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## Letter From the Chair



As I review CATCH accomplishments in 2008, I am mindful of the many hours that district and chapter CATCH facilitators and resident liaisons have devoted to CATCH activities on top of their everyday jobs. I especially want to thank the CATCH network for its dedication and commitment to the CATCH Program and to the many community pediatricians it supports

2008 was a banner year for CATCH. More than 500 CATCH grantees, leaders, and supporters celebrated the program's 15th anniversary and 1,000th grant in great style in October at the community pediatrics reception at the National Conference & Exhibition in Boston, MA. Over the last 15 years, CATCH has funded 634 planning grants, 257 resident grants, and 129 implementation grants, for a total of 1,020 grants.

The district CATCH facilitators developed an ambitious strategic plan in January 2008 to be implemented over the next 5 years. This plan involves

1. Outreach activities to support pediatricians who are working with underserved populations and residents who are just beginning their journey in community pediatrics
2. The development of training modules for CATCH leadership to support learning and skill development
3. A plan for mentorship of residents and young physicians

4. Review and readjustment of the CATCH grant process
5. Identification of stable, diverse sources of funding for the CATCH Program

Also in 2008, CATCH was busy awarding grants to outstanding pediatricians and residents who are planning or implementing community-based projects. Last year CATCH awarded 40 planning grants, 28 implementation grants, and 37 resident grants. In partnership with the Community Pediatrics Training Initiative (CPTI), 6 Leonard P. Rome Visiting Professorships, 7 Residency Training grants, and 6 Advocacy Training grants were awarded. Congratulations to all CATCH and CPTI grantees!

Finally, in August 2008, CATCH and the Healthy Tomorrows Partnership for Children Program (HTPCP) jointly sponsored a training meeting that brought together more than 130 district and chapter CATCH facilitators, CATCH resident liaisons, and HTPCP grantees. This meeting featured plenary sessions on cultural competency, leadership, and development of community partnerships; workshops on a variety of topics in community pediatrics assessment and practice; and program-specific training sessions. It was great to see CATCH and HTPCP leaders learn from each other and have fun together!

As you can see, 2008 was a highly successful year for CATCH. We look forward to an even stronger program in 2009!

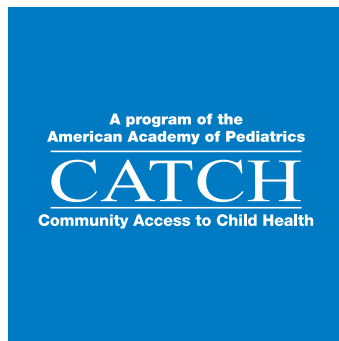
Best Regards,

*Denia A. Varrasso, MD, FAAP*  
Denia A. Varrasso, MD, FAAP



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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 McNeil Consumer Healthcare, CVS/Caremark Charitable Trust, Hasbro Children's Foundation, The Irving Harris Foundation, Ronald McDonald House Charities, Milk PEP, and individual donations through the AAP Friends of Children Fund, and receiving major support from

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

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FL Deise Granado-Villar, MD, MPH  
FL David Wood, MD, MPH  
GA Georgina Peacock, MD, MPH  
GA Leslie Rubin, MD  
PR Ivonne Galarza, MD  
PR Nerian Ortiz, MD

# CATCHers' Corner



## CATCH Project Helps Foster Better Communication With Parents of Children With Needs Not Being Met

*Edith Chernoff, MD, FAAP*

I am a primary care physician at La Rabida Children's Hospital, Chicago, IL, and the medical director of the Premier Kids Program, which targets children aged 0 to 5 years who are at risk for poor health and physical and developmental outcomes by providing a medical home. Program participants include children who are graduates from the neonatal intensive care unit or neonatal follow-up programs, are recognized to have developmental delays, have been rehospitalized after birth, or have neonatal drug exposure. The pediatric care provided, in partnership with families and other program caregivers, identifies and assesses all medical and nonmedical services needed to help children and families reach their fullest potential. Many of our children receive therapeutic services through the Illinois Early Intervention system or the Chicago Public Schools system, and generally we rely on those systems for evaluation and treatment of developmental disorders. However, over time we had become concerned that some of our at-risk children were not receiving services or were in need of additional services that were not recommended by service providers.

With the support of a CATCH Implementation grant, we were able to conduct developmental evaluations on 51 children aged 3 to 5 years from within the Premier Kids Program. Developmental evaluations and family interviews were conducted by a master's-level developmental specialist. Selection of the tool used depended on the developmental level and functioning of the child.

We found that the developmental evaluations opened dialogues with families about their child's developmental strengths and needs, activities to do at home, and

anticipation of next developmental steps. Also, this discussion with parents gave them a special opportunity to share their concerns about the development of their child.

Through these screenings we learned how many children in this age group had developmental needs that were not being met. Forty percent of the children evaluated were identified as having unmet needs. Within this group, school was the primary unmet need for almost two thirds, while additional therapies, in or out of school, accounted for the other unmet needs. It is with these families that the developmental therapist worked closely to help access needed services. Moreover, there were a few situations in which the family was not aware there was a need until the developmental therapist discussed it with them. When the developmental evaluations indicated that children needed additional services, families were supported by a member of the Premier Kids team to navigate the educational and rehabilitation systems.

Finally, it was interesting to us that the children identified as having the most significant delays had a diagnosis of cerebral palsy or autism. None of the children with a diagnosis of cerebral palsy or autism, or those with severe delays, were enrolled in local public schools. Those children who were attending schools were enrolled in specialized schools within the Chicago Public Schools system. The children with cerebral palsy were identified as having the most unmet needs; one third were not in school. On the other hand, all of the children with a diagnosis of autism were in special education or in the process of enrolling in special education. We hope to be able to expand on this information by advocating for our children to ensure that no gaps exist between services and needs.

**The CATCH grant helped me, as a primary care physician, to have the information to hold this dialogue with parents.**

# 2008 CATCH & Healthy Tomorrows Training Meeting: Strengthening Leaders


*Nita Patel, OD, MPH, and Carla Amato, JD, LCSW*

**O**n August 15 and 16, 2008, more than 130 CATCH facilitators, CATCH resident liaisons, and Healthy Tomorrows Partnership for Children Program (HTPCP) grantees from across the country came together at the Westin Chicago River North in downtown Chicago, IL, for the 2008 CATCH & Healthy Tomorrows Training Meeting. CATCH facilitators and resident liaisons are pediatricians and pediatric residents with a special interest in community pediatrics and children's access to medical homes and other needed services. HTPCP grantees are funded by the Maternal and Child Health Bureau to support community-based child health projects that improve the health status of mothers, infants, children, and adolescents by increasing their access to health services.

The purpose of the meeting was to bring together the 2 groups to enhance skills specific to CATCH and HTPCP, to foster collaboration among facilitators and grantees, to learn about other community-based initiatives, and to offer intensive sessions to improve community-based efforts for children. The meeting began with former American Academy of Pediatrics (AAP) President Stephen Berman, MD, FAAP, giving an inspiring opening address on leadership. This was followed by workshops and plenary sessions focused on cultural competency, partnership, project evaluation, project sustainability, advocacy, technology, and incorporating Bright Futures. Separate breakout sessions for CATCH and HTPCP attendees focused on program-specific information and skill building. At lunch on Friday, attendees sat by AAP districts to



foster networking between CATCH and HTPCP. Networking continued at the Saturday breakfast, where attendees participated in roundtable discussions on specific health topics of interest to them. A poster session held during the evening reception on Friday allowed HTPCP grantees and CATCH facilitators to showcase their projects.

This was the first CATCH & Healthy Tomorrows Training Meeting to feature a "going green" theme. Attendees received a memory stick with the meeting's presentations and handouts. Printer stations were available on-site for those who needed a copy of the presentation in hand. Attendees expressed positive feedback about the high-tech format. We hope to continue the trend in future meetings. 

## CQ Newsletter Survey

**W**e would like to ensure that you are getting the most from our newsletter.

Please take 5 minutes to complete the CQ Newsletter Survey.

You can access this survey at

[www.surveymonkey.com/s.aspx?sm=6Zva\\_2fKr\\_2fxln7\\_2fjnV56\\_2boFg\\_3d\\_3d](http://www.surveymonkey.com/s.aspx?sm=6Zva_2fKr_2fxln7_2fjnV56_2boFg_3d_3d).

If this link does not open, please paste into your Web browser.

We greatly appreciate your participation!



## 2009 CATCH Planning Funds Grants

Name	City, State	District	Project Title
Jaya Aysola, MD	New Orleans, LA	VII	Adolescent Parent Comprehensive Enrichment
Laura Beverly, MD	Jacksonville Beach, FL	X	Planning Jacksonville's Pediatric Hispanic Health Care Initiative
Gale Burstein, MD, MPH	Buffalo, NY	II	Accessing Confidential Adolescent Sexual Health Services
Rebecca Carlisle, MD	Silver Spring, MD	III	Follow-up Care Coordinator for Overweight Children
Frances Chalmers, MD	Mount Vernon, WA	VIII	PHR for Children in Foster Care
Lisa Cosgrove, MD	Merritt Island, FL	X	Access to Sports Physicals for Our Community
John Farquhar, MD	Bangor, ME	I	Early Intervention Study Group
Dan Feiten, MD	Centennial, CO	VIII	5 ALIVE! Targeting Inactive 5th Graders
Lydia Furman, MD	Cleveland, OH	V	Breastfeeding Doula Program for Low-income Mothers
Joan Griffith, MD, MHA, MPH	Toledo, OH	V	Community Coalition for Comprehensive Adolescent Health Care
Lisa Handwerker, MD	New York, NY	II	Care Accessibility for Medicaid/SCHIP Recipients
Carol Hartley, MD, MPH	Honolulu, HI	VIII	Culturally Effective Native Hawaiian Pediatric Care
Chaim Kawebalum, DO	Lakewood, NJ	III	CHEMED Oral Health Committee
Virginia Keane, MD	Lutherville, MD	III	Medical Homes for Medically Fragile Children
Adam Keating, MD	Wooster, OH	V	Integrating Mental Health, Pediatrics, and Community
Maria King, DO	Mammoth Lakes, CA	IX	Sierra Park Pediatrics Reaches Out
Susan MacLean, MD, MPH	Burnsville, NC	IV	Mitchell-Yancey School-based Telemedicine Project
Todd Mahr, MD	La Crosse, WI	VI	Kaitlin's Table: Beyond Health Care's Walls
Sheilla McNeal, MD	Lima, OH	V	Milk & Cookies Health & Nutrition Education Program
Ayesha Mirza, MD	Jacksonville, FL	X	Historic Springfield Community Outreach Initiative
Kimberly Northrip, MD, MPH	Lexington, KY	IV	Medical Legal Partnership for Kentucky Children
Shiwaji Pawar, MD	Alma, MI	V	Mid-Michigan Healthy Children Initiative
Susan Pollack, MD	Lexington, KY	IV	Foster Care and Mental Health Systems
Jennifer Polley, MD	Centralia, WA	VIII	Lewis County Childhood Obesity Action Coalition
Isaac Pope, MD, MPH	Centralia, WA	VIII	Autism Learning Center
Joan Reese, MD, MPH	San Diego, CA	IX	Youth in Transition: Mapping Health Care
Hannah Rishel, MD	Holbrook, AZ	VIII	Planning for a Sexual and Physical Abuse Advocacy Center
Philip Scribano, DO, MSCE	Columbus, OH	V	Foster Youth Access to the Medical Home
Ginger Senseman, MD	Salina, KS	VI	Good Start for Salina Babies
Jessica Sessions, MD	New York, NY	II	Family Advocacy Partnership (FAP) Project
Jill Sharon, DO	Lakewood, NJ	III	Healthy Future
Rose St Fleur, MD	Neptune, NJ	III	Pediatrician-driven Model for Breastfeeding Education
Margaret Stager, MD	Cleveland, OH	V	Medical Homes for Disconnected Youth
Suzanne Stelmach, MD	Jacksonville, NC	IV	Child Advocacy Center Planning and Development
William Stratbucker, MD, MS	Grand Rapids, MI	V	Kent County Newborn Medical Home Project
Lisa Sylvia, MD	Lee, MA	I	South Berkshire Children's Wellness Program
Patricia Tibbs, MD, MPH	Laurel, MS	VII	Get Moving Jones County
Margaret Tomcho, MD	Montrose, CO	VIII	Asthma Outreach in Montrose County Schools
Sylvia Villarreal, MD	Taos, NM	VIII	Puente Salud—Childhood Diabetes Management
Jennifer Watts, MD	Kansas City, MO	VI	Nueve Once, Que Pasa?
P. Cooper White, MD	Akron, OH	V	Medical Home Enhancement for Refugee Children

## 2009 CATCH Resident Funds (Cycle 1) Grants

Name	City, State	District	Project Title
Susan Adham, MD	Oakland, CA	IX	Advocacy for Arabic-Speaking Families in Oakland
Iroko Akpovwa, MD, and Moira Lancelot, MD	Brooklyn, NY	II	Every Smile Counts
Amy Beck, MD, MPH	San Francisco, CA	IX	School-based Obesity Prevention in Action
April Brenes, MD, and Kelly Clayton, MD	Jacksonville, FL	X	Asthma Community Awareness Program
Leah Costello, MD, and Katherine Gallagher, MD	Salt Lake City, UT	VIII	Healthy Decisions for Your Changing Body
Andrew Hashikawa, MD	Milwaukee, WI	VI	Reducing Unnecessary Child Care Exclusions
Nathaniel Justice, MD, MBA	Nashville, TN	IV	Community-centered Approach to Reduce SIDS
Jessica Keller, MD, and Sheryl Militar, MD, MS	Tucson, AZ	VIII	Dental Home Barriers in Pima County
Jennifer Kett, MD, and Christina Cartaya, MD	Bronx, NY	II	CHAM DRIVE Project
Josephine Lau, MD, MA, MPH	Sacramento, CA	IX	Community Mental Health Services for Youth
Faisal Mawri, MD	Flint, MI	V	Never Shake Your Baby
Gifty Ntim, MD, MPH	New Orleans, LA	VII	New Orleans Pediatric Obesity Prevention Project
Nkechi Nzerem, MD	Sacramento, CA	IX	Mentoring at Mather Youth Academy
Michal Pankratz, MD	Lubbock, TX	VII	My Father's House: A Medical Home
Ivy Pointer, MD	Chapel Hill, NC	IV	Samaritan Health Center Children's Clinic
Celia Quinn, MD, MPH	Bronx, NY	II	Support Materials to Promote Successful Breastfeeding
Ana Paula Ribeiro, MD	Miami, FL	X	Post-discharge Support System for NICU Parents
Sheetal Shah, DO, and Andrea Ali, DO	Mineola, NY	II	Winthrop Hospital's Injury Prevention Program (WHIPP)
Emily Sherer, MD	Indianapolis, IN	V	Medical Homes for Children of Women in Motion
Beth Summers, MD, PhD, and Kathryn Kleber, MD	Indianapolis, IN	V	Continuing Preventive Health Care for Homeless Children
Lauren Wilson, MD	Burlington, VT	I	Parenting Support for Somali Bantu Refugees
Katherine Yun, MD, and Sherene Mason, MD	New Haven, CT	I	Building Together: Creating a Medical Home

# Healthy Tomorrows Program Addresses Health Literacy

Dodi Meyer, MD, FAAP  
2007 Healthy Tomorrows Grant Recipient

**N**early 25% of the population in the United States cannot comprehend written materials that require basic reading proficiency. There is a correlation between literacy skills and overall personal health. Patients are often reluctant to express their inability to understand written instructions concerning health issues. Health care professionals are rarely trained to discuss health information in lay terms and are unprepared to identify and follow up with low-literate patients. Pediatricians need to be aware of the literacy level of their patients to improve health outcomes of children in the communities they serve. To overcome this health care barrier in northern Manhattan, which contains a large Latino population, Community Pediatrics at Columbia University and New York-Presbyterian Hospital in partnership with Alianza Dominicana has implemented the Health Education and Adult Literacy (HEAL) Program.

The HEAL Program received 5 years of funding from the federal Maternal and Child Health Bureau Healthy Tomorrows Partnership



A Cooperative Agreement  
Program of the Federal  
Maternal and Child Health  
Bureau and the American  
Academy of Pediatrics

for Children Program beginning in 2007. The program strives to improve the health literacy of the community, leading to a decrease in the number of medication errors in northern Manhattan by

- Developing and implementing a culturally competent curriculum on medication adherence in various health care settings and community-based organizations following the basic tenets of health literacy
- Training pediatric practitioners, family support workers, and community volunteers on addressing low health literacy
- Observing the oral communication gap in patient waiting rooms and provider visits to inform future practice

As the HEAL Program continues over the next few years, we plan to pilot the curriculum at a local Head Start site to help educate parents on appropriate treatment of uncomplicated upper respiratory infections. We will also disseminate the curriculum to different adult literacy education classes in the community and incorporate some of the curriculum material to the current electronic medical record used in our hospital. Lastly, we will complete a rigorous process and outcome evaluation to inform the program and make decisions about its future implementation in different clinical and community settings.

CQ



## Registration Now Open!



**Y**ou are invited to the 3rd International Meeting on Indigenous Child Health. The conference will be held on March 6 through 8, 2009, in Albuquerque, NM. The theme of the conference, “Many Voices Into One Song,” represents the concept that collaboration is key to ensuring the health of indigenous children.

The purpose of this international collaborative conference will be to focus on innovative clinical care models and community-based public health approaches for children and youth in indigenous communities in the United States, Canada, and internationally. Opportunities will be provided to present and discuss successful projects and strategies, particularly related to addressing areas of health disparity for indigenous children and youth. Participants

will have the opportunity to share, support, network, and build partnerships through a variety of educational formats.

The conference is jointly sponsored by the American Academy of Pediatrics, the Canadian Paediatric Society, the Indian Health Services, and the First Nations and Inuit Health Branch of Health Canada. The conference will include a joint programming day on March 6 with our obstetrician/gynecologist and women’s health colleagues to discuss topics of overlapping interest.

For a copy of the conference brochure and the Call for Abstracts, visit [www.aap.org/nach/3InternationalMeeting.html](http://www.aap.org/nach/3InternationalMeeting.html). For additional information, please contact [indianhealth@aap.org](mailto:indianhealth@aap.org).

CQ