



EDITOR'S COLUMN

*Jerry Rushton, MD, MPH
Indiana University School of Medicine,
Riley Hospital for Children*

As Communications Director on the APPD Board, I wanted to highlight some recent examples of terrific collaboration, coordination, and communication which have helped forward our APPD goals. The first is recognition of our joint meeting with COMSEP this Spring. I hope that we can use this to continue to develop collaborative projects on senior students, research, and other initiatives with our clerkship colleagues.

At the Spring Meeting, we also learned about the early development of the ACGME Milestones project. Although there are still many details to be communicated in this initiative, it is impressive to see how APPD is being sought out early in the process to involve members instead of past times where we were reacting at a later stage.

The next example was the input we received from members to plan the future for our 2010 APPD Annual Meeting in Chicago. This was a hard decision to consider all of the pros/cons of meeting timing, other organizations, and logistics. However, your input was heard and helped the Board decide to move forward. We are excited by the potential new opportunities this brings and want your continued input to develop this meeting and also to consider ways to maintain some presence at the PAS Meeting in Vancouver.

Finally, in the APPD response to the IOM report and ACGME Congress on Duty Hours this spring, I can confidently say that the pediatric organizations, led by APPD, were the most coordinated and high quality of all of the specialties represented. Your input via email, conference calls, and face-to-face discussions were heard and very convincingly put forward. I am proud of our organization—we are stronger, more productive, and more thoughtful with your input and group collaboration.

PRESIDENT'S COLUMN

*Susan Guralnick, MD
Stony Brook University School of Medicine*

It's summer. Program Directors and Coordinators are mourning the loss of their graduates, and reveling in the joy of welcoming new interns into the family. It is a time of great highs and lows. It is a time of great stress and excitement and hope for the year to come.

What will this year bring us? It is a time of upheaval and stress in the world of Graduate Medical Education. The IOM report has kept us busy for almost a year now. Our organization should take great pride in our response to this report. The APPD, with the input of so many of its members, produced an exquisite document for the ACGME. I was so proud when the APPD was chosen to testify at the ACGME Duty Hours Congress in June. We were complimented by many on the quality of our document, as well as our presentation.

The ACGME is near the midpoint of its 18 month process to develop a response to the IOM report. As many of you know, there was a Duty Hours Meeting in March at the ACGME Educational Conference. This was followed by the selection of a 16 member Duty Hours Task Force. Pediatrics is well represented on this task force by Dr. Steven Ludwig, Chair of the Pediatric RRC as well as Meredith Riebschleger, the Resident Representative on the Pediatric RRC. In addition, the ACGME is engaging two external reviewers of the sleep literature. At the Duty Hours Congress, each organization or group of affiliated organizations was given 12 minutes to present their viewpoint on the IOM recommendations and to present their own duty hours recommendations to the Task Force. The Task Force then asked questions of the presenters. The procedure was quite formal and speakers were truly heard. The APPD was placed on a presentation panel that included CoPS and the AAP. We coordinated our presentations so that we each addressed focused areas along the continuum of medical education. We were complimented by the task force for this aspect of our presentation. The APPD was represented by Jerry Rushton from the APPD Board and me. CoPS was represented by Jim Bale and Vicky Norwood, and the AAP representatives were Franklin Trimm and Dan Schumacher (a resident/fellow representative).

There was striking uniformity across the various specialties which I found quite heartening. From Pediatrics to Surgery to Internal Medicine to OB-

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2009 Fall Meeting ~ 2010 Annual Spring Meeting in Chicago**

2009 HOLM, TUNNESSEN AND BERKOWITZ AWARDS PRESENTED AT ANNUAL MEETING

Each year, APPD recognizes three 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 2009 Recipient is Richard Shugerman, MD, Program Director at the University of Washington - Seattle.

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 2009 Recipient is Joseph Lopreiato, MD, MPH, Associate Dean for Simulation Education at the National Capital Area Medical Simulation Center/Uniformed Services University of the Health Sciences in Bethesda, MD.

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 2009 Recipient is Melodie Allison, C-TAGME, the Academic Administrator at Baylor College of Medicine in Houston, TX.



Award Recipients, left to right: Richard Shugerman with Robert McGregor; Joseph Lopreiato with Robert McGregor; Melodie Allison with Carol Berkowitz

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GYN, most organizations have similar concerns and recommendations. We are all concerned about the patient safety risks and educational limitations that the IOM recommendations might bring. Everyone hates the nap. Transfer of information and supervision were felt to be priorities. The Task Force will review this testimony, the IOM document, and the report on the literature review and develop a Duty Hours recommendation. I am hopeful that the ACGME will present us with reasonable requirements. Throughout the year I have been impressed by Dr. Nasca's dedication to making this a thoughtful and evidence-based process. A draft document for public comment is expected to be available January 2010.

The APPD is involved in an additional key issue in the world of medical education. The health care reform bill in its current form contains language that would involve the government in the oversight of graduate medical education. The bill text includes a requirement for a GAO report that assesses residency program effectiveness in teaching the six competencies and appropriateness of faculty, along with the stipulation that the GAO report make recommendations on how progress

could be further encouraged "through such means as" an assessment of ACGME and development of curricular guidelines. The ACGME, APPD, APDIM, and other medical organizations are working to inform legislators about our current initiatives, to develop funding support for research, and to limit any additional government requirements for GME."

The Pediatric Milestones Group is actively working on their project. All of the input received from the APPD at our spring meeting has been compiled, and is being utilized to inform the development process. As the project progresses we will continue to bring the APPD membership updates and seek feedback. The input of program directors is essential if this project is to be successful.

Well, I can only hope that the year to come is a little bit less "exciting", and that the outcome of the Duty Hours process is something we can live with. As a superstitious baseball (Yankees!!) fan, my fingers and toes are crossed and I am constantly knocking on wood. I hope you will do the same. Enjoy your newbies!!

APPD ELECTION RESULTS

At the recent APPD Spring Meeting in Baltimore, the following election results were announced by Past President Rob McGregor.

Board Member representing Associate Directors (3 year term): Lynn Garfunkel, MD, University of Rochester

Nominating Committee (2 year term): Joel Forman, MD, Mount Sinai School of Medicine, New York

Coordinators Executive Committee (3 year term):
Jaime Bruse, C-TAGME, University of Utah
Avis Grainger, C-TAGME, Carolinas Medical Center

Those completing their terms of office were Monica Sifuentes, MD (Board Member), Judy Behnke and Valarie Collins, C-TAGME (Coordinators Executive Committee Co-Chairs). Many thanks for your service to APPD!

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info@APPD.org * www.APPD.org

A SINCERE APPD THANK YOU!

In response to a recent request to our members to invest in APPD by making a personal financial contribution, many of you made that commitment to help APPD accomplish its many goals.

If you are interested in joining this important mission, please contact the APPD office at 703-556-9222 / info@appd.org, or mail your tax deductible donation to APPD, 6728 Old McLean Village Drive, McLean, VA 22101.

APPD gratefully acknowledges the generous donations received to date from the following individuals:

Carol D. Berkowitz, MD	Robert McGregor, MD
Ann Burke, MD	Gail A. McGuinness, MD
Grace L. Caputo, MD, MPH	Adam Pallant, MD, PhD
Jennifer Chapman, MD	Rebecca Powers, MD
Russell W. Chesney, MD	Charles Reed, MD
Laura Degnon, CAE	Jerry Rushton, MD, MPH
Cynthia Ferrell, MD, MSED	Karen Santucci, MD
Sher Lynn Gardner, MD	Henry A. Schaeffer, MD
Joseph Gilhooly, MD	Monica Sifuentes, MD
Ernie Guzman, MD	R. Franklin Trimm, MD
Patricia Hicks, MD	Surendra K. Varma, MD
Wendy Hobson-Rohrer, MD	Mark A. Ward, MD
Keith J. Mann, MD	Clifton E. Yu, MD

Pediatric Educational Excellence Across the Continuum (PEEAC Conference)

September 11-12, 2009 in Arlington, VA (immediately following the APPD meeting)

Registration Now Open! www.peeac.org

If you teach medical students, residents, fellows, peers and/or colleagues and would like to enhance your skills as an educator this meeting is for you! The focus for the meeting is skill development and the format was chosen to ensure opportunities to practice skills and to problem-solve with like-minded colleagues.

You will leave this conference ready to incorporate new skills and strategies in your daily interactions with learners. The faculty are nationally recognized experts in education and leaders of the sponsoring organizations for the meeting: APA, APPD, COMSEP and CoPS. The meeting will start with a plenary address presented by Dr. Lewis First, Chair and Professor of Pediatrics at the University of Vermont and Editor-in-Chief of *Pediatrics*. Interactive workshops will emphasize: effective and efficient teaching in inpatient and ambulatory clinical settings; using technology in teaching; assessment and evaluation of learners; providing feedback to learners; navigating challenging interactions with learners; planning and creating structured learning experiences and curricula; and using a scholarly approach in your teaching so that you can create scholarship out of the work that you do as a teacher.

Small group discussions and interactions with faculty are built into the agenda to ensure networking opportunities. You will leave prepared to meet the challenges you face as a teacher and armed with resources and connections with colleagues to support you in your continued professional development as an educator.

Additional information, including the complete program and registration information, is available at <http://www.peeac.org>. Hope to see you there!

Association of Pediatric Program Directors



13th Annual Fall Meeting
September 9-11, 2009



Reserve Your Room Now!

Westin Arlington Gateway
801 North Glebe Road
Arlington, Virginia 22203
(703) 717-6200

<http://www.starwoodmeeting.com/Book/appdfallprogram09>

APPD SPECIAL PROJECT FUNDING

Each year the APPD approves and provides funding for worthy projects which coincide with the goals of the organization. For information on projects funded in past years, including reports from those projects, please refer to the APPD 2009 Annual Report (found online at <http://www.appd.org/AR2009.pdf>).

The following projects are being funded in 2009:

Assessment of Work-Life Balance among Pediatric Residents

Investigator: Mary Beth Gordon, MD
Children's Hospital, Boston
Main 9S-Room 9156, 300 Longwood Avenue
Boston, MA 02115
Funding: \$9945

Development of a Reliable and Valid Structured Clinical Observation Assessment Tool

Investigator: Daniel C. West, MD
Professor and Vice-Chair (GME)
Director, Residency Training Program
Department of Pediatrics
University of California, San Francisco
505 Parnassus Ave, Box 0110
San Francisco, CA 94143-0110
Funding: \$10,000

Transforming the role of teacher: the impact of a blended learning approach on faculty and resident satisfaction with endocrinology teaching

Investigator: Teri Turner, MD, MPH, MEd
Texas Children's Hospital
Clinical Care Center
6621 Fannin Street, Suite 1540
Houston, TX 77030
Funding: \$10,000

APPD 2009-2010 DUES INVOICES

The APPD dues year runs from July 1-June 30. Information on accessing each program's electronic dues invoice was recently emailed to the Program Director and Coordinator. If you did not receive or do not have the email, please contact Daglyn Carr at the APPD office (daglyn@appd.org or 703-556-9225 x 102) for your login information.

Please review all of the data carefully, make edits to the online form as necessary (including additions and deletions to your program), *print out* the form, and mail it to the APPD office with your dues payment. (Reminder: APPD does not accept credit cards.) Your prompt attention to completing this process is most appreciated.

APPD 2009 ANNUAL REPORT NOW AVAILABLE

Attendees at the recent 2009 Annual Spring Meeting in Baltimore each received a copy of the APPD 2009 Annual Report. This includes important information on the APPD leadership; activities of regions and task forces; reports from APPD liaisons to other related organizations; special project updates; and so much more.

You may download a copy of the Annual Report from the APPD website at <http://www.appd.org/AR2009.pdf>. If you would prefer to have a hard copy, please contact the APPD office and one will be mailed to you.



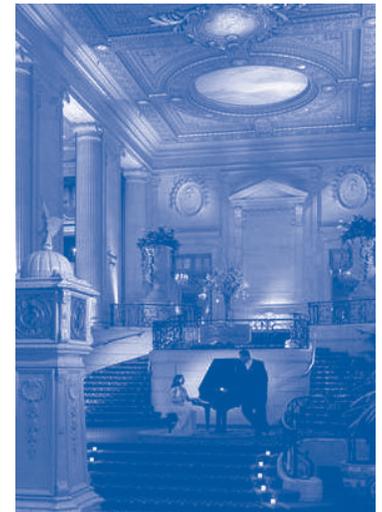
APPD 2010 ANNUAL SPRING MEETING APRIL 15-18 CHICAGO, IL

Hilton Chicago
720 South Michigan Avenue



Plan now to attend the exciting APPD Annual Meeting in beautiful, downtown Chicago!! The Hilton Chicago is a landmark downtown Chicago hotel located on the “Cultural Michigan Avenue Mile” overlooking Grant Park, Lake Michigan, and Museum Campus.

The hotel sleeping room rates at the Chicago Hilton are \$199 + taxes and the registration fees to attend the meeting will be ~ \$425 for members.



Start thinking now about workshops and posters you’d like to submit! More information will soon follow regarding the deadline for abstract submissions but, in the meantime, be sure to mark your calendars!

APPD VOTING INFORMATION

Each pediatric residency program may cast one vote per program for APPD leadership positions and, in the past year, that vote was cast by the program director. In order to allow those who are being represented to have a voice in that decision, the APPD Board has approved a new method of voting.

For the next voting period, the Program Director will still cast the program’s vote for APPD Officers, At-Large Board Members and Nominating Committee Members. For other openings as they arise, the Program Director should designate one associate program director, one fellowship director and one residency coordinator from the list of members of his/her program to be responsible for voting on behalf of the entire program.

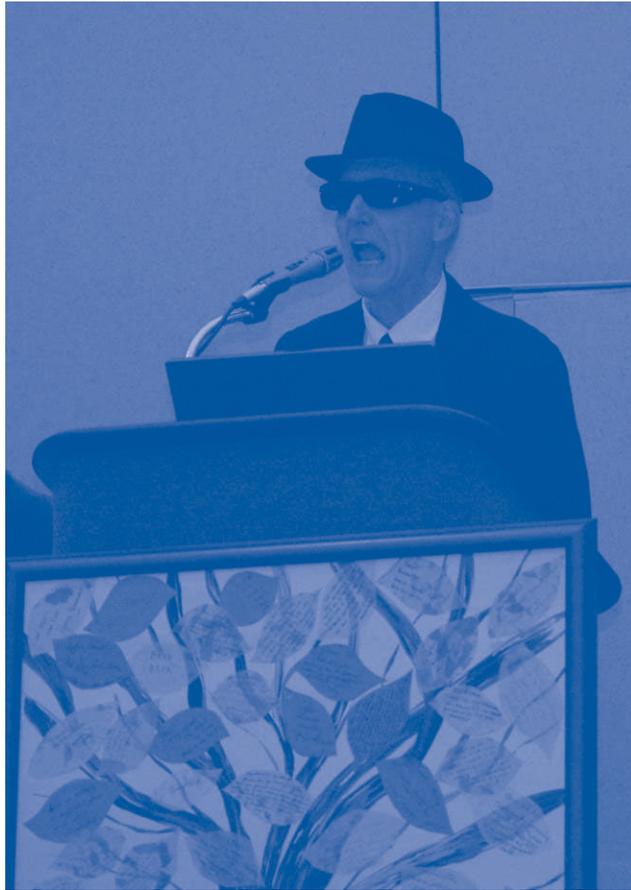
- One associate program director will vote when openings occur for a Board Member representing Associate Program Directors (every 3 years).
- One fellowship director will vote when openings occur for a Board Member representing Fellowship Directors (every 3 years).
- One residency coordinator will vote each year for the two openings on the Coordinators’ Executive Committee (2 per year for a 3 year term).

Should there be no assignment made by the program director, the APPD office will make the assignment at random from that program’s membership roster. If a program does not have a member in those positions, then the program director will vote on behalf of the program for those openings.

APPD 2009 ANNUAL MEETING IN BALTIMORE



APPD 2009 ANNUAL MEETING IN BALTIMORE



COORDINATORS' CORNER

Avis Grainger, C-TAGME

*Levine Children's Hospital at Carolinas Medical Center,
Charlotte, NC*

Many of us are renewed and refreshed after our annual spring meeting in Baltimore. Thanks to everyone for attending and presenting. We had some amazing presentations and we all learned a great deal from everyone else. The networking and sharing is invaluable for us as we navigate our program management skills each day.

This is a very busy time for all of us as we get ready to celebrate with our PL3's and plan events and parties. It is also a time where we welcome our new interns and all of the tasks involved in getting them prepared and ready to go for July 1st.

I encourage all of you to participate in the mentor/mentee program. In addition to helping new coordinators through this program, often many close relationships are formed!

New coordinators and those preparing for an RRC site visit, please plan to attend the APPD Fall Meeting in Arlington, VA, September 9 through 11. You will find it invaluable.

COORDINATORS' TOOLS TASK FORCE

Discussion: The group discussed the purpose of the tools task force and each individual objective. The group did not decide to change or delete any of the listed objectives.

The group was asked to identify two coordinators to co-chair the task force. There were a total of 4 coordinators who volunteered to be co-chairs for this committee. Two of them will focus on the technology side of the task force and the other two will focus on the literature side of the task force.

In discussing the objectives further, we discovered that some progress had already been made by Judy Behnke on the first objective. She has been working to gather information on the different technology/software programs that are being utilized in the residency programs. As the survey was only sent to members who attended the last task force committee meetings, it was agreed that the survey needs to be sent to all of the coordinators on the email list, so that we can gather as much data and feedback as possible. The two new technology co-chairs are Sally Colvin and Jean Ashley. They will work to transfer the work that Judy has already done on the survey and send it to all the APPD coordinator members.

The other two coordinators will work on updating the Coordinator's Handbook. The group felt that it would be valuable to update this handbook annually. The two co-chairs assigned to the updates will work to divide the handbook into

sections and give to coordinators on the task force to complete the updates. The two co-chairs for this project are Lauren Layman and MaryAnne Wesner.

COORDINATORS' MANAGEMENT/SUPERVISION TASK FORCE

Current Co-Chairs (Elizabeth Sanchez-Rocca, Lorraine Garcia and Marlene Keawe) resigned from their current term. After a vote, the following new co-chairs were selected—Celeste Farley, Pat Jacobi and Teresa Woods. The revised goals and objectives will be as follows:

- The Management/Supervision Task Force will serve as a resource for developing a structure for program coordinators in management/supervision positions. This task force is available to all Program Coordinators who are interested in learning about supervision. The goals and objectives of this task force should be based on, but not limited to, the following:
 - Create a forum where program coordinators as supervisors can meet yearly to discuss and share their experiences
 - Develop job description for program assistants
 - Develop management/supervision workshops for APPD Meetings
 - Serve as a resource for membership at large with issues regarding supervision
 - Other tasks can be added as task force members feel necessary
 - Support other task force committees as needed with information

Objectives were met by Spring 2009 in the following areas—

1. Job Descriptions were circulated by email.
2. Presentations made at Spring 2009 meeting entitled “Monkey on your Back” and “Supervising with a Smile.”
3. Lunch chat session at Fall 2008 meeting provided an opportunity to opening discuss issues in an informal setting.
4. Task Force gathering in Spring 2009 provided opportunity to regroup and revise objectives as needed.

Follow-up

1. Current job description for assistants will be reviewed and combined into one generic document and shared amongst task force members. (Marlene Keawe and Elizabeth Sanchez-Rocca to follow-up)
2. Will make use of the listserv to share our report with all coordinators. (current co-chairs)
3. Suggestion made to find someone to present a session on differing management styles between PD's, PC's, and Chief Residents. (Current co-chairs to follow-up and inform the planning committee for Spring 2010.)

COORDINATORS' PROFESSIONAL DEVELOPMENT TASK FORCE

The following issues were discussed:

- 1) Developing presentations to be given by levels of coordinator experience: We discussed developing presentations for the annual meetings by grouping together new coordinators with seasoned coordinators to present together. This would ensure that all coordinators seasoned or not are given the opportunity to present topics for all.
- 2) Coordinator sessions at future APPD meeting: We discussed the benefits of having fewer days at the annual meetings for coordinators, such as 1½ days focused specifically on coordinators. The feeling is that if the coordinators had less time away with fewer hotel nights that programs would pay for their attendance. We will be discussing what we can do to try to come up with a plan to submit to the board.
- 3) Benefits of attending meetings: The Professional Development Task Force would like program directors to realize the benefits of coordinators attendance at annual meetings. To accomplish this task, we would like to review the positive quotes with the executive board and list them in the next newsletter for program directors to see.
- 4) Model Job Description: It was discussed that we update the model job description on the APPD Coordinators' Handbook. We would like to work with the Tools Task Force to ensure that this happens in a timely fashion. It's important to list and note the differences between coordinator job descriptions.
- 5) Survey: A discussion was held regarding conducting a survey by region, title, and salaries of all coordinators.

TAGME CERTIFICATIONS ANNOUNCED

Congratulations go to the following newly certified coordinators:

Penny Adams-Kraus, C-TAGME
University of Missouri-Columbia

Hilma Balaian, C-TAGME
Kaiser Permanente-Los Angeles

Jaime D. Bruse, C-TAGME
University of Utah

Ashley K. Lynn, C-TAGME
University of South Carolina-Columbia

REPORT FROM THE ABP

Gail A. McGuinness, MD
Executive Vice-President
American Board of Pediatrics

The American Board of Pediatrics In-Training Examination: Use and Misuse of Test Scores

It has come to the attention of the American Board of Pediatrics (ABP) that on occasion program directors of subspecialty fellowships seek ITE scores from resident applicants or general pediatrics program directors as part of the application process. The ABP considers this practice to be a misuse of test scores.

Although the ITE is a valid instrument to assess the single competency of medical knowledge, it was not designed to be a high-stakes examination. In fact, residents are not encouraged to prepare specifically for the examination so that the effect of "cramming" does not create a false impression of progress. In addition, residents may take the examination after being on call or may have not yet completed rotations in all subject areas being tested.

As a result, the ITE should not be used as the sole means of determining if a resident has satisfactorily completed a year of training. In addition, the ITE should not be used for decision making regarding placement into a fellowship program or as a supplement to the fellowship application process. The ABP strongly discourages program directors and residents from providing these data as part of their fellowship application process.

The ABP supports the use of the ITE in the following ways:

- A resident can determine strengths and weaknesses in pediatric knowledge at the time the examination is taken and progress from year to year.
- A resident can compare performance with program and national peer groups.
- A program director can use the results to provide counseling and remediation to residents.
- A program director can use accumulated examination results over several years to help assess the strengths and weaknesses of the program in teaching pediatric knowledge.

The examination is intended solely as a tool to help guide the learning of residents and to assist program directors in assessing their program and curriculum design. Using the examination for purposes other than self-assessment (either individual or program) constitutes a misuse of the scores and compromises the validity and meaningfulness of the results.

TASK FORCE REPORTS

Faculty Development Task Force

Surendra Varma, MD, APPD

Bob Swantz, MD and Julie Byerley, MD, COMSEP

The APPD and COMSEP Faculty Development Task Forces met together on April 30, 2009 and, after a brief overview of what the 2 groups had been doing recently, divided into small groups for discussion. The group then reconvened for summary reports. Notes from the discussions follow.

Goals:

- APPD and COMSEP members will share ideas to advance faculty development
- APPD and COMSEP members will outline how the organizations can work together to advance faculty development

Subgroups for discussion:

- Faculty Development Resources
- Development of your Teaching Faculty
- Mentoring the Educators
- Showcasing the Scholarship of Educators

After the subgroups reported back from their discussions, the large group generated the following list of potential collaboration between APPD and COMSEP, then prioritized that through a multivote technique.

CONCRETE PRODUCTS THAT COULD COME FROM APPD/COMSEP FDTF 2009-10

(based on small group reports after breakout)

1. Establish regional meetings of APPD with COMSEP
 - Invite COMSEP members to attend already established APPD meetings
2. Establish collaborative mentor groups
3. Share examples of clinician/education promotion tracks
4. Use APPD/COMSEP to document effect of workshops/ ideas shared
 - “Thank you” feedback to educators for teaching portfolio
5. Share resource lists for clerkship directors and program directors
 - APPD Share Warehouse access for COMSEP
 - Materials from COMSEP webpage to APPD
6. Develop advanced certification for clerkship directors and program directors
7. Collaborate to develop lists of visiting faculty development experts
8. Make web pages more useful/similar
9. Develop online modules with links between groups
10. Develop a topic list of essential faculty development topics

3 PRIORITIES FROM COMBINED MEETING

(identified from multivote technique)

1. Share resource lists for clerkship directors and program directors
 - APPD Share Warehouse access for COMSEP
 - Materials from COMSEP webpage to APPD
2. Establish regional meetings of APPD with COMSEP
 - Invite COMSEP members to attend already established APPD meetings
3. Create list of core faculty development topics and work toward the development of modules for APPD/COMSEP member use

Curriculum Task Force

Susan Bostwick, MD and Karin Hillenbrand, MD

We had 3 very productive sessions at the recent APPD meeting in Baltimore. First, during our curriculum task force meeting we had updates on curriculum development from invited guests as well as APPD members. From the AAP, Lori Feldman-Winter, MD reviewed the new Breast Feeding curriculum which is available on the AAP website. Also from the AAP, Charlotte Nunnery updated us on the available e-learning modules for residents. We were very happy to hear that the AAP responded to concerns by our membership at last year’s meeting and is now making the e-learning course available to Program Directors via Pedialink for review. This will allow Program Directors to determine if the free e-learning modules that are available to residents meet their curricular needs and allow them to track completion of the modules. In addition, we had updates from APPD members on completed and ongoing projects. Melinda Clark, MD discussed the PACT oral health project which will be available through the AAP website and Jennie Huang discussed the HOPE obesity and nutrition curriculum which will be available for free soon. Lastly, we had brief updates from Adittee Narayan regarding the Medical Home curriculum, Steve Paik regarding the Resident as Teacher APA/APPD/AAP joint effort, and Erin Guidice regarding an EBM curriculum.

The next day we had a joint task force meeting with the COMSEP curriculum task force to further our work on the subinternship curriculum. The goals and objectives for this project have been well developed over the past two years and this session was focused on learning activity development and reviewing possible evaluation strategies. Through table group discussions multiple areas were addressed with plans (and volunteers) for next steps. The goals and objectives for the joint APPD/COMSEP subinternship curriculum will be released shortly.

Lastly, we continued our tradition of sponsoring a workshop/platform session for the presentation of curriculum. This year

we focused on Professionalism and had 5 presentations: Rachel Dawkins on *Novel Professionalism Curriculum for a Pediatric Residency Program*, Ralitsa B. Atkins on *How to Teach Cultural Sensitivity to Pediatric Residents*, Christopher Fink, *How to be Heard: A Curriculum on Legislative Advocacy for Pediatric Residents*, Carmen Coombs, *Developing a Curriculum for Family-Centered Rounds at an Academic Children's Hospital* and Greg Harlan, *The Intern Lecture Series: How to Survive, Thrive, Learn and Teach as a Pediatric Intern*. We hope to continue this tradition and to sponsor a session next year focusing on curriculum for Practice Based Learning and Improvement.

Evaluation Task Force Report

Marc Majure, MD and Suzette Caudle, MD

The Evaluation Task Force met during the Spring Meeting in Baltimore both separately and jointly with our colleagues on the Evaluation Task Force of COMSEP. Both meetings were extremely helpful and gave both task forces renewed focus for the next year.

During the meeting of the APPD Task Force, a mini-workshop was presented in the series, Assessing the Competencies. This workshop focused on the competency of professionalism. Suzette Caudle, Carolina Medical Center, presented an overview of the competency of professionalism with a focus on material from The Association of Pediatric Program Directors' **Teaching and Assessing Professionalism: A Program Director's Guide**. After discussion, Marc Majure, Duke University, asked participants to get some hands on experience in rating professionalism. Copies of the Professionalism Mini-Examination (PMEX), which is a tool feature in the APPD's Guide, was distributed and used to direct small group discussion based on a collection of video vignettes, A Day in the Life of Dr. Leo Pinter. After this "warm up," participants were asked to rate their favorite TV doctors. Using clips taken from popular TV shows, participants used an audience response system to rate the professionalism on three of the most popular doctors on TV today.

After the workshop, members of the task force discussed the upcoming year. It was decided that further organization of the task force would facilitate successful efforts in the future. Agreement was reached that three working groups would be formed: Evaluation Tool, Evaluation Standards, and Faculty Development. Members have indicated their interest in which working group would best fit their goals for participation in the task force.

In the joint task force meeting, the discussion centered on the role that the task forces could play in the continuum of medical school to post graduate training. Resources from each organization were highlighted and the roles and challenges of

clerkship director and program director were shared. Ideas for joint collaboration in the future were discussed and a commitment was made to work together in the future.

Involvement in the Evaluation Task Force is always welcome. If you would like to be on the email list or if you have interest in participating in one of the working groups, please contact Marc Majure (marc.majure@duke.edu) or Suzette Caudle (suzette.caudle@carolinashealthcare.org).

Research Task Force

Linda Waggoner-Fountain, MD, Chair

The Research Task Force had well attended, productive committee meetings both individually and with the COMSEP Research & Scholarship Task Force. The APPD Research Task Force met first and wanted to thank John Co for his leadership and careful attention and significant contributions for the implementation of the APPD survey policy. The committee will begin to track the presentations and/or publications of approved surveys to see what scholarship is a result of these surveys. We hope to slightly alter the methodology of the survey review so submitters will include comments from the reviewers. Members of the committee decided that they will try to propose one workshop at each APPD meeting regarding research. Members of the committee should keep an eye on their email inboxes for scheduling of the next conference call for the research task force.

The next day, the COMSEP & APPD Research Task Forces met. After members of the group introduced themselves, a brainstorming session was undertaken to generate ideas for collaboration. Ideas included discussion of the Sub-Intern curriculum & PL-1 outcomes, sharing workshops at PAS, developing a research curriculum, establishing a collaborative network, operationalizing a research collaborative, and developing a forum to find out what projects people are doing (perhaps in the form of a wiki). The group also brainstormed about potential collaborative research projects that would study phenomena across the curriculum and these included hospitalists as educators across the curriculum, family centered rounds on learners, the impact of morning report on learners, electronic professionalism, career advising, CLIPP cases, workshops on ILPs and following problem students. The group decided to address the Sub-I curriculum. Discussion of the components of the Sub-I curriculum were discussed and three potential research collaborations were identified and discussed in smaller groups. These included clinical skills, professionalism and Individualized Learning Plans. The group thought it would be great to meet together at PAS meetings as possible.

IIPE DIRECTOR APPOINTED AND REVIEW COMMITTEE IN PLACE



The Federation of Pediatric Organizations (FOPO) is pleased to announce the selection of **Carol L. Carraccio, M.D., M.A.** as Director of the Initiative for Innovation in Pediatric Education (IIPE).

Dr. Carraccio brings to this new position an impressive resume in graduate medical education. She is an innovative educator and contributed to the development of the Learning Portfolio for the Accreditation Council for Graduate Medical Education (ACGME). Dr. Carraccio has served in key leadership roles for the ACGME, the Pediatrics Residency Review Committee, the Association of Pediatric Program Directors (APPD), and the American Board of Pediatrics (ABP). She is currently leading the Milestones Project, a joint initiative of the ACGME and the ABP.

The IIPE is fortunate indeed to have her vision, energy, creativity, expertise and leadership.

One of Dr. Carraccio's first tasks was to establish a Review Committee for the I-PLANS. Below are short bios on each of the six committee members. Dr. Carraccio will also serve as an ex-officio committee member and Dr. Englander will serve as Chair.

Carol Aschenbrener, MD is Senior Executive Vice-President of the Association of American Medical Colleges. She has served as Chancellor of the University of Nebraska and a member of the Liaison Committee on Medical Education. Dr. Aschenbrener is currently serving on the Advisory Board for the joint ACGME and ABP initiative called the Milestones Project.

Robert Englander, MD, MPH is Vice-President for Quality and Safety at Connecticut Children's Hospital. He has served on the Board of the APPD. His research interest has been focused on competency-based education and Dr. Englander is currently contributing his expertise to the joint ACGME and ABP initiative called the Milestones Project as a member of the Working Group. He will chair the committee.

John Frohna, MD, a medicine-pediatrics trained physician, is the Pediatric Program Director at the University of Wisconsin. He is recognized nationally for his expertise in evidence-based medicine. He led a joint professionalism project for the ABP and APPD. He is a member of the Internal Medicine Review Committee of the ACGME and will bring lessons learned from the internal medicine improvement projects to the IIPE process.

Robert Galbraith, MD is the Executive Co-Director of the Center of Innovation of the National Board of Medical Examiners. He is nationally recognized for his work on portfolios and is currently spearheading a project to develop standards for portfolios that will enable different systems to transfer information. He was elected to the Board of Directors of MedBiquitous, testimony to his expertise and vision in technology.

Patricia Hicks, MD is the Program Director at Children's Hospital of Philadelphia. She is currently earning her Masters in Health Professions Education from the University of Illinois at Chicago. Dr. Hicks is a member of the Program Director's Committee of the ABP and a member of the Board of the APPD. She has also served on Institute of Medicine Committees. Dr. Hicks is also a member of the Working Group for the joint ACGME and ABP initiative called the Milestones Project.

M. Douglas Jones, MD spearheaded, along with Dr. Gail McGuinness, the R³P Project. He served as Chair of the Department of Pediatrics at the University of Colorado for a decade. He has held leadership positions for a number of national organizations, including Chair of the Pediatrics Review Committee for the ACGME, and is currently Chair of the ABP. He was 2008 recipient of the St. Geme Award for lifetime achievement in pediatrics.

For more information about IIPE, please visit www.innovatepedsgme.org.

APPD Leadership

President - Susan Guralnick, MD (2008-2010)

President-Elect - Ann Burke, MD (2008-2010)

Secretary-Treasurer - Joseph Gilhooly, MD (2007-2010)

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Elizabeth Sanchez-Rocca, C-TAGME (2008-2011)

UPDATE FROM THE PEDIATRIC RRC

Marci Hutchinson, MD; Outgoing Pediatric RRC Chair

“Duty hours” seem to be 2009 hot topic words in any venue of graduate medical education and, of course, Pediatrics is no exception. An RRC update provided during this season would be remiss if “Duty Hours” were omitted, thus the following:

- Since publication, in early December 2008, of the IOM report entitled *Resident Duty Hours: Enhancing Sleep, Supervision and Safety* there has been much discussion and debate at the ACGME. The Pediatric RRC held a January conference call identifying a number of recommendations in the report that are controversial and very divergent from the ACGME’s current duty hour standards.
- When the duty hours standards were approved in 2003, ACGME stated that they would be revisited and revised in five years time.
- ACGME held a national symposium on duty hours in conjunction with its annual educational conference in March. The conference convened experts on sleep, patient safety, medical education and human factors, along with ACGME review committee members, program directors, DIOs, faculty, residents and other stakeholders. The RRC Chair and 3 other members attended the conference and reported back to the entire committee at its March meeting.
- Documents and other activities relating to ACGME’s response to duty hours are listed below:
 - o Dr Nasca’s Letter to GME Community Regarding Next Steps, February 16, 2009, http://www.acgme.org/acWebsite/home/nascaletter_feb2009.pdf
 - o Request for proposals for comprehensive literature review on duty hours, request posted April 27, 2009, http://www.acgme.org/acWebsite/home/acgme_nascaletter_RFP.pdf
 - o Appointment of ACGME Duty Hours Task Force charged with the drafting of the next set of Duty Hour Standards
 - o Resident Duty Hours and Learning Environment Congress, June 11-12, in Chicago, Illinois where position papers will be presented to the Board and ACGME Task Force

Dr. Steven Ludwig, RRC Chair, effective July 1, 2009, will be serving on this task force as one of several RRC chairs. Not all Chairs of the Council of Review Committees (CRC) are on the Task Force. Chairs from the following specialties were asked to participate: Radiology, Anesthesiology, Neurosurgery, Surgery, OBGYN, Emergency Medicine, Internal Medicine, Family Medicine, as well as Pediatrics. Dr. Meredith

Riebschleger, was selected from the resident membership on RRC’s. Meredith is our very own pediatric RRC resident member.

A few more highlights:

- RRC newsletter went out in June. Old copies are archived on ACGME website.
- RRC Presentations made at the APPD meeting are provided on the ACGME – Pediatric RRC website.
- Drs. Steve Ludwig and Julia McMillan, beginning July, will lead the committee in their roles of Chair and Vice-Chair, respectively.
- ACGME is working with survey experts on revising the questions on the resident questionnaire that are giving Program Directors and DIOs a case of “heartburn” – the questions related to fear of intimidation; service versus education.

I cannot end this update and my tenure as Chair without a big thanks to Dr. Susan Guralnick, the APPD Board and membership for collaboration with the RRC in defining specific issues from the pediatric community related to resident duty hours and education. Daunting and exciting days lay ahead as we, together, redesign graduate medical education, specifically pediatrics, under new paradigms for duty hours and learning environment, innovation, both of which will influence the next iteration of program requirements.

ACADEMIC PEDIATRICS SEEKS REVIEWERS FOR EDUCATIONAL ARTICLES

The editorial board of *Academic Pediatrics* wishes to ensure that the journal includes articles across the continuum of education in pediatrics. In order to do so, they would like to expand their panel of reviewers to include a broad representation of educators from undergraduate, graduate and continuing medical education/faculty development.

If you are interested in serving as a reviewer for Academic Pediatrics, please contact the APPD office (info@appd.org) for more information. Editors will consider your areas of expertise, as well as the frequency of requests made to you to review, when they invite reviewers.

REGIONAL HAPPENINGS

Midwest Region

Jay Nocton, MD, Keith Mann, MD, and Tara Shirley

During the recent APPD Annual Meeting in Baltimore, the Midwest Region met twice to discuss topics of educational interest as well as regional organizational issues. It was very encouraging that attendance at both meetings was high, with representation from many programs within our region. On the Tuesday prior to the meeting, regional members met to discuss two educational topics. Bob Voigt, MD, the program director at the Mayo Clinic gave a presentation entitled “An Effective Developmental-Behavioral Pediatrics Curriculum.” Bob’s presentation emphasized how a structured and well-designed curriculum has been beneficial and well-received by the residents in his program. Tom George, MD, Associate Program Director at the University of Minnesota, then led a discussion regarding “Defining, Teaching, and Evaluating Rotation-Specific Competencies within a Pediatric Residency Program.” Tom explained the process by which his program has identified those rotations that can best address specific competencies, with the intent that certain rotations focus on, teach, and evaluate residents only in a few selected competencies. Both presentations were followed by a general discussion in which ideas and experiences were shared among the group. Our membership is grateful to Bob and Tom for preparing their presentations and leading the discussion of these topics.

At our Midwest Region Breakfast, there were several agenda items discussed. At the request of the APPD, the written survey regarding the Annual Meeting was distributed and comments were solicited regarding the timing and duration of the meeting. Nominations were also solicited for the regional chair positions that will be assumed in the Spring of 2010, including nominations for a regional fellowship director chair, coordinator chair, program director chair, and associate program director chair. Several nominations were offered, but since the number of fellowship directors in attendance was limited, additional nominations for the fellowship director chair position will be solicited. A ballot will be prepared with an election held in early fall such that the new leadership of the region can be identified well in advance of the 2010 Annual Meeting.

We also discussed planning for the Fall Midwest Regional Meeting, and the University of Iowa program graciously agreed to host this meeting, tentatively planned for early October, 2009. The agenda for this meeting will likely include several presentations and discussions of topics of interest to the group as well as specific breakout sessions for coordinators, chief residents, and program directors. We hope to see the entire region in Iowa City in the fall!

Southeast Region

Mark C. Bugnitz, MD and Karen Ariemma

Over 70 members of the Southeast Region met on Friday morning, May 1 in Baltimore as part of the APPD Annual Meeting. Introductions of the membership were made with representation from most programs in the Southeast and included members from both core and subspecialty programs.

There was some discussion regarding the NRMP “staged” scramble scheduled to be implemented in the 2011 match.

Many members expressed the opinion that, although the combined PAS/APPD Annual Meeting (for those who attend both) requires an extended period of time away from work, it is best to keep the meetings together. Separate meetings would require the extra expense of travel to two meetings, etc. Many subspecialty fellowship program directors attend both meetings.

Resident accountability for non-patient care tasks such as conference and meeting attendance, completing faculty evaluations, dictations and delays to QI projects was an issue for several. Ideas discussed were meeting with the residents each year and stressing that these tasks are a component of professionalism. The director may not sign off on the competence with repeated violations. A professionalism note may be placed in the portfolio. Some hold educational stipends, give formal reprimands or take away vacation days. Incentives such as “coffee cards” are also used.

The question arose of progression of a resident from one level to the next if there is concern about competence. The options were remediation and placing an addendum to the final evaluation of residency. Also, a letter of concern could be placed in the file that would be removed upon successful completion. One program has a remediation committee which reviews all performance of residents on remediation and assigns a mentor to help the resident.

Discussion shifted to the topic of private physician mentors. Many programs use private pediatricians as mentors but all have faculty appointments.

A lively discussion followed on patient caps for interns. While no consensus was reached many program directors were positive about the potential for patient caps. Some programs already have self imposed caps with patient overflow being the responsibility of the sponsoring hospital. A question was posed for the RRC as to how many patients is too many if no caps are in place.

Many programs are seeing cuts to funding such as parties, social events and recruitment. No one had solutions.

We ask that sub-regional groups in the Southeast keep us informed as to when they have meetings for their groups.

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*Keynote Speaker (Dr. Theodore Sectish) & Dinner:
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