President's Message

Ann Burke, MD
Wright State University

Another interview season, another set of fresh, enthusiastic medical students who desire a career in pediatrics, another round of engaging conversations with young people who want to participate in global health electives, volunteer in the community, and learn to be kind, compassionate doctors. Wow! It is tiring for me in a good kind of way. It breathes new life into me; thinking that if these “20 somethings” can run marathons, stamp out illnesses in villages across Africa over their Spring breaks and achieve great grades in medical school...certainly this “40 something” can be inspired to work harder and improve her program! I know I certainly don't lose faith in our young people who are so inspired to help others. It is a lovely and purely altruistic, humanistic trait I see in nearly every candidate I encounter. It is a thing of wonder! Let us all be thankful, especially at this time of year, to be physicians in the field of Pediatrics. Further, to be entrusted with the education and training of these young enthusiastic charges is a mind-boggling opportunity!

I want to take this opportunity to update you all on what is going on in the APPD and suggest some ways to get more involved.

Program Director School: A Program Director School Council has been formed. Out of the 23 excellent, (and I really mean excellent) people who applied, the field was narrowed down to seven folks as the inaugural group. I am so pleased that Franklin Trimm has agreed to act as the Council Chair (all of the Council members are listed later in this newsletter). Again, I want to deeply thank all of the members who applied. Our selection committee would surely agree that reviewing the CVs and works of all of the applicants was an amazing testament to the academic and medical education power we have in our organization. We anticipate a call for applications to the school itself in the late winter so stay tuned and read those announcements from APPD you receive via e-mail.

Annual Spring Meeting in San Antonio: I hope to see you all there. It will be a great time to network, expand our perspectives and recalibrate our concerns about residency education with other APPDers. We have a great pre-conference line up where you may choose between the following: Teaching Residents to Teach Themselves (inspiring residents to study on their own, make a study plan, become a lifelong learner) and Leading Teams, Managing People and Making Projects Scholarly – Essential Professional Development for Program Directors. On a side note, our Spring Meeting last year had a record attendance with 670 members registered. The salsa dancing and 25th anniversary celebration was a good time and seemed to be a success! This coming year’s meeting surely will not disappoint. A huge number of abstracts and workshops were submitted. The dissemination of ideas about how to tackle and innovate around the proposed (soon to be finalized) Pediatric RC requirements will be a focal point. We plan to have Joe Gilhooly and Caroline Fischer share information about the requirements at the meeting. The APPD appreciates the relationship we have with our Review Committee and the open, transparent discussions about pediatric training.

APPD LEARN: The Longitudinal Education Assessment Research Network is up and running with Alan Schwarz at the helm. The first project is underway and you should have received e-mails detailing how to become a member of LEARN. I hope that many, if not all, institutions consider joining. The New Duty Hour Regulations Project will be a survey based study with Hilary Haftel as the Principal Investigator. This network is a great way to get involved and participate in shaping an evidenced based body of knowledge about medical education topics, issues and best
ABP and APPD “Assessment Primer”: A useful resource for program leaders, distributed to all programs and located on-line (at the ABP and APPD website), was recently published. This project was intended to bolster educators’ knowledge, skills and comfort levels with resident assessment practices and principals. Additionally, the ABP Program Director’s Committee felt that this type of resource would have a synergistic effect with efforts to get active participation and initiation of LEARN projects. The APPD Council of Task Force Chairs (CoTFC) has had discussions encouraging the evaluation task force to take the lead on producing faculty development PowerPoint slides that coincide with each chapter, so that members could convey some of the principles to their own faculty (and fulfill some requirements regarding faculty development proposed in the new requirements!). Stay tuned for more info, or get involved with one of the task forces!

These are some of the highlights of activity going on at APPD. Hang in there, stay inspired in your vocation and, possibly most importantly, take a little time over the holidays to enjoy, cherish and appreciate your family and friends. Happy Holidays and Merry Interviewing!
Jerry Rushton, MD, MPH
Indiana University School of Medicine, Riley Hospital for Children

As many of you know, our organization had several discussions about the structure, organization, and timing of Spring and Fall APPD Meetings. In order to follow up, we wanted to present some of the data from the last four years. As we discuss future planning, and the pros/cons of different scheduling arrangements at the Pediatric Academic Society (PAS) meetings, options for the future, and other considerations, it may be useful to review some numbers.

The table below shows the total attendance at Spring APPD meetings. Comparisons are somewhat difficult to make due to some of the meetings being combined with other organizations, different city locations, etc. However, overall the figures show similar to increased numbers for 2010 and 2011 APPD meeting attendance in comparison to previous years when the APPD meeting was held at PAS.

<table>
<thead>
<tr>
<th>Spring Meeting</th>
<th>Year</th>
<th>Total # of Attendees</th>
</tr>
</thead>
<tbody>
<tr>
<td>APPD at PAS- Honolulu</td>
<td>2008</td>
<td>495</td>
</tr>
<tr>
<td>APPD at PAS- Baltimore (with COMSEP and MPPDA)</td>
<td>2009</td>
<td>704</td>
</tr>
<tr>
<td>APPD separated- Chicago</td>
<td>2010</td>
<td>608</td>
</tr>
<tr>
<td>APPD- Miami (with MPPDA)</td>
<td>2011</td>
<td>670</td>
</tr>
</tbody>
</table>

Subgroups of PDs, APDs, Chiefs, and Coordinators were similar to these overall trends, with all groups showing increased attendance between 2008 to 2011. Review of Fall APPD Meeting data show total attendance from 2008 to 2011 of 166, 154, 130, and 204. Thus, the number of Fall Meeting attendees seems to have not significantly decreased, and even had a trend upwards in 2011 for the D.C. area meetings. Again, all of these numbers are somewhat difficult to directly compare, but at a minimum, there has not been a drop off in attendance and our meetings have remained vibrant.

Quantitative numbers are only part of the story, and we will continue to review meeting feedback scores and individual comments as well. Personally, I have found the freedom of adding workshops, social gatherings, having a single dedicated hotel, and other benefits to be positives in our last two APPD-led meetings. I have heard this positively noted by several others as well. While most members do not see the background logistics and planning, our APPD staff has been able to be much more creative, cost-efficient, and effective too. Like many of you, I do miss the PAS programming and ability to interact with a wider array of colleagues since our meetings have separated. I have even been forced to choose meetings and have missed a few PAS meetings recently.

On balance I believe that the APPD has been able to grow more and provide better programming independent of the PAS meeting structure. Again, this is my own personal opinion, but I was a healthy skeptic at the start. I have found that these numbers and my own experience have shown our APPD meetings to be moving in a very positive direction. I greatly look forward to San Antonio and 2013 when we meet together with COMSEP. I believe that new initiatives, such as the PEEAC meeting, Program Director school, and other pre-APPD meeting programming will only grow with the flexibility we have as we strive to be leaders in pediatric educational programming. This is not to ignore the
importance of other meetings, organizations, and our collegiality -- we must continue to
develop programming, such as the APPD fellowship pre-meeting at PAS and other
opportunities to partner. However, I hope that members will review some of the data and
keep this conversation going with leadership as we work together in future meeting
planning and development of programming to meet member and APPD goals.
Association of Pediatric Program Directors
"Innovation, Collaboration, Communication, Scholarship"

2012 Annual Spring Meeting in San Antonio

APPD Fall 2011 Newsletter pdf

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Past-President
Susan Guralnick, MD (2010-2012)

March 28-31, 2012
San Antonio Marriott Rivercenter
101 Bowie Street
San Antonio, TX

The Evolution of Residency Training:
Adapting and Innovating in a New Era

APPD 2012 Spring Meeting Preliminary Schedule

ONLINE HOTEL RESERVATIONS NOW OPEN
You may also call 1-800-266-9432 and ask for the APPD group rate.

Preliminary Schedule
Pre-Conference Workshop Topics (scheduled for Wednesday, March 28th from 11:00 am-3:30 pm):

(1) Teaching Residents to Teach Themselves (inspiring residents to study on their own, make a study plan, become a lifelong learner, CME, etc.)

(2) Leading Teams, Managing People and Making Projects Scholarly – Essential Professional Development for Program Directors

WORKSHOP/ABSTRACT SUBMISSIONS HAVE CLOSED
Notifications to the lead author were emailed in late November.

Meeting Registration will open in mid-January.
Excellent presentations and the Final Program from the recent APPD 2011 Fall Meeting are posted for your review on the APPD website, www.appd.org.

**Final Program**

**Presentations**

You may also access these and previous meeting documents in the Members Only section of the website by going to www.appd.org, click on the Educational Resources tab at the top, then click on Meeting Presentations.

We send a special “thank you” to our Keynote Speaker, Dr. Joe Gilhooly. Joe’s “Top 10 List for Improving Medical Education” was enlightening, thought-provoking and entertaining, setting just the right tone for the remainder of the conference.

Photos from the 2011 Fall Meeting may be viewed at this link APPD2011FallMeetingPhotoSlideshow, with a smattering posted below.

Thanks to everyone for attending and helping make this another very successful APPD conference!

**MARK YOUR CALENDARS NOW!**

APPD 2012 Fall Meeting
October 3-5, 2012
Arlington, VA
Interested in starting a discussion about a topic in this issue of the Newsletter? Go to the APPD Home page and click on the "Communications" tab at the top, then "Discussion Board" in the drop-down menu, to get started.

Contact Us
http://www.appd.org
info@appd.org
APPD Program Director School Council

APPD Program Director School (APPD PDS) Council Named

The APPD is creating a Program Director School (APPD PDS) which we envision will be a nationally recognized program that provides a unique opportunity for pediatric academic leaders who have been in their role as program director for less than five years, those considering becoming a program director, or those wishing for a refresher, to engage and learn from seasoned program directors, pediatric educators, and other national leaders in pediatrics.

The first step in forming the APPD PDS was to send out a call for Council Members, those individuals who will be responsible for developing and delivering curriculum for the APPD PDS. The selection committee reviewed 22 capable and competitive applicants and had the difficult task of selecting 7 Council Members. We are happy to announce the inaugural Council which consists of the following APPD members:

Franklin Trimm, MD: Chair
University of South Alabama

Susan Bostwick, MD
New York Presbyterian Hospital/Cornell Campus

Grace Caputo, MD, MPH
Phoenix Children's Hospital/Maricopa Medical Center

John Frohna, MD, MPH
University of Wisconsin

Hilary Haftel, MD, MPHE
University of Michigan

Su-Ting Li, MD, MPH
University of California (Davis) Health System

Linda Waggoner-Fountain, MD, MEd
University of Virginia

Please look for more information about Program Director School offerings in the late winter.

The APPD Special Projects Program provides financial support for projects that further the APPD's mission, strategic plan, and task force charges. The Board of Directors determines the funds available each year and may grant up to $10,000 per selected project. The number of awards is dependent upon the funds available and the size of the grant requests received from the selected projects.

Click here for more information or to submit a Special Project initial proposal by the January 16 deadline.

Click here for a complete list of funded projects.
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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

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Adam Pallant, MD, PhD (2010-2013)
The Mid-America Region had its Fall Meeting at Nationwide Children’s Hospital in Columbus, Ohio on October 21st. Over 60 people, including Program Directors, Associate Program Directors, Fellowship Directors, Coordinators, and Chief Residents from across the region attended. Following introductions and a short business meeting, we conducted simultaneous PD and coordinator sessions.

The Program Directors heard presentations under the topic “Redesign: Programs in the New Duty Hour Era” from John Mahan (Nationwide) and Doug Ziegler (St. Johns). Abdulla Ghorì shared with the group information regarding the new institutional/PIF requirements.

Serena Silvaggio, C-TAGME, West Virginia University began the Coordinators Session with a discussion of duty hour changes, their impact on our programs and methods the programs are using for implementation. This led into a discussion of how each program is handling the fatigue issues and identifying fatigued residents. Of interest was that one program has implemented an anonymous call-in policy where they call for a cab if they are too fatigued to drive home, with the program receiving the charge. The resident is not identified, which makes the residents more comfortable using it. This provided a natural transition into the second session topic: a brainstorming session on implementation of supervisory and transitions of care/handoff policies and methods.

In the afternoon, following lunch, the coordinators returned to their conference room for 2 additional sessions. Jean Ashley, C-TAGME (Louisville) gave a presentation on Recruitment. This sparked great exchange of ideas and several suggestions. Many of the coordinators were unaware that ERAS could be set to automatically download files daily as long as you do not log out of your computer. There was discussion regarding the benefits and tools available through ERAS that make sorting applications for interview season much easier. The discussion then moved to post-interview surveys and how they are implemented. Some favored survey monkey, while still others felt there was better return on an anonymous survey given during the interview day to be either dropped off at the end of the interview day or returned in a self-addressed envelope.

Serena Silvaggio, C-TAGME, West Virginia University, led a final discussion on site visit preparation where the senior coordinators answered questions about what to expect, things to be prepared for and advice. We stressed the importance of asking other coordinators for guidance and providing guidance for newer coordinators. Useful tools, email lists, and other items were discussed as well. All coordinators were also encouraged to pursue certification, and given advice on approaching their departments for funding support and suggestions for presentations at a meeting to meet that criteria for certification.

The Program Director, Associate PDs, Fellowship Directors and Chief Residents participated in a lively discussion stimulated by a debate on the topic, RESOLVED: Residents should be allowed to pick whatever they feel appropriate for their six months of “career directed experiences.” Allison Brindle (Cleveland Clinic), Rajesh Donthi (Nationwide), Julie Cernanec (Cleveland Clinic), and Hilary Haftel (Michigan) led the debate and facilitated the discussion. The group raised several concerns, including the “slippery slope” of limiting the general pediatrics curriculum, as well as the difficulty for programs that currently schedule subspecialty rotations as “selectives” rather than
“electives”. Maria Ramundo (Akron Children’s) and Sarah Multerer (Louisville) presented on their experiences with altering their curricula to conform with the suggested requirement.

By 3:00PM, the meeting had wrapped up, with the following items for follow-up and action:

1. Anyone wishing to serve on a regional subcommittee to decide on the process for awarding resident research grants (from our regional dues) should contact Hilary Haftel at hils@umich.edu.

2. The Region is soliciting nominations for Associate Regional Chair to be elected prior to the Spring APPD Meeting. This will be a three-year term, to be followed by a three year term as Regional Chair. All nominations and self-nominations should be directed to Hilary at hils@umich.edu.

3. Other programs in the region should be aware that most programs are moving towards initiating recruitment in the month of October, rather than November, to take advantage of better weather and the ability to reduce interviewing in January. This switch will be made more possible by the anticipated release of the MSPEs on October 1st instead of November 1st starting in 2012.

4. The suggestion was made to petition the ABP for an earlier release of the ITE scores, as the release in late October this year was problematic for coordinators trying to get ready for recruitment season. Dr. Haftel will be discussing this and providing feedback to Dr. Gail McGuinness regarding this issue.

5. It was suggested that ERAS provide a middle level of access that would allow the user to see and download, but could be customized to prevent errors when multiple users are viewing. This information will be forwarded to ERAS.

Thanks again to John Mahan, MD and Nationwide Children’s Hospital for sponsoring the meeting! We hope to see everyone at the APPD Annual Meeting in San Antonio, when the Region will meet over LUNCH!!!
Ambrosya Amlong, Regional Coordinator Chair

The Midwest Region held their 4th annual fall meeting at the University of Chicago, September 30-October 1. We had nearly 40 people in attendance, a record for our group. We had a delightful kick-off dinner on Friday night. On Saturday we spent the day thinking about information technology and how we are utilizing it in our own programs. Lively discussions were also held on the new proposed Pediatric RRC requirements. We brought up the idea of creating a regional core curriculum instead of each program reinventing the wheel, as well as a regional page on Moodle for communication and discussion.

Additionally, one program shared how their “Patient of the Week” originated and shared its evolution and development over time. It demonstrated a powerful way to keep everyone in the program connected and how networking can be beneficial to the patient and education of house staff.

For the fun and adventurous part of the day we had our first Midwest APPD Ultimate Frisbee game. People were really playing -- running, putting forth serious Frisbee effort. Many of us stumbled around, but a few clearly knew how to zing that disc. We learned that, for the next meeting, we should do Frisbee first, then lunch!

The fall 2012 Midwest APPD meeting will be hosted by the University of Minnesota.
Ed Zalneraitis, MD, Regional Chair
Kelley Pike, Regional Coordinator Chair

The NPPD recently held its 22nd annual Fall Meeting in Boston at the Joseph Martin Conference Center at Harvard Medical School. It was hosted by the Boston Combined Pediatric Residency Program and its Directors, Drs. Ted Sectish and Bob Vinci and Coordinators, Susan Brooks and Joyce Patterson, as well as other collaborators. Ms. Vanessa Goodwin, coordinator of the Vermont Program was thanked for her service as Co-Chair and Ms. Kelley Pike of the Albany Program was welcomed and congratulated on her election as new Co-Chair of NPPD.

The meeting included a two-part series of presentations on innovations, ideas, and improvements evolving in member programs. Each presentation was around 10 minutes in duration with questions and comments. This approach was a new one for the NPPD, and it was well-received. Members asked that it be repeated in future meetings. The topics covered were: a year-specific longitudinal simulation curriculum, improving family centered rounds, a review of a 12-year experience of an academic development block, a modular night education curriculum, a longitudinal QI curriculum, a longitudinal off-site office experience, a model for learning DBPeds in continuity experience, a group practice model for continuity experience, senior home call telephone triage, lay book club, and a model for team-based board review.

The meeting also had its usual breakout sessions for Coordinators, Chief Residents and combined Program Directors, Associate Program Directors and Clerkship Directors. Each group addressed active issues faced among their members. The Keynote presentation was by Dr. Christopher Landrigan: “Duty Hours, Sleep and Fatigue.” This was followed by a question and comment period. The day concluded with a discussion of citizenship: how to elicit resident compliance with program expectations. A number of suggestions and approaches were presented.

At lunch, there was a business session where the entire group discussed regional dues, the anticipated new requirements, night curriculum and hand-over/off curriculum and efforts. Dr. Shannon Scott-Vernaglia, Program Director at Massachusetts General Hospital, presented the report from the subcommittee on regional dues. It was proposed that the committee solicit proposals for one to two small grant projects per year, and there was an alternative proposal that the dues could help support the regional meetings. It was decided to survey the group on raising the dues to 20% of APPD dues and to determine the preferred plan for using the dues. The group also decided to ask for release of the new requirements as soon as possible, so members could have the longest time possible to adjust to the new rules.

The Spring Meeting is planned for March of 2012, to be hosted by the Albany Medical College Pediatric Residency Program. Dr. Patricia Hopkins will be the host Program Director and Ms. Kelley Pike will be the host Coordinator.
ACGME Regulation Change: How is it working for you?

The NY/NJ Region held its Fall Meeting on October 28, 2011 at the Corporate Learning Center of Jacobi Medical Center, Bronx, New York. About 70 Program and Associate Program Directors, Chief Residents, and Program Coordinators attended the meeting, representing 20 programs. The consensus was to continue meeting at this site in the future, as it is centrally located (and free to use).

The meeting started with a presentation by Susan Guralnick on the Milestones. Lively conversation followed on the impact on residency programs.

This was followed by a review of the new work hour regulations and a presentation by the Chief Residents of Albert Einstein College of Medicine (Jacobi) of that program’s new call/shift schedule. Everyone shared their attempts to satisfy all the requirements of the ACGME while trying to promote a learning environment and trying to take care of our patients. One consistent concern was maintaining the continuity in continuity clinic. Another was trying to integrate teaching into nighttime shifts. This discussion will undoubtedly be revisited in future meetings.

The next part of our meeting was devoted to professional development. Cori Green, MD, MS and Susan Bostwick, MD, MBA presented a project they are working on: Child and Adolescent Psychiatry for Primary Care. The goal is to improve the ability of pediatricians to detect and manage mental health issues in practice. The talk was well received, and the speakers will present again in the spring.

The spring meeting is scheduled for March 23rd, 2012.
Adam Rosenberg, MD, Regional Chair

The yearly Western Regional meeting has been scheduled for Friday, February 17 in Phoenix hosted by Dr. Grace Caputo, with an opening dinner on Thursday, February 16. For more information, please click here: Meeting Agenda

We continue as a region to work on the regional project headed by Dan West from UCSF to develop a pediatric specific structured clinical observation form. An abstract was submitted for the spring APPD meeting.
Task Force Reports

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Curriculum Task Force

Evaluation Task Force

Faculty and Professional Development Task Force

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 held a phone conference in November to discuss ongoing projects and to brainstorm for ideas about creating a centralized ‘clearinghouse’ for completed curricula, where APPD members can find available resources to meet their needs.

The Curriculum Task Force membership continues to move forward with a variety of curricular projects. Updates follow.

- **National Nighttime Curriculum:** The curriculum is currently undergoing a 6-month national field test (July - December 2011), with 88 IRB-approved residency programs participating. Residents’ pre/post attitudes, confidence, and knowledge, along with general feasibility of implementation, are being measured. Following conclusion of this study, modules will be revised and then submitted to MedEd Portal and the APPD Share Warehouse for general use. At our spring meeting, the group hopes to discuss next steps for further improving nighttime education. Please contact Becky Blankenburg, MD, MPH with questions or comments (rblanke@stanford.edu).

- **Grief and Loss Curriculum:** Goals and objectives for the project have been solidified. Two working groups, one focusing on Knowledge/Communication, and another on Self-Care, are developing experiential approaches to address each objective. The group looks forward to input from the Task Force to review and critique their progress at the Spring Meeting. Please contact Janet Serwint with questions or comments (jserwint@jhmi.edu).

- **Residents as Teachers:** The group has completed a review and evaluation of current published RAT papers looking for reproducible interventions. They will soon be contacting interested individuals, identified at the last Spring Meeting, to pair up and critically review each possible intervention to select the most useful resources. They also seek individuals who are interested in collaborating with them to build an online resource. Please contact Barrett Fromme with questions or comments (hfromme@peds.bsd.uchicago.edu).

- **Global Health:** Resources for global health curriculum development (including some of those presented at the 2011 Spring APPD Meeting) are available at www.aap.org/sections/ich/toolkit.htm. Following the last Spring Meeting, members of the group worked with APPD leadership to better integrate global health educators into APPD membership; as a result, this year's APPD membership form included an option for programs to add global health educators as APPD members. In addition to continuing to define an organizational structure for global health educators within APPD and to catalog pediatric global health programs, this group would like to formalize processes for disseminating information. Those interested in assisting with this effort should email their contact information, institution, and present position or title to darlene.sarver@cchmc.org. Please contact Sabrina Wagner with questions or comments (swagner@pediatrics.wisc.edu).

- **Bioethics:** This curricular project is now concluded! It can be accessed at www.aap.org/sections/bioethics/PDFs/BioethicsResidentCurriculum.pdf, on the AAP’s Bioethics Webpage. Please contact Carrie Radabaugh with questions or comments.
- **Medical Home**: The Resident Education Initiative Work Group has continued progress on developing a national medical home curriculum. They have completed an APPD sponsored survey of Program Directors regarding current status and needs assessment for medical home curricula. The survey results have informed the creation of the curriculum, which is nearing completion; finalization of the curriculum should occur in 2012. The goal is for the curriculum to be web-based for adaption by any program. The group plans to pilot one aspect of the curriculum (eliciting family feedback) in the spring and fall of 2012. Contact Vida Schwartz at vcschwartz@comcast.net for details.

**Contact Us**

http://www.appd.org

info@appd.org
Suzette Caudle, ME, Task Force Chair
Katy Bartlett, MD, Task Force Vice Chair

The Task Force leadership is interested in discussing several ideas (and perhaps soliciting new ones!) around a proposed project to develop teaching tools for Program Directors to use in teaching and updating their faculty about assessment and evaluation of the competencies. Given the remarkable participation by many members of the APPD in the joint ABP/APPD publication *Assessment in Graduate Medical Education: A Primer for Pediatric Program Directors*, we have a wealth of expertise and human resource available to the Task Force to assist in implementing the project. We anticipate we would also draw upon the expertise of colleagues in the Faculty Development and Technology Task Forces.

Look for an announcement soon about a task force telephone call. If you signed in at the Spring Meeting task force meeting you will get email notification of the call. If you aren’t sure and want to be sure you know about the call, or just have questions about this or the Task Force in general, please feel free to email Suzette Caudle at suzette.caudle@arolinashealthcare.org or Katy Bartlett at katy.bartlett@duke.edu.
President's Message

The Faculty and Professional Development Task Force is pleased to update the APPD membership on some of its recent and upcoming activities. Dr. Nancy Spector gave a presentation to attendees at the Fall Meeting in Arlington, VA that highlighted the APPD mentoring program, as well as other Task Force projects. The presentation was very well received, especially by many of our newest APPD members.

In addition, the Task Force was asked by the APPD Program Planning Committee to submit a pre-conference workshop proposal for the upcoming Spring Meeting in San Antonio. There were 14 potential pre-conference themes that were disseminated to the APPD membership, and the Faculty and Professional Development Task Force’s submission entitled “Leading Teams, Managing People, and Making Projects Scholarly—Essential Professional Development for Program Directors,” was voted as one of the top two workshops. This session will be presented on Wednesday, March 28 from 11am - 3:30pm.

The Task Force will also continue to oversee the all-day Forum for Chief Residents, which will be moved back to its previous pre-conference time slot. Finally, the planning committee of the APPD mentoring program will be working through winter to develop further mentorship opportunities for the members. Needless to say, Task Force members will be busy and excited to help disseminate all of this great educational content during our upcoming Annual Spring Meeting!

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If you were not able to attend the Fall Meeting of the APPD, you missed out on a wonderful meeting and numerous opportunities to network. The evening opened with dinner, followed by an outstanding keynote speech given by Doctor Joseph Gilhooly, Vice Chair of Education, Oregon Health Sciences University, and Chair, Pediatric Review Committee, ACGME. He provided an excellent summation of the new requirements and discussed moving beyond duty hours with the top 10 reasons for Improving Medical Education. The keynote speech paved the way for the remainder of the meeting, as each speaker demonstrated a desire to share knowledge and engaged in camaraderie. For those new to the association, we hope we haven’t set the bar too high.

Kick Off

Avis Grainger, Co-Chair of the Coordinators Executive Committee, opened the session with an outstanding power point presenting the launching of the Coordinators’ Section of the APPD. This was a delightful reminiscence of the Coordinators’ Section. It is our hope this project will be expanded for the upcoming spring meeting. A special thanks to Avis for her work on this project.

New Coordinators

There were approximately 34 new coordinators who attended the fall meeting and engaged in the many non-stop sessions. Perhaps it was the excitement of the newbie or the fall weather, but so many coordinators left the meeting with new ideas, take home tips, and the pure pleasure of connecting with other coordinators.

We were also fortunate to have representatives from the AAP, ABP, FindAResident, ERAS, and NRMP available for all of the hands-on sessions and who participated in several panel discussions. Their level of expertise was appreciated, along with their professionalism and candor in fielding questions. A special thanks to Lee Currin, Director, Credentials & Examination Administration, American Board of Pediatrics; Charlotte Nunnery, E-Learning Content; and Doris Santos, Member Services Resident Specialist, American Academy of Pediatrics. In addition, Angelique Johnson, Senior Specialist, ERAS Communications & Administrative Services; and Dr. Laurie Curtin, Director, Match Policy (NRMP). These individuals are an integral part in the success of our many meetings and we are most grateful.

Introduction and Sign-up

Kathy Miller, John Hopkins University, Baltimore, Maryland, along with Jean Ashley, University of Louisville/Kosair Children’s Hospital, Louisville, Kentucky, shared information on the task forces: Management and Supervision, Professional Development and the Tools Task Force. Coordinators were invited to sign-up. For those individuals who did not get to sign-up, please e-mail the respective chairs.

Kathy Miller lead a very interactive session entitled “Alphabet Soup,” and the participants enjoyed the teamwork in completing a crossword puzzle of acronyms. A special thanks to Doctor Larry Wasser, Professor at the University of Louisville, for his work in creating the puzzle.
Finally, a brief introduction and discussion of the Coordinator's Handbook was shared. Participants were encouraged to go on-line and review the booklet.

Also, the mentoring program was introduced by Avis Grainger of Levine Children's Hospital at Carolinas Medical Center in Charlotte, North Carolina, and Jean Ashley. They stressed the importance of the mentoring program and encouraged all of the new coordinators to reach out to the mentors for help.

**Mentoring Reception and Dinner**
Pat Jacobi, Washington University at St. Louis, Missouri, arranged a special dinner on Thursday, evening—while the rain didn't agree with the evening, the atmosphere and the fellowship was remarkable. New faces and new friendships were made. Great job, Pat!

**Hot Topics**
Kathy Miller and Staci Leitner, Stanford University in Stanford, California, did a fantastic job presenting a very important topic “Surviving a Site Visit” for the categorical and fellowship coordinators. Of course, these topics are so important that both needed more time and the question and answer sessions were very engaging. The biggest take away from these sessions was to start early, stay on task, and seek help as needed. The site visit is a team effort and requires work effort from the entire team. Finally, Jaime Bruse and Avis Grainger participated in a panel discussion “Surviving a Successful Recruitment Season” and Staci Leitner participated in a similar fashion for the Fellowship track.

**Myers-Briggs**
Prior to attending the meeting, the coordinators of the executive committee took the Myers Briggs test. The group shared their individual results and discussed personality traits as a means of fostering more meaningful working relationships.

**Salute to the Co-Chairs**
Special thanks are extended to our wonderful Co-Chairs, Jaime Bruse and Avis Grainger for their numerous hours in organizing the Coordinators Section of the meeting. Their willingness to work under tight deadlines was the glue that made our program agenda so strong, and we are most appreciative.

**Looking Ahead!**
Finally, it is time to prepare for the upcoming Spring Meeting, March 28-31, 2012. Mark your calendar, reserve your hotel room and look for the registration materials in mid-January. You may e-mail info@appd.org with comments and questions and they'll be passed on to us.
ABP Releases “Assessment in GME: Primer for Pediatric Program Directors” as pdf, e-book and e-pub

The American Board of Pediatrics has released a new resource, *Assessment in Graduate Medical Education: A Primer for Pediatric Program Directors*.

This resource represents a collaborative effort between the Program Directors Committee of the ABP and the APPD and will serve as a practical guide to advance the assessment of competence of trainees.

*NEW* The Primer is available as a pdf, an e-book for Kindle and an e-pub version (see below).

Primer in pdf format

e-book for Kindle

e-pub version
APPD LEARN News

Alan Schwartz, PhD
APPD LEARN Director

APPD LEARN, our Longitudinal Educational Assessment Research Network, is moving forward with several projects in the upcoming year under the leadership of its new Director, Alan Schwartz, and Project Manager, Eric Shropshire. APPD LEARN will soon launch its new web site, and will announce the membership of its proposal review and educational development committees. These important committees will assist the Director in reviewing proposals for new studies from APPD LEARN members and in identifying educational opportunities for APPD LEARN members.

Seventy-eight APPD programs are now members of APPD LEARN and eligible to participate in upcoming studies, to access APPD LEARN data sets, and to propose new studies to be conducted with the network. Currently in progress is a survey by Hilary Haftel of program directors to describe program changes made in response to duty hour regulations. Studies of new methods of resident assessment based on the Pediatric Milestones and entrustable professional activities are being prepared for 2012.

Drs. Schwartz and Haftel will be presenting a mini-course sponsored by APPD LEARN at the APPD Spring Meeting, entitled "From Great Programs to Great Research: Building Scholarship". We look forward to a great year of collaborative research.
ACGME Parker J. Palmer Award: Pediatric Recipients

ACGME honors two pediatric program directors with 2012 Parker J. Palmer Courage to Teach Award

CHICAGO, October 7, 2011 – The Accreditation Council for Graduate Medical Education has chosen ten program directors as recipients of its prestigious Parker J. Palmer Courage to Teach Award. The annual award recognizes program directors who are excellent teachers and mentors who exemplify the “courage to teach.”

The award is named after Parker J. Palmer, PhD, a writer and senior associate at the American Association for Higher Education. Dr. Palmer wrote The Courage to Teach and is a national leader in educational issues.

This year’s ACGME Parker J. Palmer Courage to Teach awardees in Pediatrics are two very active APPD members:

Grace Caputo, MD
Phoenix Children’s Hospital/Maricopa Medical Center, Phoenix, Arizona

Rebecca Swan, MD
Vanderbilt University Nashville, Tennessee

Each recipient will receive a plaque and check for $1,000 on March 2 at an awards luncheon during the 2012 ACGME Annual Educational Conference in Orlando, Florida. Congratulations to Grace and Rebecca!
CoPS Begins Communication Role with ABP Subspecialty Clinical Training Certification Initiative

Rob Spicer, MD
Professor of Pediatrics, Cincinnati Children’s Hospital Medical Center
Chair, CoPS Working Group on Subspecialty Clinical Training Certification Initiative
www.pedsubs.org

The Council of Pediatric Subspecialties (CoPS) is pleased to update the members of APPD regarding the recently announced American Board of Pediatrics Subspecialty Training and Certification Initiative. In 2010, the American Board of Pediatrics (ABP) convened a large group of pediatric subspecialists in an invitational conference to discuss the possibility of modifying clinical training and certification in the pediatric subspecialties. In July of 2011 the Board announced the initiative to the pediatrics community. Motivated by the ABP’s desire to evaluate clinical subspecialty training with a special emphasis on competency, a task force on subspecialty clinical training and certification was created, led by Dr. David Stevenson. The task force will examine the current model of pediatric fellowship training, emphasizing the importance of competency-based education, and recommend changes to the current model if needed.

In an effort to communicate the activities of the task force, the ABP has asked for and received a commitment from CoPS to serve as a network of communication. CoPS will interact with individual subspecialists, subspecialty organizations, and societies in an effort to distribute and solicit as much information regarding the initiative as possible.

CoPS membership and leadership are excited to be given this charge. The CoPS effort in the task force will be chaired by me. I will be joined in this effort by Dr. Linda VanMarter from Boston, and Dr. Marilyn Punaro from Dallas. CoPS membership is wholeheartedly involved at the individual subspecialty grass roots level and will provide valuable assistance to the task force members, as well as to the CoPS Executive Committee, who is providing strong support for this effort.

In the meantime, I encourage each of you to visit the ABP website to learn more about this initiative by clicking here.

We look forward to our involvement in this project over the next several years, and look forward to involving members of APPD as well.
The Council on Medical Student Education in Pediatrics (COMSEP) will celebrate its 20th year at its 2012 annual meeting, March 22-24, in Indianapolis, IN!

The COMSEP annual meeting is a wonderful opportunity to learn from each other through workshops, mentoring sessions, research presentations, task force meetings, and just by sharing ideas! Participants leave a COMSEP meeting energized from interactions with creative, enthusiastic, and like-minded educators, and carry great ideas back to home institutions.

Featuring Keynote Speaker:
Thomas S. Inui, ScM, MD, President and CEO of the Regenstrief Institute for Health Care, the Sam Regenstrief Professor of Health Services Research, and Associate Dean for Health Care Research at Indiana University School of Medicine

Targeted Audience:
Any health care provider, educator, or clerkship administrator interested in medical student education.

Meeting Highlights:
- Educational Workshops
- Research Presentations and Poster Session
- Member Driven Task Force Meetings
- Networking and Mentoring Opportunities

More information will be available soon at http://www.comsep.org/AnnualMeeting.

Please feel free to contact the COMSEP Executive Office with any questions! info@comsep.org
The annual fall meeting of the ERAS Advisory Committee was held at the headquarters of the AAMC in Washington, D.C. on October 11, 2011. Ed Zalneraitis was an APPD member in attendance. Issues of possible interest to the APPD membership were as follows:

The web-based, reengineered ERAS system should be fully complete and implemented by 2015 or 2016. The pilot for the web-based and reengineered PDWS will occur for the 2013 match, and programs for the pilot are still being enrolled. The good news is that the general opinion in the satisfaction survey was that the current version of ERAS is meeting program and applicant needs quite well.

There was a request to get more information on where applicants completed their clinical experiences (that is to say, at which sites). The hope was to better assess preparation for GME experiences. It was felt that such information could be best included in the MSPE or listed on transcripts.

There was a discussion of ways to identify which Pediatric applicants were applying with the intent of completing two years as part of Pediatric Neurology education. It was noted that the Child Neurology match was changed to the NRMP and ERAS will be used for applying to Child Neurology in the future. It was felt that the issue of those applying with the intent of completing only two years of Pediatric training was not an issue for ERAS.

There was a discussion of which honor societies should be represented separately in ERAS. Currently, the allopathic AOA is the only one included in the application process separately. Other candidates for separate listing in ERAS were osteopathic PSA (academic) and SSP (humanism) and the Gold Humanism Honor Society. Questions included: Why should there be any honor societies listed separately? What should the criteria be for a separate listing? Why not request separate input for all societies with a reasonable selection and a verification process? How would other honor societies verify those awarded membership? What would we do with international societies? No recommendation was reached through the discussion, and further input is welcome.

There was a discussion of which browsers applicants could use with ERAS. Currently, Explorer, Fire Fox and Safari are supported, and others can be employed at the user’s peril. Even with those browsers, there can be issues of having the version supported by ERAS. There are plans to consider supporting the use of other browsers with the reengineering of ERAS, and there are no other solutions for now.

It was noted that applicants are required to submit USMLE or COMLEX scores if they have taken any part of either exam. To not do so violates the requirement for full disclosure.

ERAS will have three application cycles for SOAP. Cycle 1 is from Monday noon to Wednesday at 11:59 during which applicants can submit up to 30 applications. Cycle 2 is from Wednesday noon to Thursday 11:59 during which the applicant can submit an additional 10 applications. Cycle 3 is from noon Thursday to Friday 11:59 during which applicants can submit an additional 5 applications. All applications must be through ERAS. There is no charge for the applications and additional applications cannot be purchased or obtained in any other way.
The Schedule of ERAS use for the 2012-2013 match year will be as follows: July 1, 2012 ERAS opens for students to enter information. September 15, 2012 (not September 1!) programs can access applicant information. October 1, 2012 MSPE reports will be released from the Deans of Student Affairs (not November 1!). This may allow many more programs to use the MSPE in their interview invitation process.

Click here for more information on SOAP.
IIPE is alive and well. We received a couple new Letters of Intent (LOIs) for the August deadline and five additional LOIs for the November 18th deadline. There is a 2011 Guide for Applicants on the IIPE homepage (www.innovatepedsgme.org) to walk you through the submission process. A web-based template has also been created to make the submission process as efficient as possible.

If you have not seen the October issue of Pediatrics, I would encourage you to take a look at the article published in the IIPE pages of the “Perspectives” series. The article is entitled “Development of a novel curriculum to enhance the autonomy and motivation of residents.” This is a topic near and dear to every program director’s heart! The project is being done at Golisano Children’s Hospital at Strong, University of Rochester, and the authors are Connie Baldwin, Laura Shone, Peter Harris, Mark Craig, Melissa Cellini and Bill Varade.

IIPE is working with APPD LEARN to create a second pathway that will hopefully generate a great deal of enthusiasm for innovation among APPD members. In this new pathway we will develop the idea and research design at the national level and through LEARN create educational research collaborates that would enable interested programs to participate. Studying the Pediatric Milestones would lend itself to such a pathway.

Speaking of milestones… We now have the feedback from the content experts whom we asked for help. We are incorporating their feedback at the time of this writing and hope to get the first iteration out to you in the not too distant future. This will be the first of many iterations of these milestones. We need to learn from all of you as you begin to use them. We are counting on you to tell us what works and what doesn’t work so that we can edit accordingly. When you think about it, this project is giving program directors the opportunity that we have always hoped for which is to engage in creating and studying an evidence base that will inform how we educate and ultimately inform how we assess our learners and evaluate our programs.
I wanted to take this opportunity to share with the APPD membership some of the activities and updates from the Med-Peds Program Director’s Association. It’s hard to believe that residency recruitment season has already begun. On the tail of a great recruitment year in 2011, the applicant numbers for 2012 are on track for similar applicant numbers this year. We’re looking forward to meeting another excellent cohort of students interested in Med-Peds.

At the recent American Academy of Pediatrics Meeting in Boston, the AAP Section on Med-Peds once again sponsored the “Pediatrician Health Day” booth in the exposition center. At the booth, medical students interested in Med-Peds, alongside Med-Peds residents and attending physicians, spoke with NCE attendees to remind them to not ignore their own preventive health. We used current preventive health guidelines to educate Pediatricians and their spouses about recommended screening tests and vaccines. Pediatricians were also provided with take-home inventories that would help them assess their own work stress level and were reminded of the importance of seeing a primary care physician on a regular basis. The information was well received and appreciated by all of the visitors to the booth.

In September, the MPPDA co-sponsored a faculty development workshop for the Med-Peds Educator at Vanderbilt University. Young PDs, APDs and key faculty members attended the weekend workshop to develop educator skills, academic goals and build their faculty portfolios. The reviews were quite positive and we hope to continue to provide this workshop on a regular basis.

Many MPPDA and APPD members weighed in on the proposed requirements from the Pediatrics RRC this past summer. The requirement stating that Med-Peds programs could not be larger than the categorical Pediatrics program would put several Med-Peds programs in jeopardy. Even though the individual class sizes may be smaller than the categorical program, given the fourth year of training, the total number of combined residents sometimes exceeds the number of categorical residents. Thank you to all of the MPPDA and APPD members who pointed out this concern to the ACGME.

Dues statements from MPPDA were sent out from the AIM office in July. If you have not yet paid your dues, please make sure you do so.

Save the date for the next MPPDA annual meeting. The meeting will be held in conjunction with the APDIM meeting in Atlanta. The dates for the MPPDA meeting will be April 25th & 26th. When making travel arrangements, don’t forget to plan to attend the MPPDA dinner on the evening of the 26th. We look forward to seeing you there.
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Leadership

President
Ann Burke, MD (2010-2012)

President-Elect
Patricia Hicks, MD (2010-2012)

Past-President
Susan Guralnick, MD (2010-2012)

Shawn Batlivala, MD
Chair, AAP SOMSRFT

The Section on Medical Students, Residents, and Fellowship Trainees (SOMSRFT) continues to be a strong force in the American Academy of Pediatrics. We remain the largest Section of the Academy with 13,183 members from medical students interested in pediatrics to senior sub specialty fellowship trainees. We have continued to work hard to improve the professional lives of our members, making significant advancements this past year.

Along those lines, we redrafted our Section’s strategic plan earlier this spring as the first crucial step to achieve our goals. We completely revamped our plan to focus on three major arenas: Work-Life Balance, Professional Home, and Advocacy. In regards to Work-Life balance we are working to centralize resources on financial and life planning that are specifically geared towards our members. We are also working to ensure that trainees are aware that our Section may be able to help with issues at work or home.

In terms of the Professional Home, we continue to strive to be the premier professional/educational home for our members. In addition the wealth of resources offered from the Academy—including PREP, Red Book, & Pediatrics in Review—we offer additional educational resources, a forum to present research at the National Conference and Exhibition (NCE), awards for training, and grants for research and advocacy projects. These awards include the International Elective Award for trainees to use for a rotation abroad, the Resident Research Grant which provides up to $2,000 for residents to enhance research skills, Residency Scholarships which provide up to $5,000 to help allay financial difficulties for residents in good academic standing, and the Community Access to Child Health (CATCH) grants which offer up to $3,000 twice a year to assist pediatric residents in implementing community-based child health initiatives. Other opportunities include the Anne E. Dyson Child Advocacy Award, the SOMSRFT Clinical Case Competition, and the Legislative Conference Scholarships. For more information regarding all our offerings, please visit: http://www.aap.org/sections/ypn/r/funding_awards. Lastly, we plan to develop and implement a subcommittee devoted to increasing fellowship trainee involvement as well as a mentorship program for trainees and established members of the Academy (both discussed below).

The third arm of our new strategic plan is to continue developing outstanding advocacy campaigns. Our Section conceived the advocacy campaign idea in 2005 which has addressed topics including mental health, tobacco prevention, and immunizations. Last year’s campaign on obesity was a notable success, as we worked with the AAP Obesity Initiative as well as First Lady Michelle Obama’s Let’s Move initiative. Our post-campaign surveys found that many programs highlighted the campaign and included its activities in their continuity clinics. We just unveiled our next campaign Vote For Kids. This campaign highlights strategies to effectively advocate for children during an election period, the hot topics of the upcoming 2012 election, and resources to utilize. In addition, the campaign calls for programs to give their medical students, residents, and fellowship trainees time off to vote. Additional information about the campaign is provided at http://www.aap.org/sections/ypn/r/advocacy/AAP_SOMSRFT_Advocacy.html.

In addition to our new strategic plan, we have continued to focus on improving our Section’s value to medical students. Our Medical Student Subcommittee Chair organized another wonderful session specifically for medical students at this year’s NCE. The session focused on optimizing residency applications and highlighted a panel of program directors for a Q&A
Session with the attendees. The NCE session was the most popular yet, with an estimated 200+ students in attendance. Our recent focus on medical students has paid off with medical student membership more than tripling in the past few years!

Given the recent success with medical student involvement, we are beginning the process of creating a Fellowship Trainee Subcommittee. Our intent is to improve AAP involvement not only during training years, but throughout a physician's career. The AAP has long had difficulties attracting and maintaining membership among sub-specialists given the myriad of other sub-specialty organizations. However, few of those organizations focus primarily on children. Thus our hope is to create a valuable professional home for pediatric subspecialists. To kick-start this process, we hope to enlist a fellowship trainee and former member of the SOMSRFT Executive Committee to spearhead this new subcommittee.

And in addition to the waning involvement by sub-specialists, AAP leadership has noted difficulty maintaining involvement of all young physicians, fresh from training, including generalists. In an effort to improve this discrepancy, our Section is committed to developing an AAP-wide mentorship program between established members of the AAP and trainees. Though the program is entirely conceptual at this point, our ultimate goal is to provide meaningful, life-long value to young physicians by offering them the wisdom and guidance of senior pediatricians. Given our success with medical students, we have recently created a Mentorship Subcommittee to discuss the issue with senior AAP leadership, develop ideas, and begin implementing our plan.

And finally, the AAP recently held the NCE in Boston from October 15-18th. The event was a success as usual, and our SOMSRFT activities were exceptional as well. We elected a new Executive Committee, consisting of 24 residents and fellowship trainees representing the entire nation. We also announced winners for many of the awards mentioned earlier, as well as conducted crucial business for our Section. Most notably, we developed 30 resolutions for consideration by our Section’s Executive Committee. These resolutions are intended to “provide a formal mechanism whereby the members of the Academy can provide input regarding Academy policies and activities”. We also unveiled our newest advocacy campaign Vote For Kids and even performed a flash mob during the plenary session. For more information about this year’s NCE, please visit http://www.aapexperience.org.

Overall, we are working hard to have another successful year. We have revised our Section's mission with a new strategic plan, continue to work on successful endeavors, and creating new subcommittees on Mentorship and Fellowship Trainees to further improve our Section’s influence and value. Though our work is “cut out” for us, we are excited and enthusiastic about the potentially enormous impact of our projects. We also hope that much of our work benefits the APPD as we share a common membership. So please do not hesitate to contact us if there is any way our Section can be of assistance!