President's Message

Ann Burke, MD
Wright State University

Ok, so who else got a little misty-eyed at the Spring Meeting when Ken Roberts got us all standing up and singing, "Sometimes you want to go where everybody knows your name" at the end of his excellent talk about our APPD History? I thought that was outstanding (Thanks, Ken!) and indicative of this wonderful organization to which we belong. The Spring Meeting was great: salsa dancing, work hour discussions, warm weather, friends and colleagues, spicy food! It never ceases to amaze me how much I learn from my APPD colleagues about program directing and medical education...thanks!

On the subject of the Spring Meeting, I noted a tenor of calm, constructive inquiry that dampened my anxiety and made me feel in control of the upcoming work hours. It could be a false sense of hope, but I think not! The conversation at the Grass Roots session for Program Directors was informed, articulate and spot on (in my opinion) about the ACGME work hours and details in the ACGME FAQs. What a bonus to have Joe Gilhooly (one of our former Board members) answer our concerns and questions about the new requirements and the work hours in such an informative way. Not only did Joe answer our questions, he reassured us as he alluded to the philosophy and explained the principles behind some of the requirements in question. This is not to say people didn't have objections about various items, requirements, and wordings in the RC requirements, but again, the comments were directed and constructive. Anyway, thank you all for your active and thoughtful participation. I am sure the Grassroots sessions for Associate PDs and Fellowship PDs and the Coordinators’ Assembly were just as helpful to those participants!

As many of you know, we have had multiple calls in regard to the New Duty Hours and management of that change process. I have heard from many you that the calls were helpful, informative and a great way to share ideas. The APPD Board is planning for more calls as we launch into our new, transformed Duty Hours schedules. It seems a great opportunity to do what the APPD does so well: share and network! Additionally, we are expecting the revised ACGME Pediatric Common Requirements to be released for comment in June. I foresee a number of calls to encourage group exploration of the implications of the requirements, raise questions, and offer opinions. The APPD Board will work on a statement to the Pediatric Review Committee as they will be asking for our members’ opinions. You may all respond individually as well. However, we feel a consensus statement is a powerful way to get our collective opinions stated and heard.

Additionally, I wanted to let you all know that the Board and the LEARN Advisory Committee are working hard and regularly on the LEARN Pilot Project in conjunction with the NBME and AAMC. We hope to have COMSEP involved as well. More details will be forthcoming. It is a big undertaking and APPD is trying to move through the process carefully and cautiously. Information regarding the pilot project was presented at the Spring Meeting Plenary session. The overall goal of LEARN is to allow APPD members to get involved in a network and data repository that performs educational research in a powerful manner (a large number of participants) that will eventually inform us as educators. Benefits will include member’s individual academic enrichment and the collective potential for wonderfully rich evidenced based educational practices (including assessment, curriculum, etc) that may inform the RC requirements in the future. It is a lofty goal, but will help us all! We will keep the membership informed as this moves forward.

In past APPD Newsletters, the commentary of my President’s Message has been peppered with topics such as how to manage change with quotes from Confucius and attempts at being inspirational with the analogy of “The Little Blue Engine that Could.” Trying to think of a theme
that would add insight or be inspirational to members made me late with this column! Thus, I am sorry it is not particularly creative and it is certainly not a poem, but I will share some thoughts with you. This time of year always makes me take pause and reflect on what being an educator and program director mean to me. I have been doing this job for 12 years and saying goodbye to my graduating residents never gets any easier! We work with them for what seems like such a long time and then...off they go...on to bigger and better endeavors. It is sad, but wonderful, I suppose. Then the new interns show up bright eyed and bushy-tailed, eager and ready to learn. Beautiful and exciting times, yet mixed emotions! I hope you all can relish in the experience of this time of transitions!
Jerry Rushton, MD, MPH
Indiana University School of Medicine, Riley Hospital for Children

“What do they do all night?...play cards?!” This was the question asked by a near octogenarian who graduated from our residency program at a recent alumni CME meeting. I was explaining to him about the duty hour limits, the number of residents, and the on call night teams (which were quite different from almost 50 years ago when he was an intern!). He came from a different era when 1 resident covered the entire hospital; they took call every other night and ‘resident’ physician truly meant they resided in the hospital.

The response and reaction to the IOM Report on duty hours and other potential changes in the graduate medical education system will undoubtedly continue to fan the flames of generational debates. However, we must move beyond phrases like “these young residents aren’t willing to pay their dues”, or “the faculty are totally out of touch”. The next time you catch yourself in this type of discussion; consider how to redirect this back to core values versus subjective, emotive elements of generational conflict. Residents of today are still highly motivated, caring professionals who are dedicated to patients. Yes, they dress differently, work different hours, and approach residency differently…but they are certainly not sitting around playing cards. And of course, neither are their faculty!

My goal for communications in the midst of this era of change is to prompt different generations of trainees to begin a dialogue of understanding as we jump into Duty Hours version 2.0 in July 2011. Last year, I asked a graduating senior, Dr. Ben Heilbrunn to write out some of his thoughts on the subject from someone in the midst of training.

I hope that you might have similar discussions between faculty and residents. As we embark on another new era, it was fitting to add Ben’s words to this APPD column:

Maybe we, the next generation of physicians, do have it easier. There, I said it. Now does that solve the issue? What issue you ask? That’s a good question. If the issue at hand is what generation had a harder road, then I must concede that the angle taken by the most recent MD’s is slightly less acute than our predecessors. However, is this really the right question to ask?

For myself, the issue of which I believe we should be debating, and my main concern regarding the question of who had it harder, is whether or not my generation of physicians are providing good health care to those in need. In the near future we will be the product of a system we did not create. What concerns me is that a generation of physicians is spending significant energy shouting at the rain and ignoring whether or not people are getting wet. It’s similar to the school yard argument that compares sports figures from different eras. How can one compare Magic Johnson to Oscar Robertson when the two never met in competition? I would like to believe that one could fall back on individual statistics to compare players but purists would argue there are entirely too may variables between the early and the modern game to appropriately use numbers. Thus, one could contend that the same is true in comparing physicians of different eras.
Driven by the explosion of knowledge and patient data systems created in the past twenty to thirty years, residents are forced to internalize a significantly larger volume of information in the same period of time as those who came before us. Current residents pre-round, go to lecture, round, educated medical students, admit patients, go to clinic, fill out evaluations and dictate discharge summaries all in a limited period of time. Not to mention our humanistic responsibilities of actually spending time to care for patients and possibly sitting at the bedside. Although, clouded idealism would have one believe that 80 hours a week is a reprieve, I can say from originally doubtful experience that burnout and mistakes remain real possibilities. We work as hard as we can, and yet we still sometimes lose out on some of the most meaningful parts of being a doctor.

No further from the truth could the idea that we are somehow less committed or passionate about medicine. Students who enter medicine now step forward into lower wages, increased risk of legal actions, less autonomy, increased paperwork and increased scrutiny. And yet we still step forward. The volume of information expands by the day, recertification exams multiply, residents are matched in locations far from their friends, family and homes. And yet still we submit our applications. We do so not because we expect that things will magically get better. Instead we continue to present ourselves because the aforementioned are a small tariff to pay in order to practice the greatest profession we have. This is not the generation that has decreased in numbers because of modern medicine but instead heeds the calling of replenishing its ranks. Similar to shouting at the rain, we need to move the debate into how to improve care in the current and future systems for our physicians, families, patients, and society. Thus, once again, I’ll put this issue to rest. I think residency now is categorically easier than years past. There, I said it. With that off the table, let’s refocus on the task at hand, training strong doctors and providing quality care for our patients.

[With thanks to Ben Heilbrunn, MD – former Indiana pediatric resident and current fellow in emergency medicine at Children’s Hospital Los Angeles]
During the Plenary Session at the recent APPD Annual Meeting in Miami, the following election results were announced by Immediate Past President, Susan Guralnick:

- At-Large Board Member and Co-Editor of the Share Warehouse (2011-2014):
  Ann Guillot, MD, University of Vermont

- Fellowship Board Member (2011-2014):
  Christopher Kennedy, MD, University of Missouri at Kansas City

- Coordinators’ Executive Committee (2011-2014):
  Core Coordinator – Jean Ashley, C-TAGME, University of Louisville
  Fellowship Coordinator – Staci Leitner, Stanford University

- Nominating Committee Member (2011-2013):
  Dena Hofkosh, MD, Children’s Hospital of Pittsburgh

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

- Grace Caputo, MD, MPH (At-Large Board Member 2008-2011)
- Debra Boyer, MD (Fellowship Board Member 2008-2011)
- Joel Forman, MD (Nominating Committee, 2009-2011)
- Deb Parsons, C-TAGME (Coordinators’ Executive Committee 2008-2011)
- Elizabeth Sanchez-Rocca, C-TAGME (Coordinators’ Executive Committee 2008-2011)

APPD Board of Directors’ meeting attendees: left to right (seated) Patty Hicks, Ann Burke, Jerry Rushton; (2nd row) Deb Parsons, Cindy Ferrell, Lynn Garfunkel, Debra Boyer, Susan Guralnick, Avis Grainger; (3rd row) Laura Degnon, Ann Guillot, Javier Gonzalez del Rey, Adam Pallant, Chris Kennedy, Grace Caputo, Kathy Haynes Johnson (not pictured: Elizabeth Sanchez-Rocca)
Holm, Tunnessen and Berkowitz Awards Presentation

In This Issue
- President's Message
- Editor's Column
- Election Results and Leadership Farewells
- Holm, Tunnessen and Berkowitz Awards Presented
- Special Projects Funded for 2011
- 2011 Annual Spring Meeting in Miami: Reports and Photos
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- IIPE Update
- Report from the ABP
- Update from the AAP SOMSRFT

Leadership

President
Ann Burke, MD (2010-2012)

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

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

Secretary-Treasurer

2011 HOLM, TUNNESSEN AND BERKOWITZ AWARDS PRESENTED AT ANNUAL MEETING
Each year, APPD recognizes individuals who have made significant contributions to pediatric graduate medical education through mentorship, advocacy and leadership.

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

The 2011 Recipient is:

Clifton Yu, MD
Director of Medical Education
Associate Program Director
National Capital Consortium Pediatric Residency Program

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 2011 Recipient is:

Martha Wright, MD, MEd
Residency Director
Rainbow Babies and Children's Hospital
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 2011 Recipient is

Cindy Gibson, C-TAGME
GME Manager - Pediatric Residency Coordinator
Miami Children's Hospital

For further information on these awards and past recipients, please visit http://www.appd.org/about_us/awards.cfm. Deadline for receipt of nominations is February 12 of each year.
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Executive Director
Laura Degnon, CAE
Associate Director

Approved funding for three important projects through the APPD Special Projects grant program was announced at the recent APPD 2011 Annual Meeting in Miami. Those projects and their primary investigator(s) are as follows:

- A New Era of Patient Care and Resident Education: Transforming Night Coverage from a Service to Educational Model, Rebecca Blankenburg, MD, MPH and Madelyn Kahana, MD, Stanford University

- Modeling and Measuring Resident-to-Resident Patient Hand-off Using IPASS in the Simulation Suite, Kimball Prentiss, MD, Boston University School of Medicine/Boston Medical Center

- Unsettling Situations in the Pediatric Intensive Care Unit: A Curriculum for Improving Resident Confidence and Competence When Negotiating Emotionally Challenging Encounters, Melissa Jerdonek Sacco, MS, MD, Johns Hopkins University School of Medicine

Congratulations to these excellent projects and thanks to all who submitted proposals! Click here for a complete list of funded projects.
Meeting presentations and handouts from our extremely successful 2011 Annual Meeting in Miami are posted on the APPD website:

**Final Program**
2011 Spring Meeting Presentations

**Meeting Highlights and Photos**

Day 1: Meeting attendees welcomed the warmth of Miami and the beautiful Biscayne Bay!! Beginning with a packed room for the Forum for Directors of Small Programs and followed by the stimulating Pre-Conference Workshop (Quality Improvement 101: Tools for Change), the invigorating Grassroots Sessions for PDs, APDs and FDs, as well as the exciting Coordinators’ Assembly, the first day of the Miami meeting was off to a rousing start.

Grassroots Forum for Program Directors Report
Grassroots Forum for Fellowship Program Directors Report
Grassroots Forum for Associate Program Directors Report

But...then came the *Salsa Night Celebration* of APPD’s 25th Anniversary! Who knew that there were so many great dancers among us?
Day 2: In spite of the enthusiastic partying the evening before, we had a great turn-out early the next morning for Platform Presentations of the best research and QI abstracts. During the APPD business session which followed, leadership changes and election results were announced, awards were presented and we heard about APPD’s fiscal health. The highlight of this session was, however, the presentation by Dr. Ken Roberts of the 25-year History of APPD. As you look through the slideshow at the link above, you can almost hear the music clips that were used to take us through those important 25 years. Ken suggests that you hum along to yourself as you remember...“Old Time Rock & Roll,” “Stayin’ Alive,” “I Will Survive,” “Takin’ Care of Business,” “Movin’ On Up,” “The Cover of the Rolling Stone,” and the grand finale sing-along -- “Where Everybody Knows Your Name.” (Dr. Roberts is working on a more comprehensive, complete History of APPD which will be posted on the APPD website at a later date.)

After task force meetings and lunch, we heard from the ABP, RRC, the AAMC/NBME project, LEARN, IIPE, and Milestones in the Innovation Presentations and from the AAP, AMSPDC, APA, FOPO, COMSEP, CoPS, MPPDA, and SOMSRFT at the Key Stakeholders in Education session. Later in the afternoon, there were workshops for the coordinators, a mentoring session and a workshop on IRBs.

Day 3: Another early start brought attendees to the regional breakfast meetings. The rest of the day was packed with workshops, coordinators’ sessions, a lively poster session with 68 very interesting poster presentations, and task force meetings.
Day 4: The final day of the meeting brought the morning wrap-up session from the grassroots forums and more workshops! Chief Residents also had a full-day at the well-attended Forum for Chief Residents. This year’s Forum featured separate tracks for rising and graduating chiefs and was led by Drs. Ed Zalneraitis, Nancy Spector, Cliff Yu, members of the APPD Faculty and Professional Development Task Force, graduating chiefs, and others.
Debra Boyer, MD
Program Chair

For the second year, the APPD hosted the Forum for Fellowship Directors at the PAS Meeting (this year in Denver). We had 68 attendees who heard excellent presentations from the ABP, ACGME, NRMP, CoPS, and the AAP. In addition, three excellent workshops were presented by a wide range of institutions covering topics from fellow as teacher, reflective practice and leadership training for fellows and teaching professionalism to fellows.

Final Program

Forum Presentations

We hope to continue to support this forum each year and look for member input on how to meet your needs. Please contact the new APPD Board Member representing Fellowship Directors, Chris Kennedy ckenney@cmh.edu, with any ideas for next year’s Forum.
Can you believe it? The APPD just celebrated its 25th anniversary in Miami, Florida and approximately 130 coordinators were there to help celebrate and make it a lasting memory. Speaking of a lasting memory, we want to give sincere thanks and appreciation to Debra "Deb" Parsons and Elizabeth “Liz” Sanchez-Rocca for their three years of service as members of the Executive Committee, and for diligently working to provide an outstanding program of high quality and excellent topics. Their many efforts have helped pave the way for future meetings. In addition, special thanks to all of the presenters who willingly made valuable contributions to this year’s meeting. The Coordinators’ Session and workshops continue to gain momentum based on the commitment through all of us staying involved and connected. As coordinators, we collaborate with others to make sure that our programs, events, and meetings are arranged in a positive light and that is exactly what we experienced during the recent APPD meeting. Coordinators presented information, discussed various topics, and participated in workshops on recruitment, professional development, social media, and more. Avis Grainger, from the Levine Children's Hospital at Carolinas Medical Center, again gave a very exciting presentation titled, "Mentoring is a Two-Way Street" and welcomed new coordinators. All new coordinators have been assigned a mentor and hopefully have had time to get acquainted. If you are interested in being a mentor or mentee, please contact Jean Ashley at jean.ashley@nortonhealthcare.org or Pat Jacobi at jacobi@kids.wustl.edu.

Task Force Updates
Our task forces continue to receive positive feedback and we thank the respective chairs of the Management/Supervision, Professional Development, and Tools Task Forces. Co-Chairs Celeste Farley (University at Buffalo) and Teresa Woods (St. Louis University) from the Coordinators' Management/Supervision Task Force presented a workshop based on “The FISH! Philosophy: Catch the energy. Release the potential.” Coordinators interacted in lively discussions on what they do or what they can do in their own offices incorporating four philosophies: “Play, Make Their Day, Be There, and Choose Your Attitude.” Throughout the next year, the task force members will be exploring different techniques at their respective institutions and will report out at the spring meeting in San Antonio.

If you would like to get involved in this task force or would like copies of the presentation and follow-up materials, please contact cfarley@upa.chob.edu or twoods11@slu.edu.

The Coordinators' Professional Development Task Force had a very productive session where several ideas regarding future meeting planning emerged. The Task Force is planning to work with
the Coordinators’ Executive Committee to further explore the feasibility and development of the following: (1) Separate Tracks for New and Seasoned Coordinators as well as Residency and Fellowship Coordinators; (2) Workshops and/or presentations on preparing for a site visit since many coordinators receive funding for only one meeting and most choose the spring; (3) Development of a day-long "New Coordinators' Boot Camp" to be held at the spring meeting as well as an orientation packet for new coordinators that can be sent via email; (4) Pairing of seasoned presenters/ workshop facilitators with less experienced ones for mentoring purposes as well as providing the opportunity for coordinators who are not TAGME certified to meet the professional development component of the eligibility criteria.

The **Tools Task Force** had a very engaging session and the discussion was introduced with a review of the Purpose and Goals and Objectives of the Task Force. The participants met their first goal as far as serving as a resource for coordinators to help improve and simplify routine job duties and responsibilities in Graduate Medical Education. A Pre-Meeting Survey was sent and reviewed as a springboard to the discussions. The coordinators shared information on the current technology used in residency and fellowship programs, and discussed its various uses. A considerable amount of time was used to review the software used for Program Management, such as New Innovations (49%), E-Value (31%), Med Hub (18%), and My Evaluations (2%). The following individuals agreed to serve as “Super Users” and will provide a presentation at the 2012 APPD Spring Meeting. They are: Dennisse Reyes (New Innovations), Catherine Ratti and Joanne Joslyn (E-Value), Esther Thoman (Med Hub), and Migdalia Goscot (My Evaluations). A special thanks to these individuals for agreeing to bring more education and training to us in San Antonio.

A brief presentation was given about social media tools, and while the group felt further discussion regarding this topic is much needed, time limitations did not allow. Finally, the Coordinators Handbook received a very good review. Our survey showed that, of the people who reviewed the handbook, 90% felt it is a good useful document. Portions of the handbook were distributed to those who were interested in serving as a writer, reviewer, or reader. Our goal is to make sure the handbook is updated annually. Feedback and updates to the Coordinators’ Handbook should be submitted to MaryAnne Wesner at mwesner@geisinger.edu

In summary, we are looking for members to become involved in our task force committees. If you are interested, please contact the committee chairs to learn more.

**TAGME (Certification) Update**

Congratulations to our newest TAGME diplomats, Rebecca Hasegawa from the Medical University of South Carolina and Lois Hauck from the University of Michigan, who successfully completed all of the assessments for certification this spring. We also would like to welcome Jaime Bruse, C-TAGME from the University of Utah, to the Pediatrics Review Board for TAGME. If you are interested in becoming certified as a Training Administrator of Graduate Medical Education, please visit the TAGME website at [www.tagme.org](http://www.tagme.org) for information about eligibility, application materials, and deadlines for the upcoming fall 2011 and spring 2012 assessment cycles. The application period for fall 2011 open assessment closes on May 31. The application window for spring 2012 opens on September 1 and closes on November 30.

**Congratulations**

Cindy Gibson of Miami Children’s Hospital, the 2011 Recipient of the Carol Berkowitz Award for Lifetime of Advocacy and Leadership in Pediatric Medical Education, received a standing ovation for her special recognition. Cindy’s program director wrote, “If there were duty hour regulations for coordinators, Cindy would be a chronic violator. She routinely comes in early, stays late, and even works weekends to ensure that everything in our GME office gets done right.”

As we approach the end of the academic year, it is exciting to envision our upcoming house staff graduation, the end of the year activities, and the on-boarding of our new trainees. And, yes, let's not forget the changes in duty hours. All of this will probably keep us busy over the next 4-5 months and before we know it, another year of recruitment will be here. So, let’s mark our calendars for the APPD Fall Meeting at the Renaissance Arlington Capital View Hotel in Arlington, VA from September 7-9. This will be a great meeting for new coordinators or for those who will be preparing for a site visit. Finally, please mark your calendar for the APPD 2012 Annual Spring Meeting in San Antonio, Texas from March 28-31. We promise to make the spring meeting one great educational and exciting venue and we will be soliciting your feedback and suggestions as we make preparation for the meeting. Trust us, we are here as your advocates and colleagues.
WE'VE COME A LONG WAY, BABY!!

Jeri Whitten, C-TAGME
West Virginia University/Charleston

It all really started in the fall of 1993. The National Center for the Evaluation of Residency Programs held its first conference specifically for Pediatric Residency Coordinators, October 7-9, in Cleveland, Ohio. It was the first time pediatric coordinators had the opportunity to come together, share ideas, learn from “experts” and from each other. Attendance continued to increase each year and coordinators from across the country found a new and valuable approach to better manage their programs, “networking”. Although not the best of environments to learn, we continued to attend these privately-run conferences through 1996. Dr. Carol Berkowitz, then President of the APPD, was invited to speak at the 1996 conference in San Diego. At her urging, the coordinators in attendance formed a steering committee to work toward section status for coordinators within the APPD. It was becoming increasingly important for coordinators to have an opportunity to increase their knowledge and skills, and the APPD was the optimal choice for achieving that goal.

The Steering Committee consisted of Chairperson Jeri Whitten (WVU Charleston), Rosemary Munson (Maine Medical Center), Melodie Allison (Baylor College of Medicine), Cathy Root (St. Christopher’s Hospital in Philadelphia), Iris Mau (Harbor/UCLA), June Dailey (Indiana University/Riley Children’s), Shirley Hazelwood (Greenville Hospital System, SC), Linda McNelis (Children’s Hospital of Philadelphia), Pam Occhipinti (Cleveland Clinic), Mary Brady (Emory University), Kathy Rowe (University of Alabama-Birmingham), Lisa Swanson-Skoug (University of Minnesota), Cindy Liberi (Allegheny General Hospital-Pittsburgh), Peggy McFarlane-Rickman (University of Rochester), and Valerie Collins (University of South Florida Combined Programs). The Committee felt it was important to have diverse membership, including small, medium and large programs, new and veteran coordinators, and wide geographic distribution of members.

In the fall of 1996, we met as a group during the APPD Fall Meeting in Tyson’s Corner to begin design of the structure for coordinators becoming a section of the APPD. Times would change. but the early part of our journey with the APPD was challenging because we were breaking new ground. We were the voice for recognition of the value of coordinators, and for our role and place in the APPD. We developed the procedure for having two members elected by the membership of APPD each year to a Coordinators Executive Committee. The first six were put forth by the Steering Committee (with one, two and three year terms), with elections to follow in 1997. That model is still followed, with two new coordinators elected each year.

Jeri Whitten gave a presentation to the Program Directors at the 1997 spring meeting in Washington on the merits of having coordinators as section members, and the value of coordinators learning the same information alongside the program directors. The vote by the Program Directors was overwhelmingly in support. This marked the first meeting where coordinators were invited as conference attendees.

In 2005, in order to recognize the value of coordinators, the Carol D. Berkowitz Award for Lifetime of Advocacy and Leadership in Pediatric Medical Education was established and given for the first time. This award remains a coveted yearly recognition. The mentor program was established to pair a new coordinator with a more experienced counterpart to share ideas and experiences and increase the knowledge, skills and professional development of new coordinators. Coordinators have their own sessions for learning, but
The rest, as they say, is history. The Coordinators’ Section continues to grow and contribute to the success of the Association of Pediatric Program Directors. Friendships grow and networking with colleagues across the country is a daily occurrence for most coordinators. Fellowship coordinators have begun to attend and look to the APPD for their professional leadership and development home. From a small group of 20 who met together in 1993 to now more than 150 attendees every year at the APPD meetings, we truly have "come a long way, baby".

**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

still maintain opportunities to interact with the program directors and hear directly from the ABP, ACGME and others who are an integral part of our daily program management duties.

**COORDINATORS’ STEERING COMMITTEE 1996**

**Seated (left to right):** Pam Occhipinti - Cleveland Clinic; Mary Brady - Emory University; June Dailey - Indiana U/Riley Children’s Hospital; Shirley Greenwood - Greenville Hospital System, SC; Kathy Rowe - University of Alabama-Birmingham

**Standing (left to right):** Rosemary Munson - Maine Medical Center; Peggy McFarlane - University of Rochester; Lisa Skoug - University of Minnesota; Melodie Allison - Texas Children’s Hospital/Baylor; Cathy Root - St. Christopher’s in Philadelphia; Jeri Whitten - WVU Charleston; Cindy Liberi - Allegheny Hospital in Pittsburgh; Iris Mai - Harbor/UCLA Medical Center; Linda McNelis - Children’s Hospital of Philadelphia; Valarie Collins - U of South Florida/All Children’s Hospital
Association of Pediatric Program Directors
"Innovation, Collaboration, Communication, Scholarship"

2011 Fall Meeting in Arlington

Mark your calendars now to attend the

2011 APPD Fall Meeting in Arlington, VA
September 7-9
Renaissance Arlington Capital View Hotel

This revamped conference will provide:

- a comprehensive update with separate educational tracks for residency program directors, associate program directors, fellowship directors, residency program coordinators, and fellowship coordinators
- extensive training and orientation for new program directors and coordinators
- assistance in meeting the American Board of Pediatrics (ABP) and Accreditation Council for Graduate Medical Education (ACGME) requirements pertaining to Pediatric Subspecialty education
- Hands-On Sessions with representatives from the AAP, ABP, NRMP, and ERAS
- professional development and recruitment strategies for both new and seasoned professionals
- mentoring and networking opportunities, including a new Networking Reception for all attendees on Thursday evening

Keynote Address and Dinner - Wednesday evening, September 7
Keynote Speaker: Joe Gilhooly, MD, Oregon Health Sciences University

Sessions for Residency Program Directors, Fellowship Directors, Associate Directors, Residency Program Coordinators, and Fellowship Coordinators
Thursday (all day) and Friday morning, September 8-9

Registration Materials available - Summer 2011

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Pediatric Educational Excellence Across the Continuum (PEEAC)
September 9-10, 2011
Renaissance Arlington Capital View Hotel, Arlington, VA

2nd Biennial Meeting
www.peeac.org/index.cfm

Sponsored by:

Academic Pediatric Association (APA)
Association of Pediatric Program Directors (APPD)
Council on Medical Student Education in Pediatrics (COMSEP)
Council of Pediatric Subspecialties (CoPS)

This second biennial PEEAC Conference, scheduled immediately after the APPD Fall Meeting at the same hotel, will be a perfect venue for rising educators to gain content expertise, specific teaching skills and valuable networking with like-minded clinicians. Faculty recognized for their teaching expertise from the Academic Pediatric Association (APA), Association of Pediatric Program Directors (APPD), Council on Medical Student Education in Pediatrics (COMSEP) and Council of Pediatric Subspecialties (CoPS) will facilitate workshops, and small group sessions.

Targeted audience: Any interested pediatric educator, including but not limited to hospitalists, subspecialty fellowship educators, as well as continuity and ambulatory clinic and clinical preceptors.

Check the website or emails from APPD to learn more: www.peeac.org/index.cfm
2012 Annual Spring Meeting in San Antonio

In This Issue
- President's Message
- Editor's Column
- Election Results and Leadership Farewells
- Holm, Tunnessen and Berkowitz Awards Presented
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- 2011 Annual Spring Meeting in Miami: Reports and Photos
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- 2011 Fall Meeting in Arlington, VA
- PEEAC Conference
- 2012 Annual Spring Meeting in San Antonio
- Regional Happenings
- Task Force Reports
- News from LEARN
- IIPE Update
- Report from the ABP
- Update from the AAP SOMSRTF

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Adam Pallant, MD, PhD (2010-2013)
Executive Director
Laura Degnon, CAE
Associate Director

Association of Pediatric Program Directors
2012 Annual Spring Meeting

March 28-31, 2012
San Antonio Marriott Rivercenter
San Antonio, TX

Call for Abstracts will go out in late summer with an early fall deadline.
Regional Happenings

In This Issue
- President’s Message
- Editor’s Column
- Election Results and Leadership Farewells
- Holm, Tunnessen and Berkowitz Awards Presented
- Special Projects Funded for 2011
- 2011 Annual Spring Meeting in Miami: Reports and Photos
- Report from APPD Forum for Fellowships in Denver
- Coordinators’ Section
- Coordinators’ Journey 1993-2011
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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
Southwest: TX, AZ
Western: CA, NV, OR, WA, HI, CO, NM, UT
Hilary M. Haftel, MD, MHPE., Regional Chair

The Mid-America Region had a great breakfast meeting at the 2011 Annual Meeting in Miami. Over 60 people from across the region attended the breakfast. Following introductions, we had a lively discussion about a variety of issues relevant to our programs, including resident autonomy, solutions for night coverage, and the ever-present duty hour regulations (including the much-maligned “suggested nap”).

We would like to give our deepest appreciation and thanks to our outgoing Regional Coordinator Chair, Jean Ashley, MSBC, C-TAGME, the Manager of Pediatric Medical Education at Kosair Children’s Hospital, Department of Pediatrics, Louisville, Kentucky, who has served in such an excellent fashion for the last several years. We now introduce Serena Silvaggio, C-TAGME, Pediatric Education Coordinator at West Virginia University, who is our incoming Coordinator Chair. Welcome Serena!

After a discussion about dates and times for our Fall Regional Meeting and a followup survey, the date for the meeting will be on Friday, October 21st and will again be hosted by Nationwide Children’s Hospital (thank you!). The opinion about starting time was almost evenly divided between starting at 9am or 10am, so we will start this Fall’s meeting at **9:30AM** and see how it goes. A call for agenda items and presentations will go out later this Spring.

We are also looking for people to volunteer to sit on the Resident Research Proposal Committee, as this initiative will start this coming year, funded by our Regional Dues. Anyone interested can contact Hilary Haftel, MD, MHPE at hils@med.umich.edu

Thanks to everyone and have a great Summer and hope to see you at our Fall Meeting!
Greetings from the Midwest:

We had 2 great meetings in Miami -- the first was an informal gathering of Midwest programs on Thursday, March 31st.

At that meeting, we reviewed how Midwest programs are dealing with the new ACGME work hours. We had a total of 15 programs share responses to a variety of questions. Some interesting information came out of our discussion. A few highlights:

1. All of the programs will have night shifts
2. Intern caps: the range was 8-10, with some having no caps
3. Most programs are using physician extenders (ARNPs typically) in the NICU
4. 6/14 programs are on month blocks, the other 8 on 4 week blocks
5. There are a lot of different ideas on education at night, many looking at online modules.

In our business meeting at breakfast on Saturday, we decided to have our Fall Midwest meeting at University of Chicago, September 30-October 1. Possible initial topics suggested include:

- Update on programs concerns/issues with duty hours
- Discuss RRC suggestions/recommendation
- Milestones group to work with Midwest

A survey will go out in early summer to determine the agenda.
Since the last Newsletter, the New England Pediatric Program Directors (NPPD) had our Regional Breakfast at the Annual Spring APPD meeting on April 2, 2011 in Miami, Florida, facilitated by the NPPD Co-Chairs Vanessa Goodwin and Ed Zalneraitis. The NPPD also had its Annual Spring Meeting at the University of Connecticut Pediatric Program in Hartford, Connecticut on April 14, 2011. The meeting was hosted by Program Director Dr. Ed Zalneraitis, Chair of Pediatrics, Dr. Paul Dworkin and Coordinator Aida Velez of the University of Connecticut Pediatric Program.

The Regional Breakfast at APPD included a discussion of a possible regional project in implementing a Night Team curriculum. It was agreed to further develop that concept at our regular spring meeting later in the month. Those present discussed the new regional dues and how they should be allocated. The consensus reached was to have an NPPD Committee on Regional Dues develop criteria and methodology for use and distribution of these funds. They will present this at a future meeting. The breakfast concluded with plans for the Fall 2011 and Spring 2012 NPPD meetings.

The Spring Meeting in Hartford opened with an interactive presentation by Dr. Paul Dworkin, Chair of Pediatrics at the University of Connecticut entitled: Supporting Child Advocacy and Community Child Health Education: Beyond the Dyson Years. The session focused on developing sustainable models for training residents for their roles as advocates in Community Pediatrics.

The Program Directors, Associate Program Directors, Coordinators, and Clerkship Directors then had a separate discussion of the regional project on a Night Team curriculum. It was agreed that we would share the University of Connecticut Night Team curriculum and document the regional implementation, as would be appropriate to each program. The system for use of regional dues was affirmed and Committee members were selected. Dr. Melissa Held led a discussion of a Hand-Off curriculum and other elements of the revised CPR VI were discussed. Of particular interest was the new requirement that PL-1 residents not take parent phone calls from home. The soon to be announced change in the ACGME accreditation paradigm, the NRMP Supplemental Offers and Acceptance Program (SOAP) replacing the scramble for next year's match and the 2013 Pediatric requirements revision were also discussed. The Coordinators shared some of the discussion above and then met separately to discuss approaches to orientation, the use of the regional dues and other key Coordinator issues. The current and rising Chief Residents held a “nuts and bolts” session for the rising Chief Residents, and developed issues for discussion with the other groups in the afternoon.

The Fall Meeting is planned for Wednesday, October 19, 2011, to be hosted by the Boston Children’s Hospital and the Boston Combined Residency Program at the Joseph Martin Conference Center at Harvard Medical School.
Auxford Burks, MD and Elizabeth Sanchez-Rocca, Co-Chairs

ACGME and the new Work hours: what can a Program Director do?

The NY/NJ Region held its Spring Meeting on March 18, 2011 at the Corporate Learning Center of Jacobi Medical Center, Bronx, New York. About 75 Program and Associate Program Directors, Chief Residents, and Program Coordinators attended the meeting, representing 20 programs. We again started the meeting early in the morning to facilitate easy travel and parking. The overwhelming consensus was that this adjustment was very successful – everyone arrived on time and parking was easy. The facility was provided, once again, at no cost and the location central to all participants. The consensus was to continue meeting at this site in the future.

The meeting started with an open forum about the new work hour requirements. Lively discussion ensued about both the interpretation and various strategies for accommodation. Most of these issues were subsequently discussed at the national meeting (such as night shifts, night floats, and night calls…). While no one had the perfect solution, everyone shared their attempts to satisfy all the requirements of the ACGME while trying to promote a learning environment and trying to take care of our patients. One consistent concern was maintaining the continuity in continuity clinic. Everyone left the discussion with ideas about how to implement the new duty hour rules in their programs. We will discuss how these went at our next meeting.

The next part of our meeting was devoted to professional development. Christina Skurkis, MD, Associate Program Director at the University of Connecticut School of Medicine, previewed her APPD workshop “Diagnosing the Problem Resident.” Program Directors and Coordinators shared their experiences with this difficult subject.

Finally, we wrapped up with some business issues. Henry Schaeffer gave a quick update on the AAP perspective on key parts of the Health Care Reform Act. The regional dues system seems to work well for all members.

Election results for the region were announced: Auxford Burks, MD and Elizabeth Sanchez-Rocca were elected the Co-Chairs for 2011-2014, replacing out-going chairs Joel Forman, MD and Beth Woolf. Our region sends grateful thanks to Joel and Beth for their excellent service to the region.

The fall meeting has been scheduled for October 28th, 2011.
The APPD Western Region held its annual regional meeting in Salt Lake City on February 25th, hosted by the University of Utah. Eight programs from the region took part in the one day meeting. The morning session was dedicated to a discussion of the 3 IIPE projects in which the region is taking part. The University of Utah presented their faculty development program being run by Jim Bale (PD) and Wendy Hobsson-Rohrer (APD). The University of Colorado presented their 4 month third year career centered immersion experience for primary care, hospitalist or subspecialty bound residents. Finally, University of California at San Francisco reviewed the handoff project in which both UCSF and Utah are taking part. The other portion of the morning session also included a lively discussion of approaches to the new duty hour regulations. The afternoon session was a very informative review of qualitative research techniques.

The following topics were discussed at our regional breakfast in Miami.

1. Dan West discussed the Western Structured Clinical Observation Tool which he has been developing with other programs in the region and collecting preliminary data. The creation of the final form will involve collection of data from direct observations in a variety of clinical settings (most people are currently using it in ambulatory sites). Each resident needs at least 2 observations using the tool over 6 months. After the initial round of data collection, the form will be further refined.

2. Becky Blankenburg from Stanford gave an update on the Night Curriculum on which she and her group have been working. Thirty powerpoint modules have been created for the night curriculum. Seventy percent are on medical topics and 30% are on handoffs, communication etc. Ten of the modules have been chosen to field test. She is looking for sites interested in field-testing these.

3. Richard Shugerman announced a new program in Seattle---they are starting a rural track in which a significant portion of training will occur in Alaska and/or in a rural Native American population site. The 1st class will begin in 2012—they are planning 4 residents/ year to start. Residents would have subsidized housing.

4. The site of next years’ regional meeting will be Phoenix. We discussed what time of year it should occur—fall vs. spring. Many people preferred fall. A survey will be sent out to members regarding potential dates. Part of our national dues goes to a regional fund. The fund currently has $5400 and discussions will be held over the summer how the funds can be utilized to enhance our regional meeting.
### Task Force Reports

**In This Issue**
- President's Message
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- Election Results and Leadership Farewells
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- 2011 Annual Spring Meeting in Miami: Reports and Photos
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### Curriculum Task Force

**Evaluation Task Force**

**Faculty & Professional Development Task Force**

**Research & Scholarship Task Force**

The APPD has five main task forces (Curriculum, Evaluation, Faculty and Professional Development, Learning Technology, and Research and Scholarship). 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](mailto:info@appd.org)).

(For information on the coordinators’ task forces, please refer to the Coordinators’ Section column of this newsletter or visit the website at [http://www.appd.org/home/coord.cfm](http://www.appd.org/home/coord.cfm))

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Laura Degnon, CAE
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- 2011 Annual Spring Meeting in Miami: Reports and Photos
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Associate Director

Karin Hillenbrand, MD, Brody School of Medicine at East Carolina University
Rebecca Blankenburg, MD, Lucile Packard Children’s Hospital, Stanford

The Curriculum Task Force has had a busy year, culminating in several very active group sessions at the APPD Annual Meeting in Miami. During the meeting, we heard updates from invited guests and APPD members on the status of a variety of projects. Charlette Nunnery from the AAP updated us on E-learning courses available for residents via Pedialink. Carrie Radabaugh, also from the AAP, shared information on a Bioethics curriculum currently under development, for which several task force members have done reviews during the year. Sabrina Wagner and Lynn Garfunkel introduced us to exciting new opportunities for collaborations in Global Health with colleagues from the AAP Section on International Child Health, directors of pediatric global health tracks, and the APPD. Alice Kuo updated us about a Public Health Curriculum which has undergone pilot implementation in a number of programs this year. Other curriculum projects about which we heard updates included Mental Health (Susan Bostwick), Resident as Teacher (Barrett Fromme), and Medical Home (Aditee Narayan). New curriculum initiatives which involve our membership include a Pediatric Surgery curriculum, presented by Kim Boland, Marney Gundlach, and Adam Rosenberg; Handovers: the IPASS curriculum, described by Chris Landrigan and Amy Starmer; and a curriculum on Grief and Loss, introduced by Janet Serwint.

Members of the Task Force also had an opportunity to participate in break-out groups working on a variety of curricular projects in various stages of development, including Nighttime Curriculum, Global Health, Medical Home, and Resident as Teacher.

Once again this year, we continued our tradition of a Task Force sponsored workshop consisting of platform presentations focused in one curricular area. This year we focused on “Tools for Teaching Quality and Safety.” Presentations can be found on the APPD website with other meeting documents, and included QI Olympics: “Quality” time outside the hospital (Glenn Rosenbluth, presenter); It can be done! Engaging pediatric residents in quality at the “101” level (Paul Shore, presenter); Fusion of child advocacy and quality improvement: a combined curriculum (Jerry Larrabee, presenter); A resident-led morbidity and mortality conference in the PICU (James Moses, presenter); and Mastering handover: a curriculum for effective transfer of patient information (Christine Skurkis, presenter).

Over the next year, we anticipate further work on our ongoing curricular projects, facilitated through phone conferences as well as participation by individual members in relevant working groups. We’d also like to focus on creating a centralized ‘clearinghouse’ for completed curricula, where members can go to find out what’s available to meet their needs. Stay tuned!

Many of our curriculum efforts would benefit from YOUR INPUT!! Please consider completing APPD-Approved surveys about the Medical Home, Mental Health, and Surgery curricula if you haven’t already.
At the first session during the Spring Meeting the Evaluation Task Force continued its mini-series “Evaluating The Competencies,” this time focusing on evaluation of Interpersonal and Communication Skills. A discussion of some of the challenges and creative ways that individuals have met those challenges followed. Ann Guillot shared the University of Vermont’s experience with using simulated patients as a formative feedback tool.

Last summer and fall as part of a Task Force conference call, we discussed surveying the membership of APPD to learn more about the process of evaluation being used by the membership – specifically around patient/parent evaluations. The draft survey was given to the task force membership for completion at the close of the first session and results were summarized and presented at the second session, offering a snapshot description of the process of gathering information from patents/patients about residents. Suggestions for improving the survey were also gathered. We hope to survey the entire membership in the near future to learn more about how patient/parent evaluations are used in various programs; the length, content, method of delivery/completion and the resources used to gather the information; and how the information obtained is actually used by programs in the overall evaluation of their residents.

We concluded the second session with a discussion of some of the challenges of evaluation and ideas for the Task Force.

In the near future the task force will meet by phone to work on the survey regarding patient/parent evaluation and to consider other projects of interest to the membership. If you are interested in participating, but did not leave your name and contact information at the meeting, please contact Suzette Caudle at suzette.caudle@carolinashealthcare.org.
We are excited to update the APPD membership about the recent activities of the Task Force on Faculty and Professional Development, as well as discuss our plans for the upcoming year. As a reminder, the Faculty and Professional Development Task Force now officially encompasses three separate yet overlapping areas: mentorship, professional development, and traditional faculty development (also referred to as educator development).

Recent activities: The Faculty and Professional Development Task Force participated in the planning and execution of the Forum for Chief Residents at the Annual Spring Meeting in Miami along with past organizer, Dr. Ed Zalneraitis. The forum attracted a record number of participants, with well over a hundred chief residents attending the morning and afternoon sessions. The workshops were led by multiple task force members who volunteered to teach areas pertinent to both rising and graduating chief residents, such as facilitating educational conferences, diagnosing problem residents, and handling conflict resolution. In the afternoon, the group was divided into two tracks. The rising chief resident track included sessions on learning how to plan the chief resident year, as well as how to actively plan for their professional development. In simultaneous workshops, the graduating chief track included sessions which introduced them to the concept and utilization of educator portfolios for academic documentation, promotion, and planning, plus an interactive session on professional development planning after the chief resident year. Post-course surveys were very positive, and we look forward to further evolution and improvement of this forum as an important vehicle for faculty and professional development of our youngest APPD members.

Mentorship Program:
During the Spring meeting in Miami, the APPD Mentorship Program hosted a one hour session which focused on mentoring skills and highlighted exemplars of mentoring relationships within the program. The session was well attended with over 120 participants present. Following this session, previously formed facilitated peer mentoring groups and mentoring dyads met. The APPD Mentoring Program planning group, co-chaired by Keith Mann and Nancy Spector, is in the process of surveying members of both tracks of the Mentoring Program, facilitated peer mentoring and traditional dyadic mentoring, in order to inventory program successes and identify barriers to success. During the upcoming year, the Mentoring Program planning group will develop a process to match interested members who are not currently in the program with new mentors.

Faculty and Professional Development:
In February, we distributed a needs assessment survey to PDs/APDs in order to gather information about the faculty and professional development needs of APPD members. We separated topics into 5 categories: leadership skills, personnel management, personal professional development, financial management, and educator development. The top choices within each category are currently being discussed as potential elements of a faculty and professional development core curriculum. We also queried the membership as to the preferred forum for such a curriculum, and the majority (55%) chose the Annual Spring Meeting workshops (as opposed to pre-spring meeting workshops, fall meeting workshops, or pre or post fall meeting workshops). In our previous task force meetings, we also recognized the benefit of administering a significant portion of this curriculum--especially in the areas of educator development--as “train the trainer” modules so that upon completion, participants could more efficiently disseminate these skills back to the
At the second of our task force meetings in Miami, we agreed to proceed with planned workshop submissions for the 2012 Annual Spring meeting in each of the 5 categories mentioned above. We will continue to discuss the desirability and logistics of a longitudinal curriculum in faculty development, with potential certification resulting from completion of core components over time.

Lastly, recognizing that numerous programs outside of APPD already exist which potentially provide more extensive coverage of many of our identified areas of faculty and professional development, we are also continuing to pursue (with the help of the Learning Technology Task Force) the creation of an electronic warehouse of faculty and professional development programs for those wishing to pursue more focused and in-depth knowledge and skills in these areas. Our vision is to create an “Angie’s List” of faculty development programs that include reviews and descriptions by APPD members who have already participated in or completed these programs. We believe that this will benefit those seeking more extensive faculty and professional development opportunities.

The Faculty and Professional Development Task Force has also had a voice in the planning and execution of this year’s Pediatric Educational Excellence Across the Continuum (PEEAC) conference to be held in Arlington, VA immediately after the APPD Fall Meeting this September. This is the second time this forum has been held since 2009 for the benefit of pediatric educators from the undergraduate level to the fellowship level in both community and academic settings. Additional opportunities for engagement of faculty and professional development task force members in the planning and implementation of future iterations of PEEAC are also an active topic of discussion within our group.

We look forward to the upcoming academic year and to creating what we hope are valuable faculty and professional development resources for the APPD membership. For those of you who have not already joined our group, but are interested in the areas of mentorship, professional development, and/or faculty development, we welcome your participation and would be happy to be contacted directly for more information.
The Research and Scholarship Taskforce had two productive meetings during the annual APPD meeting in Miami last month. Members of the committee introduced themselves and we set to work. One of the major activities of the Research and Scholarship Taskforce throughout the year is to review surveys submitted to the APPD for dissemination to the membership. Surveys approved by the task force are sent out by the APPD with endorsement of our organization to appropriate members. In the first task force meeting in Miami, the history of previous survey review work done by the committee was discussed and modifications to the process were recommended. A new set of guidelines was submitted to the APPD board for review and approval. As a reminder, the task force only reviews surveys designed for program directors and not for residents or other trainees. One of the proposed changes to the survey policy is that the task force will ask for brief annual follow-up of the survey data to see where these data are being presented and published. In addition, a rolling submission timeline with three deadlines per year of April 1, July 1, & October 1 was proposed by the task force. The complete policy of survey submission and review is posted on the APPD website which will soon reflect any board-approved changes.

Members of the Research Task Force proposed that the task force name be changed to mirror the name of the COMSEP task force to be called the Research and Scholarship Task Force. This name change was approved by the APPD Board earlier this month.

Members of the committee selected two projects to work on, including a mentoring group within the Research/Scholarship Task Force to have more senior members help mentor newer members with less research experience. This group was led by Sarah Marks and Jerry Rushton. The second group began work to try and define a three to five year research curriculum of workshops including but not limited to: data management, research questions, measuring education outcomes, qualitative methods and survey research. The overall goal is to have defined workshops sponsored by this task force at the APPD meeting, and potentially at the pre-meeting workshop, PAS meeting and/or PEEAC meeting. This group was led by Dan West, Su-Ting Li & Tyler Reimschisel.

The Research and Scholarship Taskforce will be having a follow-up telephone conference call over the next month. All are welcome to participate. Please email Linda Waggoner-Fountain (law4q@virginia.edu) or Heather McPhillips (heather.mcphillips@seattlechildrens.org) if you were unable to attend the task force meetings but would like to participate in the task force throughout the year.
As was announced at the Annual Meeting, LEARN (Longitudinal Education Assessment Research Network) is in the infrastructure-building phase and in the midst of initiating the first project. This project, in collaboration with the National Board of Medical Examiners, will look at the Competencies and proposed Milestones and how they relate to our expectations of interns starting on inpatient services. Thank you to all who participated in the survey that was distributed both at the Annual Meeting and electronically, asking your opinion on the importance of a wide variety of candidate features! These data are now being analyzed and will be used to help inform the design of the study. There will definitely be more to come regarding this in the upcoming months.

We are “learning” a lot about how to run a research network through the initial stages of building LEARN and the organizational structures and infrastructure that will be necessary to be successful. Thank you for your patience as we try to create a system that will work in the present as well as position us for success in the future. We are clearly evolving over time and what we learn in the process will benefit us all. Thanks also to all who have thus far signed up as a LEARN-participating program! Currently, there are 54 programs that have provided information. If you are interested in participating, or for more information, please contact us at LEARN@appd.org. A program may participate to whatever level they feel comfortable, but getting started will be that much easier if we have your contact information. We look forward to sharing more about LEARN with you soon!
In This Issue

- President’s Message
- Editor’s Column
- Election Results and Leadership Farewells
- Holm, Tunnessen and Berkowitz Awards Presented
- Special Projects Funded for 2011
- 2011 Annual Spring Meeting in Miami: Reports and Photos
- Report from APPD Forum for Fellowships in Denver
- Coordinators’ Section
- Coordinators’ Journey 1993-2011
- 2011 Fall Meeting in Arlington, VA
- PEEAC Conference
- 2012 Annual Spring Meeting in San Antonio
- Regional Happenings
- Task Force Reports
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IIPE Update

Carol Carraccio, MD
Director, IIPE

A major focus in recent months has been on innovation within IIPE. We now have electronic templates for submission of Letters of Intent (LOIs), full applications and progress reports. In conjunction with the Boston consortium, we are working on a collaborative website for programs with IIPE projects. This site will serve to facilitate work within multi-institutional collaborative projects as well as sharing across sites with different projects.

Recognizing that one deadline for all LOI submissions could be limiting, we have expanded to three deadlines. The first was April 29th. This is the only deadline that is available for projects requiring an ACGME waiver since we have to align with the Review Committee’s schedule of meetings. The next deadline is August 1st and there will also be a deadline for November 18th. Our hope is that increasing opportunities for submission will increase the ability of programs to participate.

One of the most exciting IIPE endeavors has been the partnership with APPD LEARN. This partnership has spawned an additional collaboration with the American Board of Pediatrics (ABP), the National Board of Medical Examiners (NBME) and the Association of American Medical Colleges (AAMC) around a pilot project to study the pediatric milestones. This will be a feasibility study that not only addresses assessment of milestones but also the functionality of APPD LEARN. NBME and AAMC are working on an extensive e-folio project whose purpose is to develop data specifications that would allow data to seamlessly transfer among institutions and organizations across the education, training, and practice continuum. Their willingness to collaborate will allow us to build a robust infrastructure for APPD LEARN. All programs involved in the feasibility study will enter their data into a front end that automatically transfers data into LEARN for study purposes. The pediatric milestones will provide the perfect content for this feasibility study since they, like the e-folio, span the entire education, training, practice continuum.

No institution or organization has the resources (personnel or financial) to impact medical education in a way that is truly transformative. However, by creating meaningful partnerships such as the one we have developed among IIPE, APPD LEARN, ABP, NBME and AAMC, we realize that true transformation may be within our collective reach.
Computer-Based Testing for Initial Subspecialty Certification

Beginning in November 2011, the ABP (American Board of Pediatrics) is transitioning all written subspecialty initial certifying examinations to a computer-based format. Each examination will remain 4.5 hours in length and be administered in a single-day format every 2 years at Prometric Testing Centers across the United States, Canada, and other international sites.

The new computer-based examination format will consist of two sections with an optional scheduled break (up to 30 minutes) between the sections. Each of the two examination sections will be of equal length, time, and difficulty, and will contain a similar balance of content. Candidates have the option of taking a break (up to 30 minutes) BETWEEN Section 1 and Section 2 of the examination. NOTE: Once Section 1 is completed, this portion of the examination will be closed and cannot be accessed following the break. If a candidate opts to take a break during the timed administration of either section of the examination, this break is considered unscheduled. During an unscheduled break, the clock continues to run and no extra time will be given. During this time, candidates are not permitted to access any electronic devices, including phones, or any examination preparation material.

Examination results will continue to be reported within the same time period. Scoring and quality control procedures will remain the same. It is essential that all candidates be familiar with examination administration policies. Important information regarding what candidates can expect on exam day can be found on the ABP Web site (www.abp.org).

Please note that the certifying examination in General Pediatrics will be offered annually at Prometric Testing Centers for the first time in October 2012. More details will be provided in the future.
Renee Matos, MD, Chair, AAP SOMSRFT

As the largest Section of the American Academy of Pediatrics (AAP), the Section on Medical Students, Residents, and Fellowship Trainees (SOMSRFT) has been busy! Over the past year, we've worked toward fulfilling our mission, supporting pediatric trainees in personal and professional development. Through advocacy (both for trainees and for our patients), leadership opportunities, and providing access to resources, we have continued to fill an important role for pediatricians early in their careers.

One focus over the past couple of years has been the continued increase of medical student involvement with a Medical Student Subcommittee, the Chair of which now resides on our Executive Committee. Through this subcommittee, medical student members now receive their own quarterly newsletters -- AAP Med Student News -- and have their own breakout programming at the National Convention and Exhibition (NCE). Although medical students have been affiliate members of our Section since 2007, we have been working over the past couple of years to improve our value to them. As a testament to these efforts, medical student membership has tripled!

Another major effort of our Section is our annual advocacy campaign. Since its inception in 2005, we have tackled salient topics such as mental health, tobacco, and immunizations. Our current project has focused on combating childhood obesity, and has involved collaboration with the AAP Obesity Initiative and other national efforts, including the First Lady’s Let’s Move campaign. This project was developed in two stages – the first stage required that all of the Program Delegates present a “Morning Report” style talk at their institution to increase awareness among residents and to introduce them to obesity-related advocacy ideas. Hopefully, your program delegate has already had the opportunity to give this presentation to your program but, if not, please encourage them to share this information. The second stage began in late March and was developed as a Quality Improvement project that can be utilized by residents to fulfill their residency requirement. The ultimate goal is for all residents to make a pledge to create an obesity prevention project in their outpatient clinics. For more information, you can visit our Team Healthy website at: [http://www.aap.org/sections/ypn/r/advocacy/obesity.html](http://www.aap.org/sections/ypn/r/advocacy/obesity.html).

In addition to our advocacy project, SOMSRFT also provides valuable links to resources and benefits for residents. For example, the Community Access to Child Health (CATCH) Resident Funds program offers grants of up to $3,000 twice a year to assist pediatric residents in the planning of community-based child health initiatives. We have also teamed up with the Section on International Child Health to provide International Travel Grants to residents who wish to do rotations abroad. The Resident Research Grants provide up to $2,000 for residents who wish to enhance their research skills and the Residency Scholarships provide up to $5,000 to help allay financial difficulties for residents in good academic standing. Other opportunities include the Anne E. Dyson Child Advocacy Award, the Clinical Case Presentations, and the Legislative Conference Scholarships. If you know of residents who might benefit from any of these grants, scholarships, or awards, or for more information, please visit our website at: [http://www.aap.org/sections/ypn/r/funding_awards](http://www.aap.org/sections/ypn/r/funding_awards).

Finally, I want to remind everyone that our Annual SOMSRFT Assembly will take place at the NCE in Boston on Saturday, October 16, 2011. This year's theme is “Over, Around, and Through Hurdles: Leaping Your Way into the AAP,” and will highlight leadership skill development, preventing burnout, contract negotiation, improving your sports medicine physical, and an update on legislative advocacy issues. Please look for information on
registering your program delegate, including information on the Program Delegate Travel Grant Awards. I look forward to meeting residents from each of your programs and as the new Chair of the Section am honored to be able to represent them. We hope to continue to partner with other sections in the AAP and other organizations, such as the APPD, to improve the health and wellness of all children and to continue to advance personal and professional development of all pediatric trainees. If there is anything our Section can do to be of assistance, please do not hesitate to contact us!

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.

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