



Letter From the Chair

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A Program of the
American Academy of Pediatrics

CATCH

Community Access to Child Health

The year 2006 marked significant growth and change for the CATCH program. As we sadly mourned the loss of longtime CATCHers such as Donald Cantley, MD, FAAP, and Jim Burroughs, we welcomed many pediatricians and child health advocates into our network. Each one of these individuals (almost 16,000) represents the possibility that one more child has access to care that he or she did not have before. For this, I thank and commend all of you.

During my term of service as the chairperson of the District CATCH Facilitators, I have been honored to serve with some of the most dedicated child health care advocates. I would like to take this opportunity to thank Donald Cook, MD, FAAP (District VIII, past president of the American Academy of Pediatrics); Dennis Vickers, MD, MPH, FAAP (District VI); and Paige Ward, MD, FAAP (District X), for their service and dedication to the District CATCH Facilitators. These 3 individuals will be greatly missed. We are excited to welcome Marsha Raulerson, MD, FAAP (District X); Anu Partap, MD, MPH, FAAP (District VIII); and Robert Anderson, MD, FAAP (District VI), to the oversight group. Their history of leadership and community action precede them. Welcome!

In 2006 CATCH partnered with the Community Pediatrics Training Initiative to introduce a pilot funding program, CATCH Residency Training Grants. The mission of this program is to provide support to residency programs to build sustainable opportunities for residents to gain experience working on community-based child health initiatives that increase access to medical home or

specific health services not otherwise available. These grants are different from the CATCH Resident Grants in that funding is awarded to residency training programs instead of individual residents. We are very pleased with the response to this call and will be announcing the 10 funded projects in the upcoming months.



Lastly, I want to thank all of those who have already responded to the CATCH appeal that was sent at the beginning of December. Your contributions will continue to provide pediatricians with the opportunity to initiate community-based programs. Last year alone CATCH awarded a total of 107 grants. This number increased from 91 the previous year. It is my hope that we can continue to increase the number of grants funded, as there are still so many worthy projects that go without funding. If you have not yet had an opportunity to respond to the appeal, please consider a contribution.

Thank you for your continued support of the CATCH program and for all that you do for child health. I hope that you find the CATCH network to be a useful resource, and I continue to encourage you to make the most of the opportunities the network affords you.

Sincerely,

Gerald J. Tiberio, MD

Gerald J. Tiberio, MD, FAAP

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™





The mission of CATCH is to support pediatricians who work with communities to ensure that all children have medical homes and access to any other needed health care services.

A CATCH project is a broad-based community partnership that increases children's access to medical homes or specific health services not otherwise available. All CATCH grant-funded projects must be led by a pediatrician or pediatric resident.

The CATCH Program is a national program of the American Academy of Pediatrics supported by Wyeth, CVS/Pharmacy Charitable Trust, Gerber Products Company, Hasbro Children's Foundation, Irving Harris Foundation, Ronald McDonald House Charities, Dyson Foundation, Milk Processor Education Program and individual donations through the AAP Friends of Children Fund.

District and Chapter CATCH Facilitators

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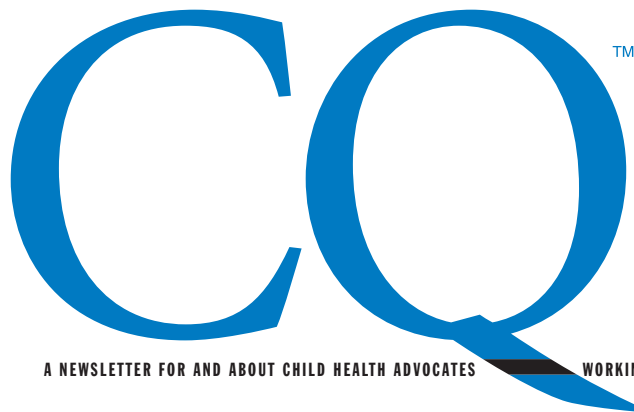
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A NEWSLETTER FOR AND ABOUT CHILD HEALTH ADVOCATES WORKING TO EXPAND COMMUNITY-BASED SERVICES.

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CATCHers' Corner

The Adolescent Leadership Council of Hasbro Children's Hospital

Gary Maslow, MD, is a 2005 CATCH resident (Cycle II) grantee.

It was the beginning of my second year of residency. I returned home after a 12-hour overnight shift in the pediatric emergency department and opened a letter from the American Academy of Pediatrics (AAP) stating that I had received a CATCH grant. The contrast was stark between the moment of exhaustion before opening that letter and the exhilaration of the following year as my CATCH grant project, a leadership program for teens with chronic illnesses, flourished. With the support of the CATCH Program I was able to take my interest in the impact of chronic illness on teens and their families and develop a program that is shaping my residency experience.

With the help of a fellow resident in the Brown University Medical School Triple Board Program, Wendy Froehlich, MD, I started The Adolescent Leadership Council of Hasbro Children's Hospital (TALC). TALC brings together teens with chronic illness and Brown University student mentors who also have chronic illness. The idea comes from a program at Dartmouth Medical School called STAR. At each meeting the teens and Brown student mentors discuss different aspects of chronic illness: doctors and hospitals, family, transition to college, school, etc. In addition, the parents of teen

participants meet separately for parallel discussions. The goal is to provide social support for the teens, and also to provide an opportunity to give feedback to their hospital and the community. The members of TALC presented at pediatric grand rounds, wrote and distributed 1,500 newsletters throughout Rhode Island, and presented at a local high school.

Rosalind Vaz, MD, a former president of the AAP Rhode Island Chapter and adolescent medicine pediatrician at Brown, introduced me to the CATCH grant process. With her support, I applied for the grant, which has had significant benefits for patients with chronic illness in our community. It also provides benefits for the Brown University student mentors, for me and the other residents involved, and also for Hasbro Children's Hospital. We started the year with a group of 12 teens, aged 15 to 18 years, with chronic illnesses and 11 Brown student mentors, aged 18 to 22 years, with diseases including cancer, diabetes, inflammatory bowel disease, lupus, sickle cell disease, Takayasu's arteritis, and vitiligo.

Perhaps the best way to describe the group and its impact on all parties is to describe the experience of Ruth. She is a 17-year-old young adult, a refugee from Africa who developed Takayasu's arteritis 3 years ago. Ruth was recruited for the program by a resident taking care of her during her monthly admission for an infusion treatment.

At the first meeting, Ruth was almost silent; she was shy and appeared sad. The only time she spoke was to share with the group

a doll that she had made to represent Takayasu's arteritis. The doll was missing one arm representing Ruth's left arm, which is pulseless. Over the course of the year, Ruth began to speak more openly and share her experiences of being a patient at Hasbro. For the newsletter she wrote an essay describing what Takayasu's arteritis would look like if it were a person. At the end of the year Ruth shared this piece with the entire group. Later, when Ruth was admitted to Hasbro Children's Hospital, she handed out newsletters with her essay in it to members of her medical team. A neurology resident remarked, "It is amazing how much she wants to share her experience with others."



Through TALC, Ruth gained a voice and became an advocate for herself and her medical needs. She also contributed to the education of residents, helping us to understand the biology of this rare disease. More importantly, she taught us all about the experience of illness.

Hasbro Children's Hospital is the medical home for teens in Rhode Island with chronic illness. The opportunity for patients like Ruth to have their voices heard by the



hospital and medical community can improve their medical home.

The evaluation data, which we collected through preinterviews and post-interviews and questionnaires, demonstrate that many of the teens and Brown students benefit from TALC in similar ways. Overall there was a decrease in isolation with teens knowing others with chronic illness, an improvement in attitude toward illness, as well as an improvement in relationships with parents. One hundred percent (24/24) of participants (Brown students, teens, and parents) reported that TALC was beneficial and that they would recommend the program to others.

TALC continues this year, supported by the Rhode Island Department of Health. It now has 15 teen participants, 10 Brown student mentors, and 10 parents participating. Four residents are involved in running different facets of the program, including a robust parent group, a school outreach component, and outreach on the Brown University campus, including teaching a spring semester independent study course on childhood chronic illness. In addition to TALC activities, several of the Brown students are working on plans to spread the

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The Adolescent Leadership Council of Hasbro Children's Hospital

continued from page 3

basic idea of TALC to different universities and medical centers throughout the northeastern United States.

TALC is based on the simple idea that bringing together teens with chronic illness and providing them with opportunities to be leaders can improve their adjustment to their illness and help them advocate for the improvement of their medical homes. We are hoping to apply this idea in local pediatric practices (where pediatricians can bring together their patients with chronic illness to form a leadership group), at local schools (where a school nurse can organize such a group), and at other medical centers.

With the support of the CATCH Program I was able to take my interest in the impact of chronic illness on teens and their families and develop a program that is shaping my residency experience.

The resident CATCH grant I received at the beginning of my second year of residency was a seed that has germinated into an exciting community service program and an exceptional educational experience. Because of the generosity of the CATCH program, the often fatiguing process of residency training has been augmented by an exciting and creative program that benefits not only the residents involved, but the patients, hospital, and overall community. [CQ](#)



Errol R. Alden, MD, FAAP, CEO/Executive Director, American Academy of Pediatrics receives a check from Matthew Garrett, Vice President and Global Business Manager, Wyeth Vaccines at the 2006 Community Pediatrics Reception and Poster Session held on October 7th in Atlanta at the National Conference & Exhibition. The CATCH program would like to thank Wyeth for its continued support of the program and of the Community Pediatrics Reception and Poster Session. [CQ](#)

Wyeth Sponsored Community Pediatrics Reception and Poster Session at NCE

Advancing the AAP Quality Agenda— The Quality Improvement Innovation Network

Become a part of the American Academy of Pediatrics (AAP) innovative new learning community. Help develop tools and strategies to improve care for children and implement best practices for AAP members. Work with and learn from your colleagues in practice. Be a part of making change happen.

The Quality Improvement Innovation Network (QuIN), a network of pediatricians and their staff teams, is being developed to improve care and outcomes for children and families by testing practical tools, measures, and strategies for use in the everyday pediatric practice, a child's medical home.

Why an Innovation Network?

The AAP has developed multiple evidence-based guidelines during

the past decade. For the most part, however, these recommendations did not become standard practice. Practical tools and strategies have been identified as important components to assist pediatricians in making changes in practice. With no AAP mechanism for developing these "change packages" of measures, tools, and strategies, the idea of QuIN was developed.

The Innovation Network will involve primary care practitioners who have experience with a quality improvement activity; are interested in improving care in their practice; welcome the opportunity to learn from colleagues about practice improvement; and want to participate in practice-based activities that test practical tools, measures, and strategies that can be implemented in the medical home for improving care.

Gerald J. Tiberio, MD, FAAP, chairperson of the AAP District CATCH Facilitators, stated, "The District CATCH Facilitators heartily endorse the efforts of the Innovation Network to improve care and outcomes for children and their families. We encourage community pediatricians to become involved in an array of QuIN activities."

A variety of activities will allow members to be involved at a level that best suits their interests and schedule. For more information on joining the network, please contact Keri Thiessen, MEd, Senior Health Policy Analyst, Department of Practice, at kthiessen@aap.org. [CQ](#)

Awarded 2007 CATCH Planning Funds Grants

(Grants Awarded in Fall 2006)

GRANTEE	DISTRICT	CITY/STATE	PROJECT NAME
Thomas Ball, MD, MPH	VIII	Tucson, AZ	Improving Health of CSHCN in Child Care
Sharon Beier, MD	II	Garden City South, NY	Healthy Bronx Youth Empowered by Community
Paul Carbone, MD	VIII	Salt Lake City, UT	Autism: Access to the Medical Home
Jennifer Cole, MD	X	Mobile, AL	Community-based Asthma Control Partnership
Almira Contractor, MD	III	York, PA	Addressing Childhood Overweight—A Community Approach
Anthony Delach, MD	VI	Orland Park, IL	ADHD: Survey of Family Needs
Mila Derlet, MD	IX	Davis, CA	Rural Northern California Obesity Prevention Project
John Dorsey, MD	V	Bingham Farms, MI	Pediatric Care for Children of Prisoners
Jacqueline Douge, MD	III	Frederick, MD	Frederick County Child Health Partnership (FCCHP)
David Fagan, MD	II	Bronx, NY	Improving After-hours Access to Pediatricians
Jonathan Fanburg, MD, MPH	I	Ellsworth, ME	Hospital, YMCA, Schools, and Community Fighting Obesity
Blaise Favara, MD	VIII	Hamilton, MT	Community-based Child Development Oversight Program
Laura Ferguson, MD	VII	Houston, TX	Shots PLUS: Linking Immunizations to Developmental Screening
Linda Getz-Kleiman, MD	VI	Fargo, ND	Catch'em Early: Mental Health Screening
Lisa Green, MD	V	Cincinnati, OH	Winton Hills Pediatric Obesity Prevention Project
Gauri Gulati, MD	IV	Richmond, VA	Supporting Breastfeeding in the Underserved Population
Jose Hernandez, MD	IX	La Habra, CA	Facilitating Access to Pediatric Care
Teresa Holtrop, MD	V	Beverly Hills, MI	MIAAP Developmental Screening Systems Change Planning
Avril Houston, MD, MPH	III	Baltimore, MD	Date Right! Assessment of Dating Violence Resources

GRANTEE	DISTRICT	CITY/STATE	PROJECT NAME
Leena Jindal, DO	V	Flint, MI	Family Influence: Changing High-risk Behaviors
Kelly Komatz, MD	X	Orange Park, FL	Access to Health Care for Latino Children
Scott Krugman, MD	III	Baltimore, MD	Home Visiting/Obstetrics/Primary Care Collaboration
Michael Lamacchia, MD	III	Paterson, NJ	Healthy Paterson: Reducing Pediatric Obesity
Fasha Liley, MD	IX	Los Angeles, CA	Community Pediatric Clinic Oral Health Outreach
John Meurer, MD, MBA	VI	Milwaukee, WI	Forster Child Mental Health Access Project
Michael Moran, MD	VI	Kansas City, MO	Medical Home for Foster Care Children
Anne Mortensen, MD	V	Detroit, MI	Combating Obesity in Our Community
Nerian Ortiz, MD	X	San Juan, PR	A Dental Home in Cantera Peninsula
Kathy Ostler, MD	VIII	Park City, UT	Community Needs Assessment for Summit County
Georgina Peacock, MD, MPH	VI	Prairie Village, KS	Access for Care, Community Education, and Sensory Screening (ACCESS)
Wipanee Phupakdi, MD	II	Bronx, NY	Bronx Healthy Living for Families Initiative
Mary Rigas, MD	III	Coudersport, PA	Partners in Prevention of Childhood Obesity
Deborah Shropshire, MD	VII	Oklahoma City, OK	Reducing Foster Children's Health Care Barriers
Richard Smith, MD	I	Woonsocket, RI	Improving Adolescent Wellness in Woonsocket
Nita Vangeepuram, MD	II	New York, NY	Mount Sinai Healthy Kids Healthy Families
Heng Wang, MD, PhD	V	Middlefield, OH	Improving Access to Health Care for Special Needs Amish Children
Sofia Washington, MD	IV	New Canton, VA	My Future: My Image
Michael Weiss, DO	IX	Rancho Santa Margarita, CA	PE 4 ME Jr
A. Patricia Wodi, MD	VII	Meridian, MS	Access to Immunization: Kemper Adolescent Project
Noreen Womack, MD	VIII	Boise, ID	Idaho Child Care Quality Rating Program

Awarded 2007 CATCH Resident Funds Grants (Cycle 1)

(Grants Awarded in Fall 2006)

GRANTEE	DISTRICT	CITY/STATE	PROJECT NAME
Jill Campbell, MD	III	Washington, DC	DC Village Student-driven Clinic
Nadia Dowshen, MD	III	Philadelphia, PA	Healthy Living for Teens in Shelter
Roxanna Eftekhari, MD	X	Largo, FL	Improving Health Care Access for Refugee Children
Christopher Fink, MD, MPH	VIII	Albuquerque, NM	Hornet Health: Highland High Health Column
Kirtibala Gupta, MD	VI	Omaha, NE	Home Chronic Asthma Management Program (Home-CAMP)
Tanya Jagodzinski, MD	VI	Madison, WI	Madison Area Healthy Kids Initiative
Heather Link, MD	II	Buffalo, NY	Improving Access to Primary and Mental Health Care for Homeless Youth


GRANTEE	DISTRICT	CITY/STATE	PROJECT NAME
Kenneth McCann, DO	VI	Des Moines, IA	Health Care Status of Children in Shelters
Paul Mullan, MD	III	Philadelphia, PA	Philadelphia Helmet Education, Advocacy, and Distribution (HEAD) Project
Rebecca Perrill, DO	III	Neptune, NJ	LIFT (Let's Improve Fitness Together)
Angkana Roy, MD	II	New York, NY	Partnering to WIN for Asthma
Scott Schwantes, MD	VI	Saint Paul, MN	HCMC ED Violence Prevention Project
Abdul Siddiqui, MD	VI	Chicago, IL	Medical Home Access for Children With Cancer
Wilbert Yeung, MD	I	North Providence, RI	Supporting Chronically Ill Children in School

Promoting Social and Emotional Development and School Readiness

There is a trend toward children exhibiting challenging behaviors in early education and child care programs. The American Academy of Pediatrics (AAP) Provisional Section on Early Education and Child Care (PSOEICC) can provide you with relevant resources and opportunities.

The PSOEICC advocates for quality child care by providing an “AAP home” for pediatric child care experts and community pediatricians interested in learning more about promoting partnerships among early childhood educators, child care providers, researchers, and health professionals. Most young children are enrolled in out-of-home child care programs. High-quality early

education and child care improves their development, health, and ability to learn. Partnerships with community colleagues can ensure that all young children have access to quality child care within a nurturing environment and have a medical home. By working as a team, community partners can maximize resources, develop comprehensive services and, most importantly, nurture and protect children so they enter school healthy and ready to learn.

For more information, please visit www.healthychildcare.org/jointhe-section.cfm or contact the AAP early education and child care staff at 888/227-5409 or childcare@aap.org. 

New AAP Conference Focuses on Community Pediatrics and Medical Home

The Future of Pediatrics: Community Pediatrics, Medical Home and Beyond is an exciting new American Academy of Pediatrics (AAP) conference taking place June 29–July 1, 2007, in Orlando, FL. It will be a great opportunity for community pediatricians and other community health providers and medical home advocates to network and learn from each other as well as from the respected clinical and practice faculty.

The meeting will focus on important community pediatrics and medical home topics while also covering some of the most critical clinical and practice management issues. Keynote speakers include **Paul Miles, MD**, who will discuss providing the best quality care for children; **Jeanne McAllister, RN**, who will describe ways to advance the medical home; **Susan Aronson,**

MD, who will discuss working with early education and child care; and **Magda Peck, ScD**, CEO of City MatCH, who will talk about turning good ideas into successful projects and strategies for partnering with public health.

Sharing Lessons Learned From Community Projects

There will be concurrent session tracks on community pediatrics training and skills development, community partnerships, medical home, practice management, and key clinical issues. More than 2-dozen speakers will present their community projects, experiences, and lessons learned regarding

- Linking children to mental health services
- Improving immunization rates
- Addressing obesity through community approaches

- Improving developmental screening and intervention systems
- Transitioning youth with special health care needs to adult care
- Implementing pediatric resident community projects

A hands-on workshop will let you present your idea for a community project to a small group leader and other participants who will help you shape and enhance your idea into a viable project. Medical home sessions include an interactive workshop on collaborative approaches to addressing chronic medical conditions with Chris Stille, MD, MPH, and family-centered care with Jeanne McAllister, RN, and Brad Thompson, MA.

Great Networking Opportunities

In addition, more than 100 medical home and community practitioners

and advocates will share their successful projects through posters at a reception and poster session.

Just like the 2004 CATCH/Medical Home Conference, the most critical ingredient will be YOU. With interactive sessions and many opportunities for networking, there will be time to share your ideas and knowledge and to learn from others who are facing the same challenges and developing innovative strategies. This is a “can’t-miss” event, and we hope to see you there!

To register or find out more, go to www.pedialink.org/cmefinder or contact Jean Davis, MPP, Director, Division of Community-based Initiatives, at 847/434-4080 or jdavis@aap.org. [CQ](#)



New Quarterly Series— Pediatrics in the Community

In January 2007 *Pediatrics in Review* begins a new quarterly series called **Pediatrics in the Community** in partnership with the American Academy of Pediatrics Community Pediatrics Training Initiative. In this series, residents report on community projects they are working on as part of their pediatric residency training experience. The stories are designed to inspire and provide practical tips for pediatricians on collaborating with community partners to respond to social and environmental threats to child health. For further information or to submit an article for consideration, please contact us at cpti@aap.org. [CQ](#)

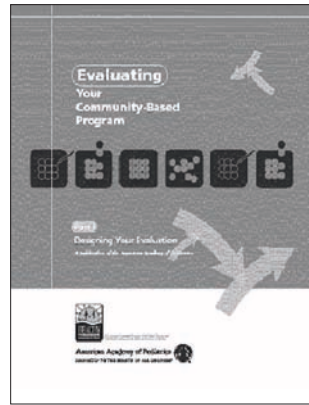
The Community Pediatrics Training Initiative was founded by Anne E. Dyson, MD, and is generously supported by the Dyson Foundation.

Healthy Tomorrows Partnership for Children Program Publishes New Resources

The Healthy Tomorrows Partnership for Children Program (HTPCP) has published 2 new resources for community pediatricians and other health professionals implementing community-based health programs. The following is a summary of each resource.

Evaluating Your Community-Based Program Part I: Designing Your Evaluation

This publication is a guide to program evaluation for pediatricians and others implementing community-based health initiatives.



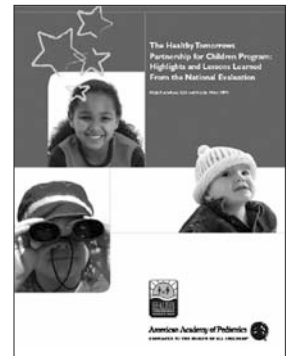
Pediatricians will learn strategies for setting measurable objectives, identifying realistic outcomes, and developing logic models for health initiatives. The guide is designed in a workbook format, which allows it to be used by planning committees when developing program proposals or as an evaluation training tool for project staff. An online version of the guide is available at www.aap.org/commpeds/htpcp/EvalResources.html.


The Healthy Tomorrows Partnership for Children Program: Highlights and Lessons Learned From the National Evaluation

The HTPCP is pleased to announce the release of a new report outlining major findings from the HTPCP National Evaluation conducted by the American Academy of Pediatrics. To assist pediatricians and other health professionals with implementation of these initiatives, the report features lessons learned for developing, evaluating, and sustaining community-based programs.

The report also highlights 3 successful HTPCP initiatives, including their accomplishments, evaluation approaches, and program sustainability strategies.

These lessons are designed to provide guidance to pediatricians and other child health professionals as they engage in community-based project work. To view the report online, visit www.aap.org/commpeds/htpcp/EvalSummary.html.



To receive a printed copy of the materials listed above, please contact Karla Palmer at 800/433-9016, ext 4279, or kpalmer@aap.org. 


Getting Paid for Breastfeeding Management and Support—Yes You Can!

Have you ever helped a mother with breastfeeding out of the kindness of your heart and wondered, "Can I get paid for this?" The answer is yes, and the American Academy of Pediatrics Section on Breastfeeding (SOBr) has developed a convenient *Breastfeeding and Lactation Pocket Guide to Coding for Pediatricians* to help you to code for your breastfeeding and lactation support and management.

As the breastfeeding rates in this country continue to climb, there is going to be an increased need for competent lactation support. Many pediatricians are becoming more skilled in providing breastfeeding and lactation support and should have a mechanism by which to get paid. This handy guide will help you to determine how to code for breastfeeding support and management for an infant and a

mother. To order the pocket guide for just \$5, or to learn more about coding for breastfeeding and lactation, visit www.aap.org/breastfeeding.

Interested in becoming a member of the SOBr? For a limited time, the SOBr is offering a free coding pocket guide to the first 50 new members of the section (\$35 per year for members, \$10 per year for

residents). For more information on how to join, visit www.aap.org/breastfeeding/New%20SOBr.cfm or contact Lauren Kotch, Manager, Breastfeeding Initiatives, at lkotch@aap.org or 800/433-9016, ext 4779. 


Healthy People 2010 Grant Program for Chapters: Children's Oral Health

The American Academy of Pediatrics (AAP) Board of Directors, with financial support from the Friends of Children Fund, approved another round of Healthy People 2010 grants for chapters. The next round of grants will concentrate on children's oral health (Focus Area 21, and pediatric objective 6:10 under Focus Area 6, Disability and

Secondary Conditions), as defined in Volume II of the November 2000 edition of *Healthy People 2010*, which is available at www.healthypeople.gov. Five chapters will be awarded \$20,000 each to develop innovative programs to accomplish pediatric objectives specifically focusing on children's oral health. Requests for proposals were mailed to chapter officers and executive

directors the first week in January. Applications are due in the national office by March 31, 2007. The district vice chairpersons will review and score the proposals during the month of April and select the winning chapters on May 14, 2007. Winners will be announced the week of May 14th via e-mail.

You can access a PDF version of the application by going to the Chapter Opportunities page on the AAP Web site (www.aap.org/moc/chapters/chapopp.htm).

This is a great opportunity for CATCHers to support their chapters. More than 47 CATCH grants have focused on oral health! 

Are you receiving the CQ electronic mailing list, which provides information on upcoming educational opportunities, funding announcements, and new resources and tools? If not, send an e-mail to cqlistserv@aap.org with "add" in the subject line to begin receiving CQ announcements directly via e-mail!

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