreditation System.

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The New England Pediatric Program Directors regional group held its annual spring meeting at the Bay State Medical Center Children's Hospital, hosted by their Pediatric Residency Program, on April 25, 2012. Attendance included program directors and associate program directors, coordinators, chief residents and clerkship directors.

The meeting was opened with a greeting by Dr. Lindsey Grossman, Chair Pediatrics at Baystate Children's Hospital, and Dr. Laura Koenigs, the Pediatric Residency Program Director. This was followed by a presentation to the combined group by Dr. Kevin Hinchey, Interim Chief Academic Officer, Baystate medical Center and Program Director, Internal Medicine on "Milestones in Practice." Group breakout sessions were then held.

The rising and current Chief residents reviewed and discussed the essentials of being Chief Resident. The Program Coordinators reviewed upcoming changes in program administration, including the coordinator's role in the New Accreditation System. They went on to discuss workshop ideas for next year's APPD meeting. The Program Directors and Associate Program Directors discussed the use of regional dues and the development of a regional research collaborative effort. It was decided to proceed with an initial project of burnout and quality of life for resident significant others. It was decided to develop further efforts in the context of LEARN and using on-line resources like "GoToMeeting."

In the afternoon, programs presented innovations: Dr. Kimberly Gifford of Dartmouth presented their "Doctor Coach" model for faculty development. Dr. Dennis Basila of Albany Medical Center presented their "CARE" program (advocacy program). Dr. Christine Skurkis of the University of Connecticut presented the plan for restructuring inpatient services at Connecticut Children's Medical Center.

The NPPD will hold their Annual Fall Regional Meeting at Dartmouth on October 29, 2012, and the Annual Spring Regional Meeting will be held at Albany Medical Center March 22, 2013.

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Ambrosya Amlong, C-TAGME, Coordinator Chair

The NY/NJ Region held its Spring Meeting on March 23, 2012 at the Corporate Learning Center of Jacobi Medical Center, Bronx, New York. Approximately 80 Program & Associate Program Directors, Chief Residents, and Program Coordinators attended the meeting, representing 20 programs.

The meeting started with presentations by Steven Barone, MD about career tracking for residents at Cohen Children's Medical Center and Rachel Katz, MD about the Resident as Teacher program at Albert Einstein/ Jacobi Medical Center. Everyone left with ideas to take home.

Susan Bostwick, MD presented follow up of the Child and Adolescent Psychiatry for Primary Care fellowship recently implemented by the New York State Department of Health. The idea is to train pediatricians to diagnose and treat common psychiatric illnesses in order to improve mental health service delivery. The Department of Health has specifically reserved space for program directors with the hope that this knowledge will be introduced into residency training continuity clinics. Several New York program directors will participate in the program.

Susan Guralnick, MD presented information about the new ACGME accreditation system. This was followed by an open forum. Lively discussion ensued about both the interpretation and various strategies for accommodation. Most of these issues were subsequently discussed at the national meeting (such as “educational units” and “individualized curriculum”…). While no one had the perfect solution, everyone shared their attempts to satisfy all the requirements of the ACGME while trying to promote a learning environment and providing care for patients. These issues will be discussed at the next meeting in the fall.

The fall meeting was scheduled for October 26th 2012.

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The Southeast Region met on Friday, March 30th as part of the 2012 APPD annual meeting. In advance of the meeting, the Chair and Coordinator developed a survey of possible "hot topics" that was sent out to all members in an effort to organize the discussion. Response to the survey was excellent and was very helpful in selecting the topics that were of most interest to the members.

At the time of the group meeting, we immediately recognized the leadership of APPD for their wisdom in changing the time for the Regional meetings from an early breakfast to lunch. This is much appreciated.

We did spend time comparing notes on a few "hot topics" from the pre-meeting survey including revised coverage models and handover training and education. A few programs shared "best practices" with the group. However, the majority of our meeting time focused on concerns regarding the proposed RRC program requirements and consideration of an additional regional meeting at another point in the year.

Following comments from the RRC leadership earlier in the week, there was much conversation focused on concerns regarding the proposed RRC program requirements for pediatrics to be implemented July 2013. Specifically, the group was concerned about the inpatient cap of 16 educational units and the feasibility of 6 educational units of individualized curriculum time that cannot overlap with the 9 educational units of subspecialty experience. The group was concerned that the amount of individualized curriculum time would lead to lack of reliable and predictable resident presence with career goals that vary from one class to another. They were concerned about financial impact on departments and health systems, and they were, fundamentally, concerned about the robustness of resident education if residents become "drop in" learners on teams that are designed to function in their absence. The group charged the Region Chair with drafting a letter of concern to the RRC and members agreed to add their names to letter after review. At the time of letter submission, we were anticipating that the final version of the program requirements would be released following the April RRC meeting. At the writing of this summary, that document has been disseminated. The 16 educational unit limitation on inpatient time was not included in the follow up document. There has not yet been clarification about the ability to double count subspecialty experiences with individualized curriculum time. In reference to our letter, a follow up email from Caroline Fischer at the RRC contained the following statement:

"The Committee is taking your comments into consideration in finalizing the requirements and developing the FAQs to clarify the intent of some of the requirements. The RC will finalize the FAQs in July including clarifications of which experiences may overlap."

We had an exciting discussion focused on the development of an additional regional meeting at another point during the year. The Chair noted that we are the only region of the APPD that does not have a separate regional meeting. There seemed to be significant interest in developing such a gathering. Dr. Chad Brands and Dr. Raquel Hernandez at All Children's Hospital in St. Petersburg, Florida graciously offered to host an initial meeting. Subsequently, an invitation to attend has been extended to all members of the APPD Southeast Region. The date has been set for Friday, September 7 through Sunday, September 9, 2012 at All Children's. Please consider joining us for what will certainly be a great event. Click here to view the invitation.
The annual meeting of the Southwest Region of the APPD began with a transition of leadership and acknowledgement of the work Dr. Surendra Varma and Judy Behnke had invested into the region. Following that, Dr. Courand, Program Director from the University of Texas HSC in San Antonio, congratulated the region on two firsts: 100% matching in the state without any program needing to enter into the SOAP process, and the completion of the first state-wide survey of all pediatric residents. This was followed with a review of the data showing that a large percentage of pediatric residents in Texas believed they were well prepared for changes in the Common Program Requirements, that they were well instituted and that many aspects like handover of patients was being performed successfully at their respective institutions. That said, many believed that there were still significant sleep and fatigue issues, and there was mixed feelings on whether the new requirements had improved resident quality of life or patient safety. Following this, Dr. Teri Turner, Associate Program Director from Baylor College of Medicine, gave an excellent overview of the Milestones Project and the initial approach that Texas Children's Hospital was taking amidst the uncertainty. Finally Beth Payne, MAED, C-TAGME, Manager of Academic Programs at University of Texas HSC in San Antonio, gave a concise overview of the activities in the Southwest Region Coordinator section and then highlights of the work of ACTION, a state-wide organization devoted to the growth, development and influence of the Graduate Medical Education Program Coordinators in the state of Texas. The meeting ended with individual program reports by the Program Directors in the state. There are many exciting undertakings happening within the State! Click here to view the meeting minutes.

Click here to return to the Regional Happenings page.
The Western Region meeting in San Antonio was held on March 30, 2012 during lunch and was well attended. Thanks were given to Dr. Adam Rosenberg, who concluded his term as Chair of the Western Region. Lilia Parra-Roide, Associate Program Director in Phoenix, was elected the new Western Regional Chair. Dr. Kate Perkins volunteered UCLA to host the 2013 Regional Meeting which has been held in February the past two years. More information will follow to members regarding the date and time for the 2013 Regional Meeting.

The February 17th Western Region Meeting at Phoenix Children's Hospital had excellent attendance with many programs represented. The meeting was informative and collegial. Focused topics included milestones, individualized tracks and an update on the PEDSCO. The region celebrated success in collaboration among the programs with the Western Region APPD Special Project led by Dr. Dan West from UCSF, "Developing a Pediatric Specific Structured Clinical Observation Tool," and the Night-time Curriculum Project by Dr. Becky Blankenburg at Stanford. These projects were both presented to the national APPD membership. Dr. Tai Lockspeiser from Children's Hospital Colorado was introduced as recipient of an APPD grant to study the characteristics of the learning environment that lead to successful use of learning goals in pediatric residency; she is recruiting interested sites.

Dr. Dan West gave an update on the PEDSCO project and stated that his goal is to cut the sections down to about one-half the current size. He is interested in developing an "app" for phones so that people could bring up and fill in the document on their phone. Another goal is to look to see if this can be tied to the milestones.

Dr. Becky Blankenburg gave an update on the Night-time Curriculum: Version 1 of the Night-time Curriculum project will be amended based on feedback. This will be submitted to MedEd Portal and the APPD Share Warehouse. Version 2 will be a more interactive format in a web-based platform.

A small amount of time was devoted to a dues discussion: the portion of our APPD dues that goes into an account for the Western Region. There is approximately $12,000 currently that could be used. In past meetings the region has discussed whether some of it could be used to support attendance at regional meetings. A process is needed to be able to "vet" the use. A suggestion was to form a small subgroup to look at requests. Other ideas suggested were to use it to bring a speaker to a regional meeting or to be used to support a regional research endeavor. Please forward comments or ideas to the Regional Chair: Dr. Lilia Parra-Roide, lparraroide@phoenixchildrens.com.

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Executive Director

The APPD has five main task forces (Curriculum, Evaluation, Faculty and Professional Development, Learning Technology, and Research). APPD members are welcome to join a task force - there is no additional fee, requirement, or specific skill needed. Join in a task force during the annual spring meeting or between meetings by contacting the APPD office (info@appd.org).
The Curriculum Task Force has had another busy year, culminating in a variety of activities during the APPD Annual Meeting in San Antonio. For the first time, the Task Force sponsored a pre-conference workshop focused on “Teaching Residents to Teach Themselves,” with more than 60 attendees from among the APPD membership. Large group sessions focused on motivation, generational learning, self-determination, and self-reflection, while breakout sessions allowed small-group work related to individualized learning plans, and useful tools to promote self-directed learning both during and following residency.

Once again this year, we continued our tradition of a Task Force sponsored workshop consisting of platform presentations focused in one curricular area. This year’s focus was on “Tools for Teaching Communication Skills Related to the Exchange of Patient Care Information.” Presentations can be found on the APPD website with other meeting documents, and included Effectiveness of a discharge education curriculum for interns rotating on an inpatient pediatric ward (Julie Noffsinger, presenter); Resident curriculum to improve effective electronic medical record documentation (Suzanne Lopez, presenter); Teaching residents to “teach-back”: does a structured curriculum including simulation improve pediatric resident communication skills? (Robyn Strosaker, presenter); Development of a simulation-based module to teach handovers to pediatric residents (David Johnson, presenter); and Sign out competence: easier said than done (Sarah Rawstron, presenter). Our thanks to the presenters, and all of the participants in the great discussion that ensued.

During the Curriculum Task Force meetings, we heard updates from APPD members involved in a range of curriculum projects, including Mental Health (Sue Bostwick); Grief and Loss (Janet Serwint); Medical Home (Aditee Narayan); Resident as Teacher (Shari Whicker); Surgery (Kim Boland); Nutrition (Cindy Ferrell); Quality Improvement (James Moses and Lynn Garfunkel); Global Health (Sabrina Wagner and Chuck Schubert); Disaster Preparedness (Donna Staton); Nighttime Curriculum (Becky Blankenburg);and Pediatric Hospital Medicine (Nicole Black). Members of the Task Force also had an opportunity to participate in break-out groups working on curricular projects in various stages of development, including Nighttime Curriculum, Global Health, and Quality Improvement. Members also began work on a project to create a centralized “Curriculum Inventory.” Our goal for this project is to establish an online catalog which will provide program directors and other interested educators with a listing of available curricula, and a detailed description of each, as well as information about how to find and use the curriculum within their own programs. We hope to form a working group to move this project forward over the next year, and would love to identify additional interested members.

Stay tuned for more information about these and other projects, and look for opportunities to become involved! Contact Karin Hillenbrand (hillenbrandk@ecu.edu) or Becky Blankenburg (rblanke@stanford.edu) about these or other curriculum projects.

Click here to return to the Task Force Reports page.
Evaluation Task Force

At the Annual meeting in San Antonio, members of the Evaluation Task Force began work on a series of PowerPoint modules to accompany the ABP/APPD manual Assessment in Graduate Medical Education: A Primer for Pediatric Program Directors. These modules will be designed for program and fellowship directors to use as faculty development tools, to familiarize the faculty broadly with principles and techniques of assessment, particularly around the competencies. The intent is that upon completion modules will be made available to all pediatric program directors and fellowship directors online. Content closely follows the Primer content, and will also incorporate information about milestones where appropriate. The ABP is supportive of plans to move forward with the project. Teams started work on modules for 5 of the 6 competencies (Patient Care, Professionalism, Interpersonal and Communication Skills, SBP, PBLI) at the task force meetings and in some cases chapter authors from the Primer were able to participate during the meeting. Work groups are continuing to work on their modules this spring and summer, with at least one nearing completion of content. We welcome anyone interested in joining a work group at this point (or in starting the Medical Knowledge module work group!).

Click here to return to the Task Force Reports page.
The APPD Faculty and Professional Development Task Force was quite busy this year with activities related to the APPD Annual Meeting in San Antonio, TX. In addition to the two Task Force meetings, the Task Force was responsible for 3 major elements of the Spring program: 1) a preconference workshop, "Leading Teams, Managing People, and Making Projects Scholarly - Essential Professional Development for Program Directors”; 2) the Forum for Chief Residents; and 3) the APPD Mentoring Session.

The preconference workshop was designed to meet the membership needs based on a targeted needs assessment survey of the APPD membership. Ten Task Force members participated in the development and presentation of the workshop. 60 participants were in attendance and the feedback was quite positive.

The Task Force Chair, Cliff Yu and Vice-Chair, Nancy Spector, coordinated the planning and execution of this year's Forum for Chief Residents. Erin Giudice, Cindy Ferrell, Ed Zalneraitis, and Ken Roberts facilitated the session, together with 24 faculty, which was delivered to approximately 110 chief residents (approximately 2/3 rising chief residents and 1/3 graduating chief residents). Morning workshops were selected from submissions from Chief Residents and Task Force members. The afternoon session focused on professional development and featured 2 tracks: one for rising chief residents and one for graduating chief residents. Overall, the Forum was very well received.

This year's APPD Mentoring Session focused on dyadic mentoring. More than 60 new mentor-mentee dyads were paired and approximately 10 existing mentor-mentee dyads also attended. During this past year, the APPD Mentoring Program Planning Committee developed the APPD Mentoring Toolkit. Portions of this toolkit were distributed to the mentor-mentee dyads. The membership of the APPD Mentoring Program Planning Committee, co-chaired by Nancy Spector and Rhonda Graves Achonolu, includes Marsha Anderson, Janet Serwint, Aditee Narayan, Ted Sectish, Teri Turner and Cliff Yu. This group is working with the Evaluation Task Force to develop a plan for incorporation of facilitated peer group mentoring groups into their Task Force Meetings. Some of these facilitated peer groups plan to continue working together during the upcoming year.

The Task Force had 2 very productive meetings with approximately 50 Task Force Members in attendance at each meeting. Cliff Yu and Nancy Spector gave an overview of the accomplishments of the Task Force during the past year, as well as the accomplishments during the meeting. The following issues were discussed:

- Pursue opportunities for implementation of faculty and professional development curricula based on our comprehensive needs assessment survey of APPD membership. We will continue to explore opportunities to deliver topics in both the Fall and Spring Meetings. Our focus will be on leadership and professional development topics at the Spring Meeting, particularly within pre-conference workshops and on basic educator development topics at the Fall meeting for newer program directors.
- Conduct a new needs assessment, given the many upcoming changes in RRC requirements, Milestones, etc.
- Plan for initiation of facilitated peer group mentoring projects within our own task force, as well as others based on the specific projects.
- Create an electronic, annotated faculty development program inventory with input and commentary by program alumni throughout our APPD membership.
• Expand the dyadic mentoring program through the continued development and dissemination of the APPD Mentoring Toolkit.
• Continue to evolve and develop the Forum for Chief Residents as a key vehicle for faculty development of our newest and youngest APPD members.
• Discuss and consider the development of a mentoring program for Chief Residents
• Work with members of the Program Director School Council to develop complementary avenues for individual faculty and professional development that will be available to all APPD members.
• Create a committee structure with the Task Force based on major activities
  ◆ Mentoring Program Planning Committee
  ◆ Educator Development Curriculum Committee
  ◆ Professional Development Curriculum Committee
  ◆ Chief Resident Forum Planning Committee
  ◆ Needs Assessment Survey Committee
  ◆ Inventory of Faculty and Professional Development Courses and Programs Planning Committee

Finally, the Task Force would like to thank Cliff Yu for his tremendous leadership over the past 3 years as Task Force Chair. Nancy Spector has assumed the role of Task Force Chair and is currently soliciting the names of candidates for the Vice Chair position, as well as for leadership of the other Faculty and Professional Development Task Force Committees.

Click here to return to the Task Force Reports page.
The APPD Learning Technology Task Force underwent a leadership change during the San Antonio meeting. The LTTF thanks Joel Forman and Franklin Trimm for their leadership over the past years, and announces that Emily Borman-Shoap, APD for the University of Minnesota program, and Mark Hormann, APD for the University of Texas Houston program, will be taking over the reins for the next few years. Emily will be serving a three year term and Mark will be serving for two years, getting the LTTF back into a rotating leadership.

During our first meeting we had a lively (and some may say heated) discussion about the nature of our group. In some ways, the LTTF behaves as a Special Interest Group in that many people coming to the meetings are interested in new technology to assist in resident education. Participants come just wanting to talk about their technology and listen to what others are doing at their institutions. Particular interests cropped up in ways to teach at night, useful electronic curricular platforms, and teaching and assessing within the EHR. However, there are elements of our "charter" that are task oriented, such as disseminating reviews of technology to the group as a whole.

We concluded that both purposes were worthwhile, and neither should be sacrificed.

Much of our discussion during the second meeting centered on collaborative web environments, and what sort of features we would find useful. Over the next year we plan to work within our group, and then with APPD management, to try and maximize the utility of the APPD website to allow easier collaboration among Task Forces and Working Groups. Our second project addressed our "charge," which is to identify and evaluate "technology, including software, computers, personal digital assistants, telecommunication devices, and wireless technologies that support training and education of pediatric residents." We will be producing short summaries of various technologies, along with contact people currently using those particular technologies who are willing to talk to other institutions about funding and implementation. In addition, we plan to have a hands-on workshop at our next meeting dealing with practical technological solutions to aid in education.

Click here to return to the Task Force Reports page.
Research and Scholarship Task Force

Heather McPhillips, MD, MPH - Task Force Chair
Su-Ting T. Li MD, MPH - Task Force Vice Chair

We had fantastic meetings in San Antonio this year with record attendance. We said good-bye and thank you to our task force Chair of the past three years, Linda Waggoner-Fountain. We also welcomed Su-Ting Li as the new Vice-Chair for the task force. Heather McPhillips will now be the Chair, after serving as Vice-Chair for the past three years. The Research and Scholarship Task Force’s goals are (1) to support educational research and scholarship through supporting the members of APPD in developing the skills necessary to plan, carry-out and disseminate important advances in pediatric GME; and (2) to review surveys prior to dissemination to APPD membership for relevance, content and human subject approval in order to limit surveys to PDs and APDs that are most likely to result in important results relevant to our membership and to pediatric GME. The task force reviews surveys three times per year (deadlines April 1, July 1, October 1). If you or a colleague are interested in surveying the membership, please see the APPD website for instructions on how to submit a survey to our task force for review.

https://www.appd.org/ed_res/ResearchSurveys.cfm

In our meetings, we broke into three separate interest groups. The first group discussed workshop ideas to be submitted to next year’s spring meeting by the task force. A second group discussed promoting scholarship in their program’s residents and a potential collaborative research project. A third group met to begin preparation of a manuscript detailing results of the past ten years of surveys of our membership that were reviewed and approved by the task force.

Members of the task force also collaborated on a workshop accepted to this year’s spring meeting in San Antonio that was well attended and fun!

Click here to return to the Task Force Reports page.
Richard Mink, MD, MACM
Chair, CoPS

The Council of Pediatric Subspecialties, or CoPS, has had a very busy sixth year. First and foremost, a business plan was created that enables CoPS to continue its important role in promoting the activities of the pediatric subspecialties. This arose from a strategic plan created in January 2011 that led to the formation of dues structure with four tiers of membership. One aspect of the development of this dues structure was clarification of the roles of the membership organizations. Based on a desire to ensure a broad representative of the pediatric community, all of the dues-paying organizations will have voting representation within CoPS. In addition, effective July 1, 2012, payment of dues is required to maintain membership/representation within CoPS and to retain voting privileges.

CoPS has also improved its organizational structure by formalizing the process for selecting representatives and how issues are vetted from outside and within the organization. These and other items related to CoPS’ organizational structure are readily available by clicking here to reach the CoPS website.

In conjunction with the APPD, the APA and COMSEP, CoPS co-sponsored the highly successful bi-annual Pediatric Educational Excellence Across the Continuum (PEEAC) meeting held in September 2011. Plans are already underway for the 2013 meeting and CoPS looks forward to working with the APPD and other pediatric organizations on this endeavor. CoPS was also an active participant in the 2012 APPD Spring Meeting, giving two oral and one poster presentation about topics of interest to both categorical program directors and pediatric subspecialists. In addition, CoPS was also a sponsoring organization in a workshop at the meeting entitled “Developing a Boot Camp for Pediatric Fellows.”

One of CoPS’ current projects is to work with the American Board of Pediatrics (ABP) on the Board’s Subspecialty Clinical Training and Certification Initiative (SCTC). When the Task Force examining this issue was formed in 2011, CoPS agreed to serve as the communications network for this important initiative. CoPS has been assisting the ABP in disseminating basic information and will soon be soliciting feedback from the pediatric subspecialty community about the Task Force recommendations. For more details about the SCTC, visit the websites of CoPS or ABP. Look for additional information shortly.

CoPS and the APPD have recently begun discussions about a joint project to examine “fellow readiness.” While still in the general concept stage, it is hoped that this effort will provide information about the specific characteristics of a well-prepared, beginning fellow. This will allow categorical program directors to tailor the curricula of the residents who plan to enter subspecialty training and make them better prepared for fellowship. More information about this endeavor will be available soon. CoPS is pleased to work with the APPD on a project that will serve to promote both resident and fellow education.
Carol Carraccio, MD, IIPE Director

As we enter spring with its new beginnings, I would like to highlight new beginnings for IIPE. In partnership with APPD LEARN, IIPE will be creating another pathway towards innovation. In response to feedback from some members of APPD, who expressed interest in innovation but are constrained by time and resources, we are creating an additional pathway towards innovation that will require less of both of those precious commodities and yet still offer the excitement of collaboration and discovery.

This new pathway will seek clinician-educators from the pediatrics community to participate in pre-designed collaborative projects that are of interest to the community at large. These projects will specify required type and level of involvement and provide tools/mechanisms for data collection and analysis through APPD LEARN. Each interested program will commit to doing a small part of the work and contribute to a meaningful national outcome. Based on the enthusiasm and suggestion for studying milestones that bubbled up at the recent APPD meeting we will create an inaugural project around studying milestones as a community of practice. This will require a strategic plan as to how to proceed so that we maximize what we learn and negate duplication of efforts.

We also hope to expand interest in innovation by explicitly encouraging clerkship directors and fellowship directors to submit Letters of Intent to IIPE. We have amended our mission, vision and tagline to reflect the need for innovation to extend beyond graduate medical education.

**Mission**: To initiate, facilitate and oversee innovative change in pediatric medical education through carefully monitored, outcome-directed experimentation.

**Vision**: Pediatric medical education will improve the health of children, adolescents and young adults by adapting to changes in their health care needs and changes in the organization and delivery of health care.

**Tag Line**: Transforming pediatric education & care

On another note, the newest IIPE project to be implemented is a collaborative effort between Children’s National and Denver Children’s. The project is entitled “The referral and consultation process: Ensuring the competence of graduating residents.” Please visit our website at [www.innovatepeds.org](http://www.innovatepeds.org) - to learn more about this project and other ongoing projects. Please note the new website address (with the “gme” removed)!
The Section on Medical Students, Residents, and Fellowship Trainees (SOMSRFT) has remained a vibrant and active Section of the American Academy of Pediatrics (AAP). We continue to be the largest AAP Section with over 12,000 members. And our Executive Committee has continued to work diligently to improve our value for our Section's members.

Per our last update, we have continued our efforts to increase medical student involvement. We recently submitted a resolution to allow medical students from international schools to join our Section; this resolution was accepted and is now awaiting final AAP Board approval. We also continue to have a very active Medical Student Subcommittee. They have organized an interesting and informative agenda for the upcoming AAP National Conference and Exhibition (NCE), having organized a panel of expert faculty - including residency program directors - to teach student attendees how to best apply and plan for residency. They have also organized an interactive session for medical students to meet faculty from various pediatric subspecialties to learn about those disciplines. Aside from the NCE, the Medical Student membership continues to grow and the subcommittee continues to publish quarterly newsletters. They are also working to create an electronic listserv to help pediatric interest groups contact one another and share ideas.

Our annual advocacy campaign continues to be another major undertaking. Our annual planning meeting convened in February, and we determined that our new 2012-2013 advocacy campaign will focus on childhood literacy. This project remains in its infancy, but we will continue to follow the mold we created by offering our members actionable items at the local, regional, national, and international fronts. In addition to developing the new campaign, we have also continued to implement our current campaign on improving voter turnout among our members. Those programs are nearing completion and we have received much positive feedback, including how many programs now offer a dedicated time to allow their residents to vote. Finally, we continue to gather data on our projects’ impact. Those data consist of pre-implementation and post-implementation surveys targeted at program delegates and resident leaders. Our hope is to garner concrete data so to improve the quality and effectiveness of our campaigns. Please visit www.aap.org/sections/ypn/r/advocacy for information on these and all other SOMSRFT campaigns.

In addition to our advocacy campaign, the SOMSRFT continued to be successful in terms of advocating for internal AAP policy changes that benefit our members. As above, our resolution to include international medical students was passed at the AAP’s recent Board meeting. In addition, a bylaw change allowing pediatric surgery residents to become Section members was also passed. We also continue to have active liaison efforts with 25 different Sections to help improve our relations with other AAP groups as well as work together on common goals.

In complimentary endeavors, our Section has continued to work towards creating a formal mentorship program within the Academy. Senior leadership is also very invested in helping improve one-on-one interactions among senior AAP members and the younger generation. A personal mentorship program has the potential to not only improve the experience of young members, but also to continue revitalizing the Academy by engaging young pediatricians and maintaining their involvement for life.
And finally, we continue to work hard to bring tangible value to our members. Those tangible items include numerous funding sources for all variety of projects as well as need-based scholarships. [Click here] to review the entire list of resources, but some of the key awards include travel stipends to the NCE, CATCH grants, and the Dyson awards.

And in addition to awards, we also offer numerous publications specific to our membership. Our SOMSRFT Executive Committee members draft quarterly District newsletters to share the activities of residents in their region. Our Executive Committee also drafts a bi-annual “Resident Report.” Finally, we have worked hard to create a “Life After Residency” packet which is full of useful resources for graduating housestaff to help guide them as they start new careers.

Overall, the SOMSRFT Executive Committee continues to work on improving the value we offer to our members. To achieve that goal, we continue to work closely with senior AAP leaders as well as offer useful awards and publications. Our continuing strides with medical students and new efforts focused on mentorship and fellowship trainees highlights our resolve. And we continue to work tirelessly and look forward to continued collaboration with our Academy peers and the APPD.