Acronyms... to Save the Day!

Pamela Carpenter, MEd, C-TAGME
Brian Lurie, MD

T

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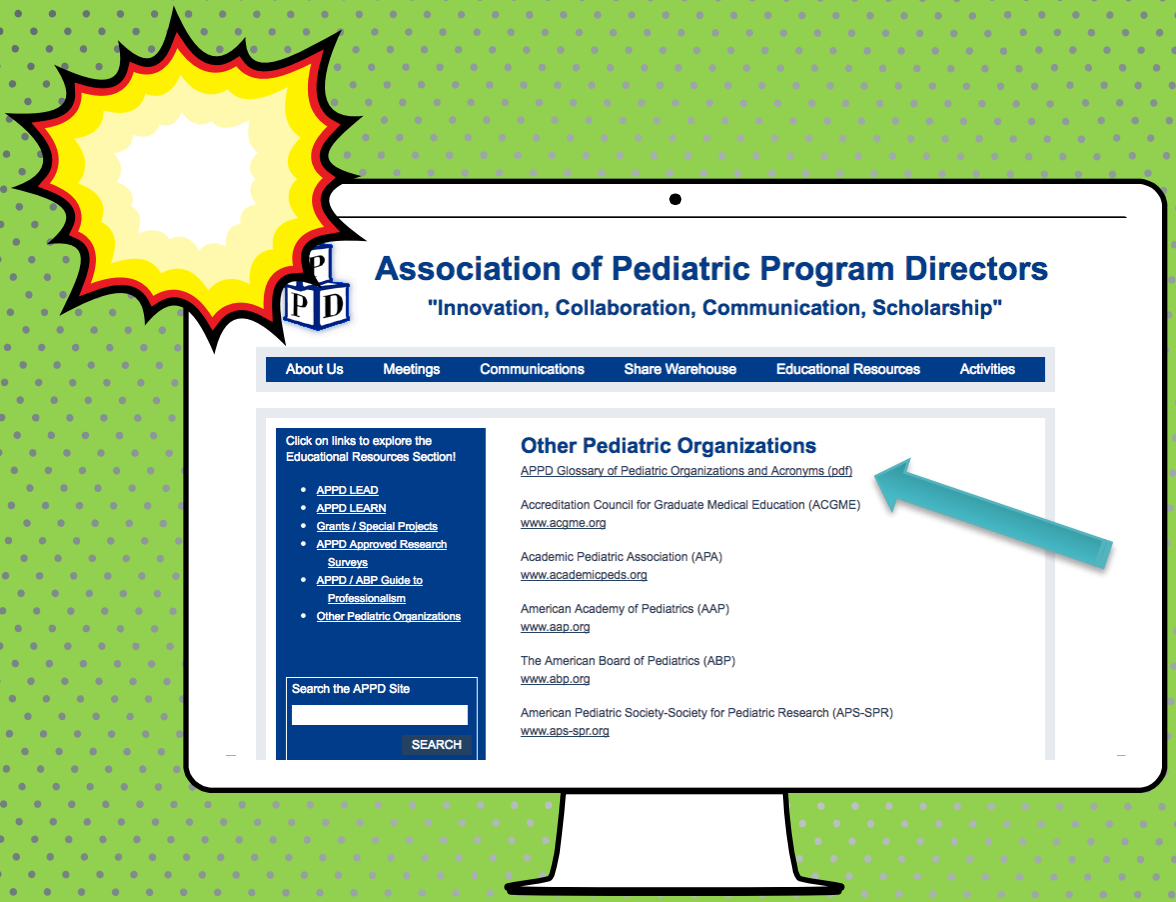
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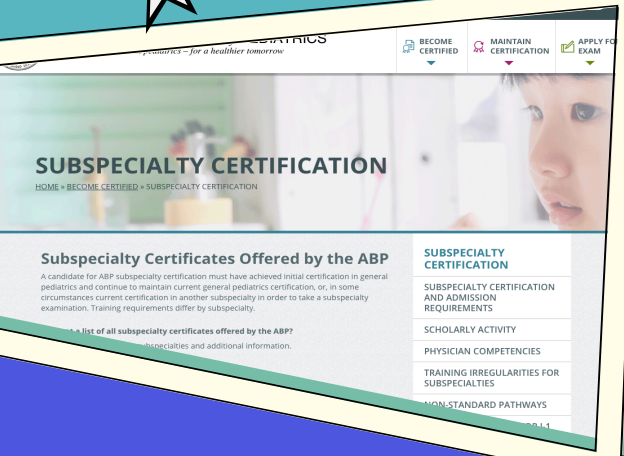
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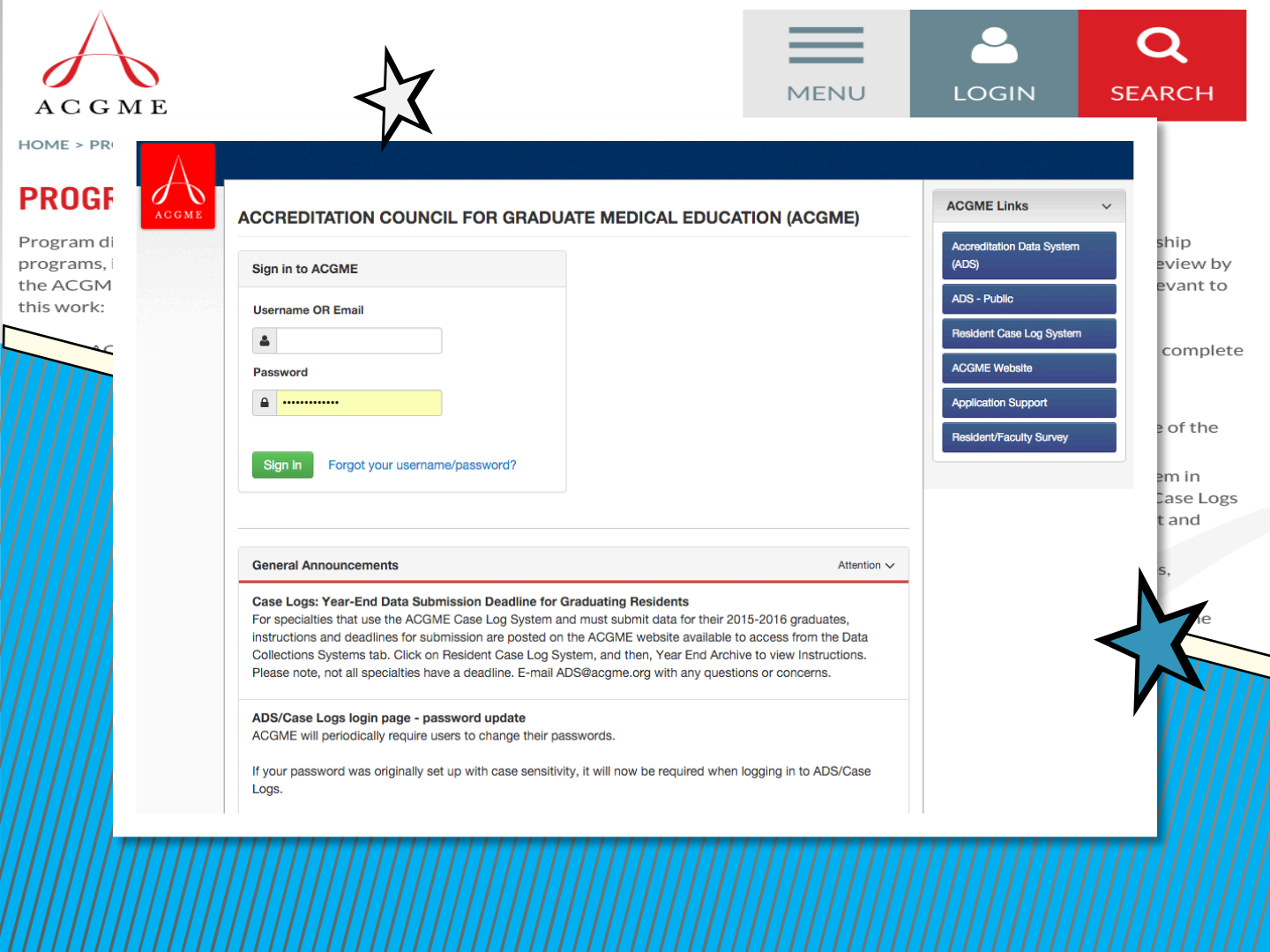
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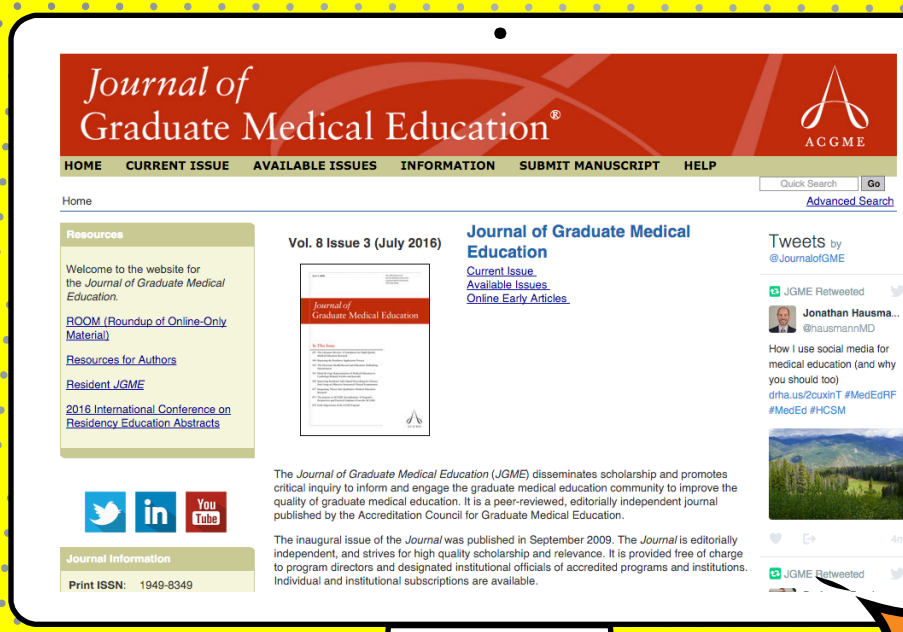
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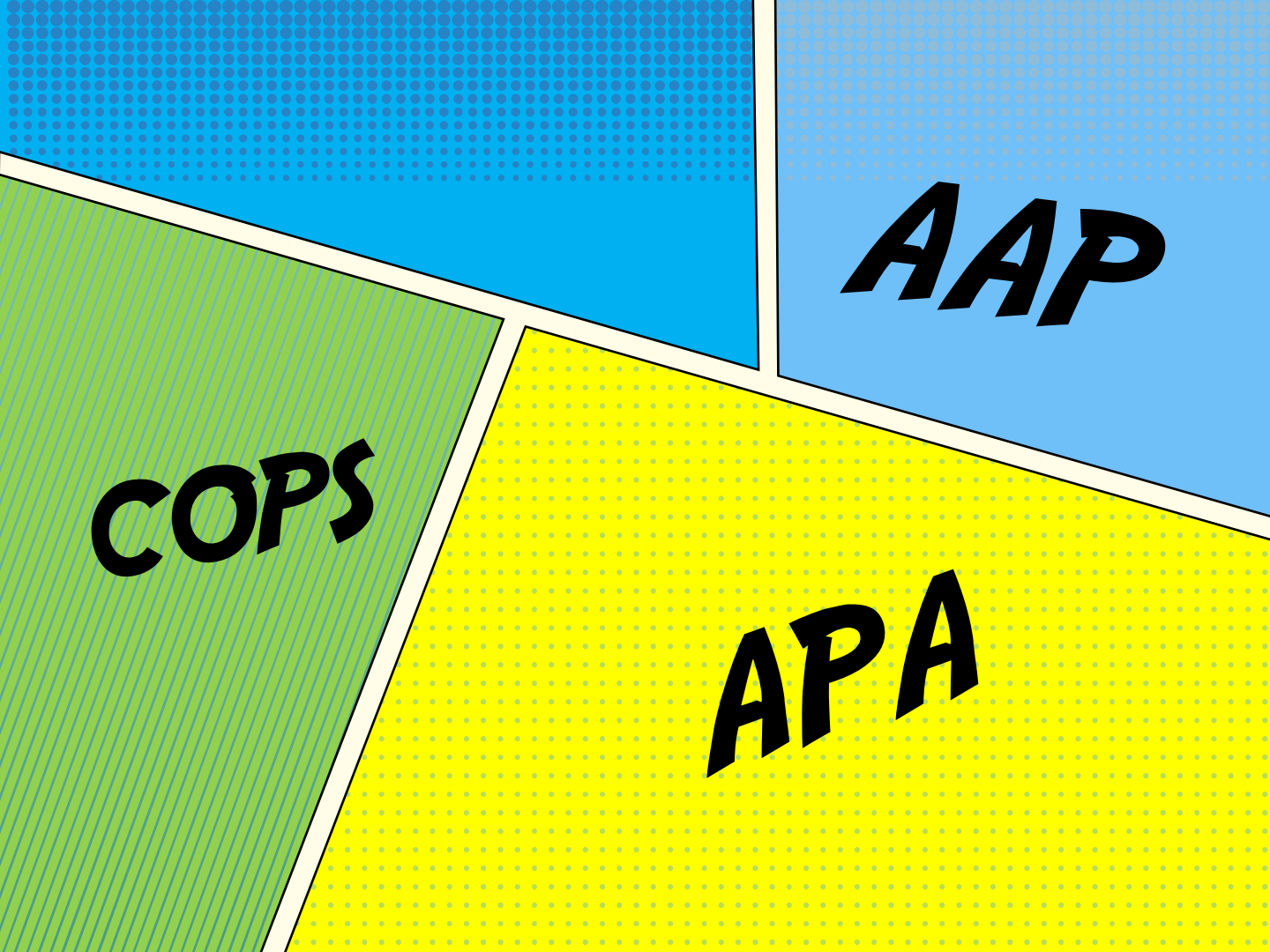
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RESOURCES

- Free course! AAP Behavioral Health Intervention with Adolescents
- The SAHM App - THRIVE
- Parenting Matters: Supporting Parents of Children Ages 0-8
- Blog: Improving Access to Health Care Information for Lower-Income Patients
- Essentials for Parenting Toddlers and Preschoolers

More Resources

OPPORTUNITIES

- September Funding Announcement
- Childhood Obesity Awareness Month
- Global Mentored Scholarship Program

More Opportunities

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Helping Parents Talk to Children About Racial Bias

In a new article on AAP's Healthychildren.org, Drs Ashaunta Anderson & COCP Public Health SIG Co-Chair Jacqueline Dougé provide tips families to talk to children about racial bias.

The article includes guidance for discussing racial differences, racism, and cultural inclusivity.

Learn More

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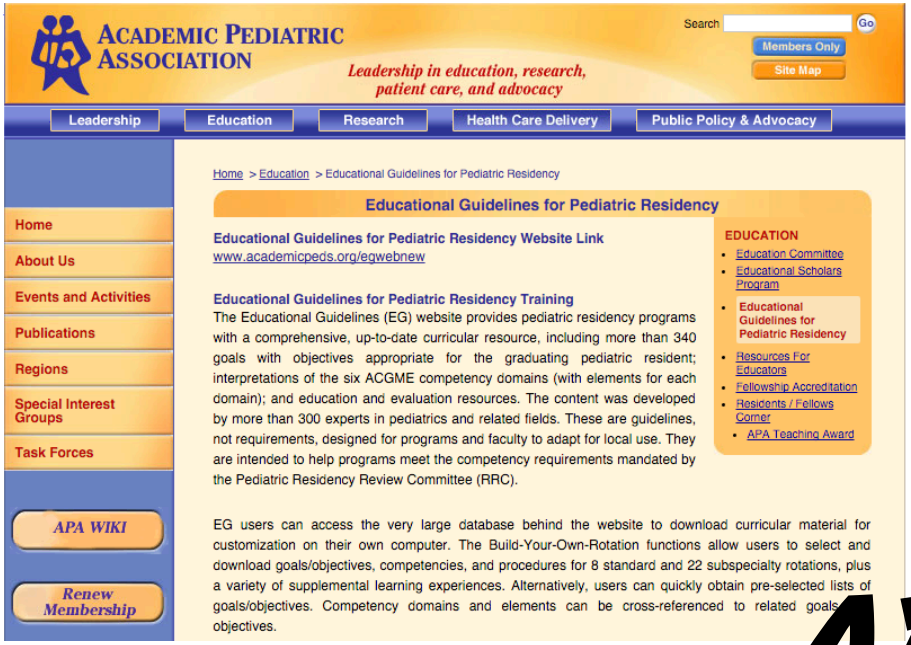

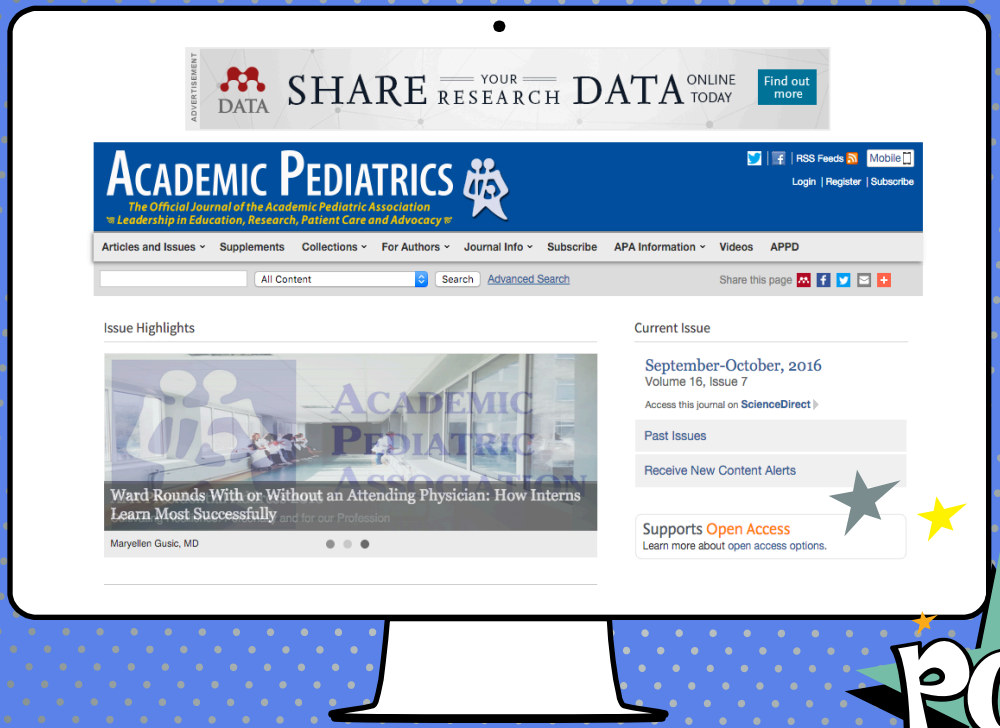
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All pediatric subspecialties working together for optimal child health.

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To Contact Us

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MISSION

The Council of Pediatric Subspecialties advances child health through communication and collaboration within its network of pediatric subspecialties and liaison organizations.

VISION

All pediatric subspecialties working together for optimal child health.

VALUES

As an organization, we embrace:

- Collaboration
- Responsiveness
- Diversity
- Transparency

RECENT NEWS

CoPs Update July 2016

Spring Meeting Presentations

Congratulations to Dr. Jill Fussell for winning the recent Executive Committee member election. Welcome, Dr. Fussell!

January 2016: CoPS Response to ACGME Resident Duty Hours

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The Next Expedition

MILLER SARKIN LECTURER:

Robert Englander, MD, MPH
Associate Dean,
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University of Minnesota

COMSEP

The Council on Medical Student Education in Pediatrics (COMSEP) is a dynamic organization, which champions the cause of pediatric medical student education. COMSEP was established in 1992 with the support of AMSPDC (the organization of pediatric department chairs) and became an independent organization in 2015.

Engaging the COMSEP Community

COMSEP discussion board

The COMSEP discussion board provides a home for our discussions that is archived, searchable and later able to be referenced by new members or by others to whom a query might not have been relevant at the time of the discussion but for whom it becomes relevant later. The Discussion Board is available to all COMSEP members who are logged in to the COMSEP website.

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Residency recruitment committee template
Gia Bradley
Sinai Hospital of Baltimore
09/20/2017
A Novel Approach to Resident Scheduling in the Era of Duty Hour Guidelines
Eyal Ben-Isaac
Children's Hospital of Los Angeles
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The Assessment and Plan: An Intensive How to Workshop Series for Interns
Ariel S. Winn
Boston Children's Hospital
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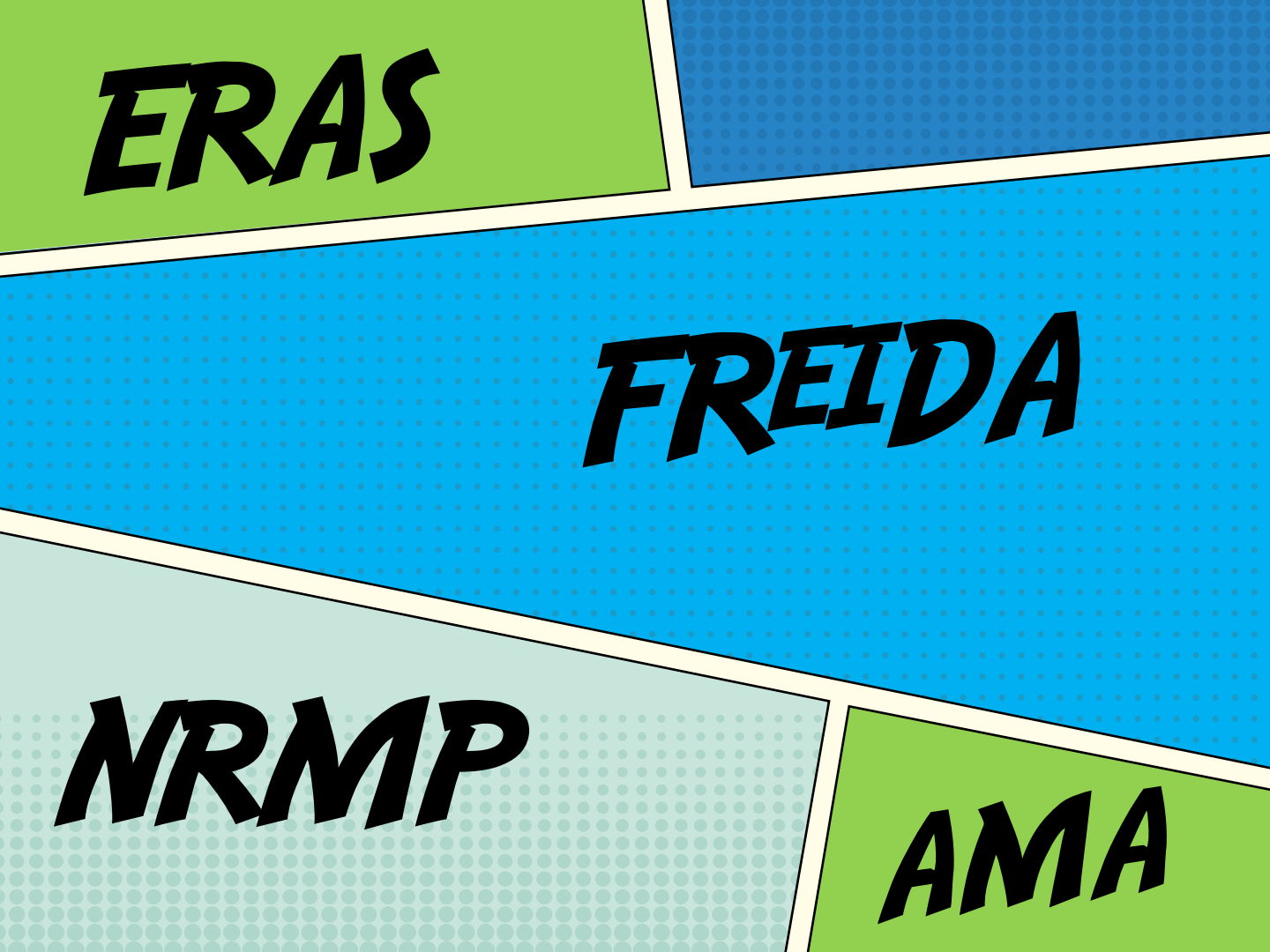
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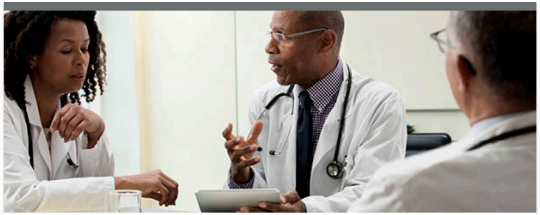
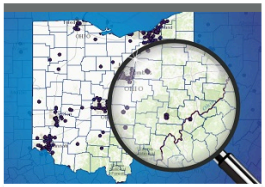
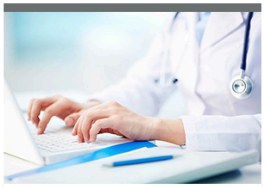


3 ways to avoid MACRA penalties



Interactive tool reveals where physicians are needed »



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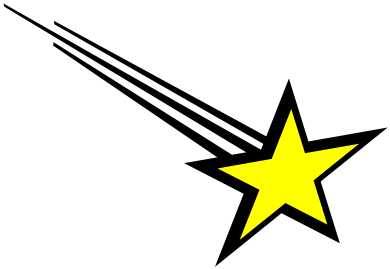
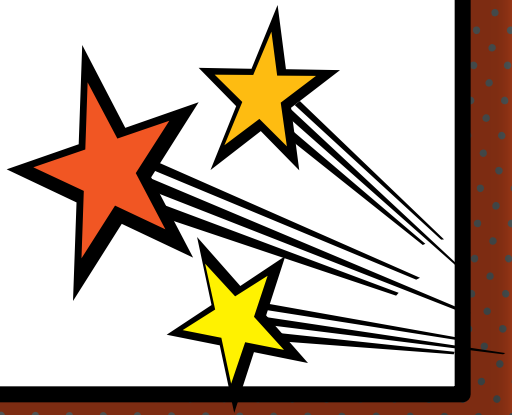




THANK YOU!

QUIZ TIME!

Scenario 1

- You are a fellowship program director reviewing applications. You come across an individual who attended an osteopathic medical school and has completed a pediatric residency certified by the American Osteopathic Association (AOA). You have read about the new requirements for ACGME accredited core residency training, but feel your GMEC would accept this individual under the "Exceptional Applicant" rule. But you do not know if the individual will be board eligible and if training them will fill an ACGME accredited spot in your program.
- **Where do you find helpful information?**

a. CoPs

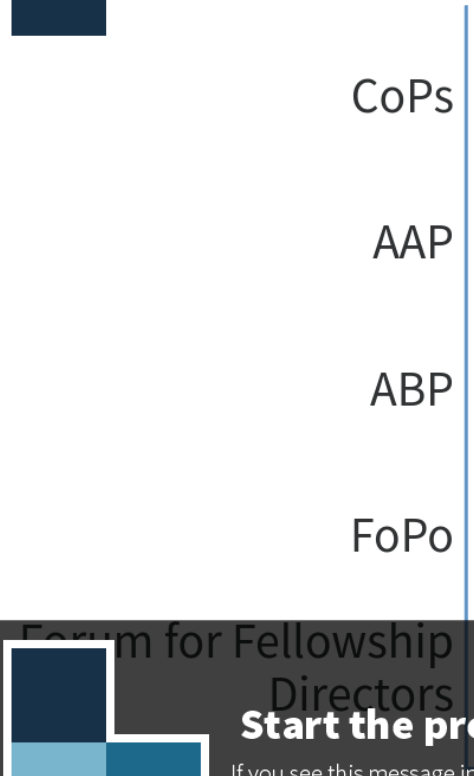
b. AAP

c. ABP

d. FoPO

e. Forum for Fellowship Directors

ccept Osteopathic Students in your fellowsh
do you find helpful information?



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Answer

- ABP

- Extra credit: APPD website: FAQ for Subspecialty of Pediatrics ACGME

Scenario 2

- You are a new program director, but have been part of the core faculty at your program for a couple of years and served on the Clinical Competency Committee. The December reporting date is quickly approaching and you need to schedule CCC meetings. However, you were not satisfied with the way the meetings were done under previous leadership, but have many questions on how to do this better.
- Your questions are:
  - What is your role as the PD on the CCC?
  - Can I ask NP's from the NICU who work with my residents on a daily basis to sit and vote on the CCC?
  - Can my Program Coordinator who can provide valuable insight on resident performance in areas such as interpersonal and communication skills, teamwork, and professionalism be a voting member of the CCC?
  - Can residents or chief residents sit on the committee?
- **Where do you find helpful information?**

a. APA Educational Guidelines for Pediatric Residency Programs
b. WebADS
c. RC Pediatric Review Committee
d. AAMC MedEd Portal
e. A guidebook found on the ACGME website

s about the Clincal Competency Committee?
you find helpful information?

APA Educational Guidelines for Pediatric Residency Programs

WebADS

RC Pediatric Review Committee

AAMC MedEd Portal

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Answer

- ACGME
- Extra credit- CCC Guidebook on the ACGME website

Scenario 3

- You are a new APD. After implementing the individualized curriculum for your residents, the PD has noticed that more of the residents are choosing to do a Sports Medicine elective. The PD puts you in charge of creating goals and objectives, learning experiences, an assessment tool, and mapping it to the domains of competence and the milestones. In an effort not to reinvent the wheel, you wonder if this already exists and also wonder if there are educational resources your residents can utilize to supplement the elective.
- **Where do you find helpful information?**

a. Pedialink

b. APA Educational Guidelines

c. AAP Committee on Pediatric Education

d. GMEC

e. MedEdPortal

might goals and objectives, learning experi
valuation, etc. for a new rotation already exis

Pedialink

APA Educational Guidelines

AAP Committee on Pediatric Education

GMEC

MedEdPortal

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Answer

- APA Educational Guidelines

Scenario 4

- The program director is required to indicate annually whether each resident's or fellow's performance is satisfactory, marginal or unsatisfactory in overall clinical competence and whether the evaluation in professionalism is satisfactory or unsatisfactory. A marginal rating implies that more time and information are needed to determine whether the performance is satisfactory or unsatisfactory.
- **To whom does the program director report this information to?**

a. ABP

b. AAP

c. PAS

d. ACGME

e. GMEC

n does the program director report annually resident's or fellow's performance?

PAS

AAP

ABP

ACGME

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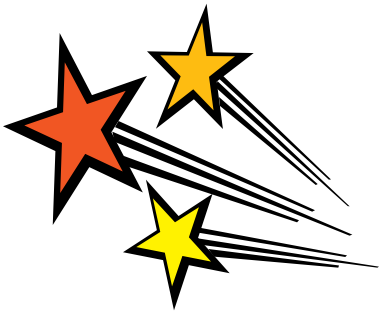
Answer

- ABP



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Where do you find helpful information?

Scenario 2

- You are a new program director, but have been part of the core faculty at your program for a couple of years and served on the Clinical Competency Committee. The December reporting date is quickly approaching and you need to schedule CCC meetings. However, you were not satisfied with the way the meetings were done under previous leadership, but have many questions on how to do this better.

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  - Can residents or chief residents sit on the committee?

Where do you find helpful information?

Scenario 3

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Where do you find helpful information?

Scenario 4

- The program director is required to indicate annually whether each resident's or fellow's performance is satisfactory, marginal or unsatisfactory in overall clinical competence and whether the evaluation in professionalism is satisfactory or unsatisfactory. A marginal rating implies that more time and information are needed to determine whether the performance is satisfactory or unsatisfactory.

To whom does the program director report this information to?