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### Young Physicians Column

- Section on Young Physicians (SOYP) District VIII Member Spotlight,
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- Point of Care Solutions
- Coding at the AAP

### E-Learning News

- A Quarterly Newsletter from the Division of E-Learning

### CME Corner

### Notes from the Chapter Executive Director’s Desk

- Chapter Executive Directors’ Steering Committee (EDSC) Holds Annual Meeting at Academy Offices August 14-15, 2014
2014 DISTRICT MEETINGS

Autumn marks the passing of another summer of fun and productive district meetings! Districts met in pairs at locations across the country. District and chapter leadership received reports and updates from their District Chairperson, District Vice-Chairperson, and representatives from both the Chapter Forum Management Committee and the National Nominating Committee. Meeting attendees also heard from the AAP President and President-Elect, AAP Executive Director, and the two AAP president-elect candidates. Here are some photo highlights from the meetings!
Transitioning to Adult Health Care: Practice Tools & New Website

The Center for Health Care Transition Improvement - Got Transition recently released clinical resources on transition from pediatric to adult health care. The Six Core Elements of Health Care Transition (Version 2.0) define the basic components of transition support and are based on the 2011 clinical report, "Supporting the Health Care Transition from Adolescence to Adulthood in the Medical Home", jointly developed by the AAP (led by the Council on Children with Disabilities), the American Academy of Family Physicians, and the American College of Physicians.

Three transition tool packages are available in English and Spanish for: 1) practices serving youth who will transition out of pediatric care into adult care; 2) practices serving youth who will remain with the same provider but need to transition to adult-focused care; and 3) practices accepting new young adults into adult care.

Each package includes sample tools that are customizable and available for download. They include a sample transition policy, a tracking mechanism, a readiness/self-care assessment tool, a plan of care template, medical summary, emergency care plan, transfer checklist, and a transfer letter. Each package also includes consumer feedback surveys and two new measurement tools to assess progress in transition quality improvement. According to Patience White, MD, FAAP, the co-director of Got Transition, "We are pleased to make available these new resources to stimulate new quality improvement efforts aimed at ensuring that all youth effectively transition from pediatric to adult-focused care."

To coincide with the release of the updated Six Core Elements, Got Transition launched its newly redesigned website, www.GotTransition.org. The site includes an interactive health provider section that corresponds to the three practice settings. It also includes frequently asked transition questions developed by and for youth/young adults and families, new information for researchers and policymakers, and a robust listing of transition resources.

Innovations in Obesity, Prevention, Assessment, and Treatment Forum

The American Academy of Pediatrics Institute for Healthy Childhood Weight is hosting the 2nd Annual Innovations in Obesity Prevention, Assessment, and Treatment Forum at the AAP National Convention and Exhibition on Friday, October 10, 2014 at 8:00 a.m. The Forum is an opportunity to showcase innovative approaches to prevent, assess and treat pediatric obesity at the point of care that demonstrate promising or proven results. The poster presentations and panel discussion will focus on topics areas such as improving quality of obesity care, increasing physician knowledge, enhancing multidisciplinary care, improving access to care, new technologies, and patient and family communication and engagement. For more information, click here: Innovations in Obesity Prevention, Assessment and Treatment Forum.

Breakfast Forum supported by Nestlé Nutrition Institute
Many people take for granted that community water fluoridation (CWF) in the U.S. is a widespread, safe, and well accepted public health practice. So it can come as a surprise when fluoride opponents try to remove it from the local water supply.

The Campaign for Dental Health, a volunteer network of local and national organizations administered by the American Academy of Pediatrics, was created to provide reliable information on community water fluoridation with a web-based presence, IlikeMyTeeth.org. Our mission is to support health professionals, advocates, scientists, and policy makers who recognize that CWF is a cost effective way to prevent tooth decay.

Why talk about community water fluoridation?

Pediatricians are a trusted source of information on children’s oral health. That’s why the Campaign has developed five new tools for health professionals with information and resources on fluoride, fluorosis, and community water fluoridation. These include two handouts to share with patients, parents, and caregivers.

- **Fluoride Safety: A Guide for Health Professionals** is a concise explanation of the regulation and safety of fluoride additives and fluoridated water. Common concerns, including daily intake and infant formula, are addressed. Links to valuable resources are provided.
- **Fluorosis Facts: A Guide for Health Professionals** gives health professionals a quick, thorough understanding of dental fluorosis and includes photos, follow-up resources, and suggestions for counseling on prevention.
- **Say This, Not That: Tips for Talking about Community Water Fluoridation** is designed to help health providers address technical, challenging questions with comfort and ease. Addressing many of the most common concerns, this tool offers discussion-friendly responses in a clever graphic format.
- **Common Questions about Fluoride: A Resource for Parents and Caregivers** explains the importance and safety of fluoride in a question and answer format. A companion to Fluoride Safety: A Guide for Health Professionals, this handout lets your patients leave the office with accurate fluoride information in hand.

How Fluoride Works

**How Fluoride Works**, a one-page infographic, explains how drinking fluoridated water protects teeth throughout the lifetime. Versions in both English and Spanish can be downloaded from our website, www.ilikemyteeth.org/fluoridation/how-fluoride-works.

Visit IlikeMyTeeth.org for additional information and resources or contact us at fluoride@aap.org. Currently supported by The Pew Charitable Trusts and Washington Dental Health Foundation.

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**Advancing the Pediatric Medical Home Model: New Resource from NCMHI**

The National Center for Medical Home Implementation (NCMHI), in collaboration with the National Academy for State Health Policy, is working to provide the most up-to-date information about exceptional state public health programs advancing the medical home model in pediatric populations. View this month’s Vermont state profile to find out about the Blueprint for Health program and its impact on children and pediatric medical home advocates. For questions or comments, please contact Alex Kuznetsov at akuznetsov@aap.org, Program Coordinator of NCMHI.
AAP DISASTER PREPAREDNESS—Please e-mail DisasterReady@aap.org for more information about the following.

Care of the Critically Ill and Injured During Pandemics and Disasters:
CHEST Consensus Statement

The American College of Chest Physicians (CHEST) recently published the “Care of the Critically Ill and Injured During Pandemics and Disasters: CHEST Consensus Statement” in the Online First section of the journal CHEST. The statement was developed by about 100 clinicians and experts representing a broad variety and scope of clinical fields from more than nine countries and offers the latest evidence-informed suggestions on how to best prepare and manage the critically ill and injured during large-scale disasters and pandemics. Suggestions and considerations for the management of children impacted by large-scale events are now included.

The consensus statement is intended primarily for clinicians and hospital administrators responsible for disaster preparedness planning and providing care in a disaster but also addresses key issues of importance to government officials at local, state, and national levels. The consensus statement is an update of a document published in 2008.

Emergency Preparedness Stories – AAP Members Share Disaster Experiences and Lessons Learned

The AAP and the Centers for Disease Control and Prevention (CDC) collaborated to compile stories that highlight lessons learned or steps that doctors and families can take to improve disaster preparedness for children. Karen Landers, MD, FAAP, Alabama; Grant Allen, MD, FAAP, Alabama; Natalie Stavas, MD, Massachusetts; and Dennis Cooley, MD, FAAP, Kansas, shared their stories.

The Storm is Over, But Not Its Effects: Dr Allen’s Story
Pediatrician for Preparedness: Dr Landers’ Story
Remembering Boston: Dr Stavas’ Story
Mental Health and Recovery: Dr Cooleys’ Story

Three stories were featured during National Preparedness Month on the CDC Emergency Preparedness and Response Web site, Dr Cooley’s story was highlighted in September in the CDC Public Health Matters blog.

To view the family preparedness stories, visit the Real Stories - Special Needs and Emergency Preparedness Web page.

Save the Children’s 2014 National Disaster Report Card

69 million kids are separated from their families each day while in school or child care. Save the Children’s 2014 National Disaster Report Card finds that more than 20 states don’t require all schools and child care providers to have a basic emergency plan. Additionally, a new national parent poll shows that although most parents (70%) are at least somewhat concerned about the risk their children face from disasters, half (49%) don’t feel very prepared to protect their kids.

The AAP has resources to help prepare clinicians and parents for disasters. Clinicians should visit the AAP Children & Disasters Web site, parents should be directed to the AAP HealthyChildren.org Web site. Also see the Pediatric Preparedness Resource Kit and Preparedness Checklist for Pediatric Practices.

For more information, see the full report.
NEW Online Training Course: Influenza Prevention and Control: Strategies for Early Education and Child Care Programs

Pediatricians and chapters protect children from influenza complications by encouraging child care providers to seek education, use AAP resources, and get more involved in disaster planning.

This free online course, a collaborative effort of the AAP and the Centers for Disease Control and Prevention (CDC), educates staff who work in Head Start and other early education and child care programs about influenza policies and strategies that help keep children healthy. The course was developed by Henry “Hank” Bernstein, DO, MHCM, FAAP; Timothy Shope, MD, MPH, FAAP; Margaret Fisher, MD, FAAP; and Dennis Murray, MD, FAAP, FIDSA.

Upon completion of the course, learners will be able to recognize the symptoms of influenza; explain how influenza is spread; discuss the importance of annual seasonal influenza immunization with parents and peers; and much more. This course is approved for 1.0 contact hour.

For more resources on disaster planning in child care programs, view the AAP Child Care Providers and Preparing Child Care Programs for Pandemic Influenza Web pages. For additional online courses for child care providers, click here.

Advocacy Day Trainings

The AAP will be hosting two Advocacy Day trainings in Washington, DC, on Monday, October 27, 2014, and Monday, February, 9, 2015. Beginning with an in-depth training session on how to advocate to members of Congress led by pediatrician federal policy experts and AAP staff, the day will culminate with in-person visits to federal legislators on Capitol Hill. The October training will take place at the Hilton Garden Inn located at 1225 First Street NE, Washington, DC 20002. There is no cost to attend the Advocacy Day trainings other than travel to and from Washington, DC. If you are interested in attending either of the trainings, please email Devin Miller at dmiller@aap.org.

2015 AAP Legislative Conference

Mark your calendar! The AAP Legislative Conference will be held April 12-14, 2015, in Washington, DC. Participants will have the opportunity to develop their federal advocacy skills through interactive workshops, learn about timely child health policy topics, hear from several guest speakers from Congress and the Administration and visit with their legislators on Capitol Hill. If you are interested in attending and would like to be notified when registration opens, please email LegislativeConference@aap.org. For more information, please visit aap.org/legcon.
The American Academy of Pediatrics named Garry Schaedel of Vermont as the recipient of the 2014 AAP Child Health Advocate Award.

Mr Schaedel works for the Vermont Child Health Improvement Program (VCHIP) supporting National Committee for Quality Assurance (NCQA) scoring for pediatrics practices and supporting quality improvement in pediatric and family medicine practices in the state.

Prior to working for VCHIP, Mr Schaedel retired as the Director of the Health Promotion and Disease Prevention Division in the Vermont Department of Health. In this role, he led efforts to implement a universal sports physical form to be part of the state’s Bright Futures well-child visits. Mr Schaedel also served as the Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program Chief where he championed improving access to care for children, quality of care for children and oral health care for children.

Mr Schaedel joins 35 other distinguished recipients who have been presented the AAP Child Health Advocate Award since 1991.

The AAP Child Health Advocate Award acknowledges the significant accomplishments of public officials and advocates who have served as a voice for children in state government. Mr Schaedel was nominated by the AAP Vermont Chapter and was selected by the AAP Committee on State Government Affairs.

The AAP Division of State Government Affairs will be soliciting nominations for the 2015 AAP Child Health Advocate Award in January 2015.

Please contact Jeff Hudson in the AAP Division of State Government Affairs at 800/433-9016, extension 7799 or at jhudson@aap.org for additional information.

State advocacy resources and consultation from the AAP Division of State Government Affairs are available at www.aap.org/stateadvocacy or stgov@aap.org.
AAP National Committees - 2015 Member Appointments

The AAP Board of Directors is soliciting nominations to fill the following member positions for AAP National Committee for terms beginning July 1, 2015:

- Committee on Adolescence: 3 vacancies
- Committee on Bioethics: 1 vacancy
- Committee on Continuing Medical Education: 1 vacancy
- Committee on Development: 2 vacancies
- Committee on Drugs: 1 vacancy
- Committee on Federal Government Affairs: 1 vacancy
- Committee on Genetics: 2 vacancies
- Committee on Hospital Care: 2 vacancies
- Committee on Infectious Diseases: 3 vacancies
- Committee on Native American Health: 2 vacancies
- Committee on Nutrition: 1 vacancy
- Committee on Pediatric Emergency Medicine: 3 vacancies
- Committee on Pediatric Ambulatory Medicine: 3 vacancies
- Committee on Substance Abuse: 2 vacancies

Application materials (factsheet, biographical summary and nomination/self-nomination forms) are available on the AAP Member Center, in addition to statements of needs and requirements for these positions at: http://www2.aap.org/moc/leader.

Committee members are appointed for one term of six years, and are re-appointed every two years during that term. Committee appointments are made on the basis of knowledge, expertise, and the documented needs of the committee. Within this context, Academy membership demographics such as professional activity, gender, ethnicity, and geographical distribution will be considered, as well as chapter activity.

The deadline for nominations for 2015 positions is February 6, 2015 (midnight CST). Nominees must submit a letter of nomination, a fact sheet and a biographical summary to their Chapter President and the AAP Offices by email (nominations@aap.org) or by fax 847/434-8000 (ATTN: 2015 AAP National Committee Member Nominations). All nomination materials must be submitted by February 6, 2015 (midnight, CST).

The AAP Board of Directors will meet May 15-16, 2015 to review nominations and make final appointments. Thank you for taking the time to review and contribute to the nominations process of AAP National Committees for the 2015 term. Please email any questions to nominations@aap.org

AAP 2014 Chapter Officer’s Reception

Chapter presidents, vice presidents and executive directors have been invited to attend the 2014 Chapter Officer’s Reception supported by Abbott Nutrition on Monday, October 13 from 6:30 – 8:00 PM. Please contact Hope Hurley at hhurley@aap.org if you are a chapter president, chapter vice president or chapter executive director, and have not yet received your invitation.
Join the AAP Provisional Section on Tobacco Control in San Diego!

Heading to the 2014 AAP National Conference and Exhibition? Join the Provisional Section on Tobacco Control (PSOTCo) for its exciting lineup of tobacco control session! The below sessions are welcome to anyone attending the conference.

Sunday, Oct. 12, 1:00-5:00 pm; Marriott Marquis, San Diego Ballroom A
Session H2092- Provisional Section on Tobacco Control Program: Addressing Tobacco Control Issues in Office Practice: How Can Pediatricians Combat Burnout?
Join us for presentations including prenatal smoking and the link to childhood obesity, as well as a poster session and networking event.

Sunday, Oct. 12, 5:00-5:45 pm; San Diego Convention Center, Room 29D
Session F2163- Not Your Daddy’s Tobacco: What Pediatricians Need to Know about E-Cigarettes and Other Tobacco Products
Learn about these products and how clinicians can discuss these products with patients and families in the practice setting.

Monday, Oct. 13, 9:30am-10:15am; San Diego Convention Center, Room 28AB
Session F3070- Who Smokes Cigarettes in 2014: Populations at High Risk for Tobacco Use and What You Can Do to Help Them
This session will discuss how to work with and help patients and families with high smoking rates, such as individuals with mental health problems or substance abuse challenges, Native Americans and Alaskans; and LGBTQ adolescents and young adults.

Not going to be at the 2014 National Conference and Exhibition? Connect with the PSOTCo any time by becoming a member! Membership is FREE for AAP members in good standing, and offers opportunities to help shape Academy policy, grow as an Academy leader, create educational sessions, and collaborate with other child health clinicians who have an interest in tobacco prevention and control. For more information, please visit www.aap.org/PSOTCo or contact Janet Brishke, MPH at notobacco@aap.org for questions about joining the PSOTCo.

Are your members attending NCE? Ask them to talk to us about e-cigarettes!

The AAP Richmond Center is seeking pediatricians, sub-specialists, residents, and fellows to participate in focus groups at the 2014 National Conference and Exhibition. Discussions will focus on electronic cigarettes and other electronic nicotine devices, and physicians’ experiences discussing these products in practice. Information gathered from the groups will be used to develop clinical resources. Participants will receive a $50 gift card as a thank you for participating.

Focus groups will be held Sunday 10/12 and Monday 10/13, at 8:30am and 12:30pm. Each group will last 90 minutes. Interested physicians should contact Kristen Kaseeska at kkaseeska@aap.org or 847/434-4269.

The Richmond Center is asking for your assistance in promoting these focus groups to your AAP Chapter members. If you are interested in getting your chapter involved, please share the information above with your members, or contact Kristen Kaseeska (kkaseeska@aap.org) for a brief email to be sent out via your chapter’s listserv.
Explore New Horizons
Visit our booth for special conference discounts and prize drawings!

Ready to explore new horizons?
Get on board the cutting edge of pediatrics education at the AAP Resource Center.

CME, MOC and Lifelong Learning—All Together for You

- **AAP Journals** deliver original research, compelling commentaries and the latest news. Review them all in one place at the AAP Resource Center.

- **Live activities** help you learn the latest in pediatric healthcare while meeting CME/CPD requirements—covering a variety of critical topics. Pick up your 2015 AAP CME/CPD schedule along with special giveaways.

- **EQIPP online courses** are a great AAP benefit—with no member cost to enroll. Save on all Pedialink® online courses. Check out our Pedialink for Fellowship Programs, and the Pedialink Teaching and Learning Resource Center. Take the PREP® Trivia Challenge at our booth for a chance to win great prizes.

**Premie Task Trainer** is the newest member of the life support family. Developed in partnership with Laerdal Medical, the Premie Task Trainer is designed to meet the learning objectives of the NRP® course and support immersive learning for health care professionals who care for premature infants during their first 10 minutes of life.

**Physicians reentry programs** help professionals returning to clinical practice. If you need a plan, we can help you create yours at the AAP Resource Center.

**AAP Career Fair** is powered by PedJobs®. Network with top employers, enjoy live presentations from experts and more. Stop by during the President’s Reception for cake and special guest speakers.

**Enter to Win a $250 Gift Card!**

**STEP 1**
Pick up your Dr. Bob photo prop at Booth 1035.

**STEP 2**
Get a pic of you and Dr. Bob enjoying sessions, networking, or sightseeing.

**STEP 3**
Tweet your pic using hashtags #aap14 #aapbob by 11:59PM, October 14th.
Friends of Children Healthy People 2020 Grant Program for Chapters: Celebrating Ten Years

The Academy is proud to present the publication, Friends of Children Healthy People 2020 Grant Program for Chapters: Celebrating Ten Years. This publication commemorates ten years of chapter programs that addressed the nation’s most pressing child health issues. Successful outcomes of this program include:

- Leveraging nearly $15 million in additional child health programmatic funding beyond the grant time period;
- Serving over 800,000 infants, children, adolescents, young adults and parents;
- Disseminating over 500,000 child health resource materials;
- Registering over 90,000 social media hits.

The Healthy People initiative of the federal government represents a comprehensive, nationwide health promotion and disease prevention agenda for improving the health of all Americans. The Friends of Children Healthy People 2020 Grant Program for Chapters highlights the emerging issues identified by the US Department of Health and Human Services, and aligns chapter programmatic work to AAP priorities identified in the Agenda for Children. Since 2004, the following topics have been addressed:

- Obesity and Physical Fitness
- Mental Health
- Injury & Violence Prevention
- Oral Health
- School Health
- Immunization
- Tobacco Prevention and Control
- Early Brain and Child Development
- Adolescent Health
- Health Communication and Social Media

Over the last decade, 48 grants have been awarded to 29 unique chapters in all ten AAP districts to implement the Healthy People objectives. Each chapter was awarded a $20,000 grant to develop innovative programs to accomplish one or more objectives. Chapters that have received funding have raised awareness for each of the identified topic areas; built strong relationships with community partners; developed resources; disseminated materials to pediatricians and families; and provided outreach to diverse populations.

A special thank you to the District Vice Chairpersons Committee for their leadership and oversight of this critically important and impactful AAP chapter program. This publication is available online at: [http://www.aap.org/en-us/my-aap/chapters-and-districts/Documents/anniversary-compendium.pdf](http://www.aap.org/en-us/my-aap/chapters-and-districts/Documents/anniversary-compendium.pdf). Please contact DeeDee Cada, MA, Manager, District Relations, at dcada@aap.org with any questions.

District Breakfast at the 2014 National Conference and Exhibition (NCE) San Diego, CA

Remember to attend your District Breakfast at the 2014 National Conference and Exhibition (NCE) in San Diego, CA. The breakfasts will be taking place on **Sunday, October 21st** from 7:00 am to 8:15 am in the Hilton Bayfront Hotel. Registration is preferred in order to have accurate counts for food; however, tickets will not be collected. Please note you must be registered for the conference in order to attend the breakfast because badges will be checked. To register visit: [http://tinyurl.com/kxzjss9](http://tinyurl.com/kxzjss9)
In 1989, the AAP established its Friends of Children Fund (FCF), the philanthropic arm of the AAP. Through this charitable fund, the AAP has supported educational and research programs and provided significant resources for the benefit of children, parents, and pediatricians.

Since its beginning, nearly $9,000,000 in FCF funds have been distributed to more than 200 Academy programs and initiatives that provide assistance to improve the health and well-being of ALL children. These programs support AAP efforts, both here in the United States and around the world. For example, through FCF support of Healthy People 2020 grants, 31 unique AAP chapters have received financial support for programs close to home. Each year, $100,000 in FCF donations goes to chapters to help with local initiatives.

Most recently, the FCF provided $100,000 in funding to support Community Access to Child Health (CATCH) Grants. This FCF support helps achieve the CATCH mission of supporting pediatricians to collaborate within their communities so that all children have access to needed health services and a medical home. This funding will provide support for 25 grants to pediatricians and residents across the US and Canada.

At the AAP NCE, we encourage you to stop by the Philanthropy Booth and make a donation to help important programs such as these continue. This year you can again find out how to increase the donations being made by our cause marketing supporters by visiting Johnson & Johnson, Pfizer Consumer Healthcare/Infants Advil, and Procter & Gamble/Pampers at their booths!
On June 17, the AAP hosted the Symposium on Child Health, Resilience & Toxic Stress. The Symposium brought together a significant number of national thought leaders, federal government agencies and officials, foundations, organizations, and AAP leaders to discuss the science of early childhood adversity and to forge consensus on the need for enhanced federal policies and funding to address the issue of toxic stress. Throughout the day, participants heard from numerous experts in the field including Dr. Jack Shonkoff and Dr. Andy Garner as well as leaders in various federal agencies such as Mark Greenberg, JD, Acting Assistant Secretary of the Administration for Children and Families. Representative Katherine Clark (D-MA) concluded the day-long event, speaking to participants about the role congress can play to prevent toxic stress and support resilience.

At the Symposium, AAP President Dr. James M. Perrin and AAP Past President Robert W. Block announced AAP’s future plans to launch the Center on Healthy, Resilient Children. A group of AAP leaders including Chairs of various AAP Committees, Councils and Sections, Board Members, and the AAP Executive Committee participated in an internal stakeholder meeting for a half-day prior to the Symposium to help inform the work of the developing new Center.

All materials related to the Symposium are available on the event Web site at www.aap.org/DCSymposium. These include: the recorded Webcast of the event, which can be searched and viewed by panel; the speaker’s presentations and participants’ list; the ongoing press coverage of the event, including an article from The Atlantic entitled “How Supportive Parenting Protects the Brain;” a Raising America video featuring Symposium speakers and invitees describing the business case for undertaking work to reduce toxic stress; and supplemental information, including the AAP’s Policy Statement and Technical Report on toxic stress and other helpful resources. The Department of Federal Affairs is working to build upon the momentum generated through the Symposium in advancing a toxic stress-informed federal policy agenda. For more information, contact Jamie Poslosky, Director, Division of Advocacy Communications at jposlosky@aap.org.

Digital Navigator

Is your practice aiming for Medical Home recognition under the 2011 NCQA Standards before the March 31, 2015 deadline? Are you unsure whether you want to become formally recognized, but interested in beginning the journey towards becoming a patient-centered organization? Either way, the AAP Digital Navigator can provide a framework for any practice that seeks guidance as they transform to a Patient-Centered Medical Home. The Digital Navigator is a web-based software tool that provides over 400 resources to aid practices as they go through the Medical Home implementation process. These resources include sample policies and policy templates, interactive reports, forms, journal articles, and other samples from Level III-recognized NCQA practices, all aligned with the 2011 NCQA Standards.

The Digital Navigator is self-paced and team-based, where both practicing physicians and office staff work together to achieve the practice’s desired goals. Once a team is established, a designated administrator will perform a baseline practice assessment that will help define the practice’s needs and show exactly where they stand in the Medical Home transformation process. Following the assessment, the administrator will take the work to be completed and delegate the tasks appropriately amongst the team. The Navigator will take this information, build a detailed plan for the practice, and they are on their way.

Available as both a single site and multi-site license, the Digital Navigator can help practices of all sizes become high-performing practices under the Medical Home model of care. For more information visit http://digitalnavigator.aap.org or to set up a demonstration of the Digital Navigator contactDNSales@aap.org or call 847-434-7010.
PEDIATRICS IS A TWO GENERATION PRACTICE.

It’s been conclusively determined by a 15 year body of research. Toxic Stress is detrimental to brain architecture, disrupting the developing brain, and damaging lifelong health. For your patients, this means, as adults, they’re more likely to experience not just depression, drug abuse, and alcoholism—but diabetes, cancer, and heart, lung, and liver disease, among other major health problems. More often than not, your patients’ parents are living examples of this.

Yet, there is also significant evidence that certain treatments can reverse the neurological and psychological effects of toxic stress. But first, you need to know what to look for. Enter Adverse Childhood Experiences (ACES). ACEs have served as a critical measure of the lifelong impact of toxic stress. Remarkably, ACEs scores have a proven dose-response relationship with the onset of adult illness.

You have both the science and the solution to make a significant, unprecedented, lifelong impact on your patients—and their parents. The kind of impact we’ve all dreamed of making.

To learn what you can do to identify and reduce toxic stress, visit aap.org/theresilienceproject

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Community Access to Child Health (CATCH™)

Call for Proposals—Submissions due January 30, 2015

The CATCH Program is seeking grant applications for innovative community-based projects to improve access to health services for children who are most likely to experience barriers. Eligible initiatives reach out to the community at large. Chapter officers are eligible to apply.

Up to $10,000 will be awarded to pediatricians and fellowship trainees and $2,000 to pediatric residents to work collaboratively with local community partners to ensure that all children have access to medical homes or access to specific health services not otherwise available.


Examples of Recent Topics
- Bullying Prevention
- Children of Incarcerated Parents Health
- Continuity of Care for Youth in the Juvenile Justice System
- Gun Violence
- Immunizations
- LGBTQ Youth
- Military Children’s Health
- Refugee/Immigrant Health
- Teenage Pregnancy & Parenting
- Youth in Group Homes Health

To see what others are doing with their CATCH grants, visit the Community Pediatrics grants database at http://www2.aap.org/commpeds/grantsdatabase. You can search by several categories, including health topic and AAP grant program.

Resources to Help Promote CATCH in Your Chapter
For promotional materials and help with promoting CATCH in your chapter, contact Kathy Kocvara, CATCH Grants Coordinator, at kkocvara@aap.org or 847-434-7632. Supported, in part, by the Magic Pebble Foundation, and Pfizer, Inc.

Support the AAP Residency Scholarship Program
Through the $100,000 Friends of Children Fund Challenge

We are pleased to acknowledge that McNeil Consumer Healthcare, makers of Children’s Tylenol, has supported the AAP Residency Scholarship Program to aid pediatric residents in great financial need for 25 years. In celebration of this anniversary, we hope you’ll consider making a donation to the program in increments of $25, $250, $2,500 (donations in any amount are appreciated) at www.aap.org/donate or by stopping by the Philanthropy Booth at NCE and designating your gift to Residency Scholarships). Children’s Tylenol has challenged us again to match their $100,000 to the program. If you are already a donor, THANK YOU for your commitment! And thank you to Children’s Tylenol for their long-term commitment and dedication to children everywhere.
Beware Well-Intended Cytomegalovirus Legislation
William M. McDonnell, MD, JD
Chair, AAP Committee on Medical Liability and Risk Management

New Cytomegalovirus Law

There is an oft-cited aphorism that “the road to hell is paved with good intentions,” which comes to mind after recent legislation regarding congenital cytomegalovirus syndrome. Traditionally, regulation of the practice of medicine in the United States has been left to members of the profession itself. In the dynamic field of medicine, clinicians, researchers, and other scientists are best-positioned to determine what medical practice standards are appropriate, and when those standards should change in light of evolving scientific knowledge. When clinicians fail to provide care consistent with these practice standards, medical malpractice liability may be imposed.

A recent law enacted by the Utah Legislature (H.B. 81, now codified at U.C.A. §26-10-10) took a different approach, and if duplicated in other states, may threaten physicians’ abilities to practice medicine in a manner consistent with the best available science.

Backstory

In 2013, State Representative Ronda Menlove introduced H.B. 81 after her 19-month old granddaughter was discovered to have hearing loss, thought to be attributable to congenital CMV. Declaring that “very few professionals understand cytomegalovirus,” and that “CMV transmission is easily prevented,” Rep. Menlove introduced H.B. 81, ostensibly to prevent CMV-related hearing loss and other complications via her self-described “groundbreaking legislation.”

Unfortunately, Rep. Menlove rejected Utah AAP Chapter attempts to educate her about the science related to congenital CMV. Her legislative initiative garnered tremendous popular praise, with numerous media articles lauding Rep. Menlove’s efforts to protect children. The legislator stated that her bill was inspired by an ongoing research project led by a local pediatric otolaryngologist exploring potential benefits of valganciclovir for patients with congenital CMV. H.B. 81 passed unanimously in the Utah House and Senate.

Implications of the Law

H.B. 81 now requires pediatricians to test for CMV, before 21 days of age, any child who twice fails the newborn hearing screen. In addition, the pediatrician is required to inform the parents about congenital CMV, and discuss “available methods of treatment.” Although the specific “methods of treatment” are not specified in the law itself, the legislative history and subsequent educational materials developed by the Utah Department of Health specifically mention antiviral therapy in general, and treatment with valganciclovir in particular. After H.B. 81, any Utah pediatrician who fails to offer antiviral therapy to a child with CMV-related hearing loss will almost certainly face substantial liability risks, regardless of current or developing scientific evidence. Many Utah pediatricians have observed that they “resent being pushed into this off-label use of valganciclovir.”

CMV Laws in Other States

Discussion about the CMV law has now extended to other states. For example, similar bills are pending in Illinois and Connecticut. There is no question that children should be protected by good science and good clinical care. However, delegating medical practice standards to legislatures, no matter how well-intentioned, presents significant problems.
Not only must pediatricians be aware of the legal restrictions on their practices, but they should also proactively lend their voices and their expertise to legislative debates before these laws are enacted.

Additional Background from the AAP Division of State Government Affairs*:
The Illinois bill requires that newborns who fail a newborn hearing screen (on a first test, rather than a second test as in Utah) be tested for CMV before the newborn is 21 days of age, and provide parents information regarding birth defects caused by congenital CMV and available methods of treatment. The bill also directs the department of health to adopt rules to implement the requirement. A Connecticut bill introduced this year also requires CMV screening following a failed newborn hearing screen. It requires screening within a period of time that is medically appropriate, and doesn’t mandate follow-up; instead, the bill directs the department of health to conduct public education about the link between CMV and infant hearing loss.* This article initially appeared in the Spring 2014 Section on Infectious Diseases Newsletter. Since that time, the Illinois and Connecticut bills failed to pass. However, this issue may reappear in these and other states in the 2015 state legislative sessions. For more information or assistance on this issue, contact Ian Van Dinther in the AAP Division of State Government Affairs at 847.434.7092 or at ivandinther@aap.org.

Florida Pediatric Medical Home Demonstration Project Participant on Path to Become Sarasota’s First Patient-Centered Medical Home

The American Academy of Pediatrics (AAP) is a key partner with the Agency for Health Care Administration and the Florida Department of Health in the Florida Child Health Insurance Program Reauthorization Act (CHIPRA) quality demonstration grant. CHIPRA funding is being used to strengthen medical homes’ capacity to provide high quality, family-centered care for children and youth with special health care needs throughout Florida. The project focuses on quality improvement in practices and is being administered and implemented via the AAP Division of Children with Special Needs.

The University of Florida Institute for Child Health Policy is conducting an overall evaluation for the initiative. Weiss Pediatric Care, in Sarasota, Florida, is one of 14 pediatric primary care practices participating in the AAP Florida Pediatric Medical Home Demonstration Project funded by the Children’s Health Insurance Program Reauthorization Act of 2009. The project, initially launched in 2010 with 20 pediatric primary care practices, utilizes a quality improvement approach to provide physicians and staff strategies, tools, and resources necessary to transform their practices into patient-centered medical homes, with a focus on children with special health care needs. Weiss Pediatric Care is participating in the second round of the project, which launched in August 2013.

During the past year, Weiss Pediatric Care, and the other participating practices, has incorporated daily huddles into their morning routines to improve communication among team members; established a tracking system for patients referred to specialists in order to better coordinate care; has enhanced patient access to care by expanding their office hours and has incorporated pre-visit questionnaires for families to complete to ensure patient concerns are communicated and then addressed.

In regards to eliciting feedback from families, Dr Weiss states, “Before we even see the patients, we ask them to complete a questionnaire addressing developmental and behavioral issues, and general concerns parents may have before the doctor even comes into the room. This checklist helps us maximize the communication opportunity with the family. When they leave, we review the information on the discharge summaries with the parents.”

To read further about Weiss Pediatric Care’s practice transformation and the Florida Pediatric Medical Home Demonstration Project, visit the Tampa Bay Medical News. For more information, contact Christina Boothby, Program Manager, Division of Children with Special Needs at cboothby@aap.org.
Adolescent Vaccinations and Wellness Grant Program for Chapters
Request for Proposals

W e are very pleased to announce that Merck has provided a chapter block grant to the AAP to support chapters in establishing strategies to remind adolescents about receiving immunizations, to track patient’s immunization data, and to educate adolescents about the safety and importance of adolescent vaccines. This will be achieved through chapter level projects and programs designed to accomplish these goals and ultimately to improve adolescent immunization rates in their communities. The AAP will use these funds to award up to $21,250 to 6 chapters. All proposals will be reviewed by the Adolescent Vaccinations and Wellness Grant Program Review Committee which is composed of members of the District Vice Chairpersons Committee.

AAP chapters were notified that the AAP and the Centers for Disease Control and Prevention (CDC) partnered to offer AAP chapters an opportunity to promote the importance of human papilloma virus (HPV) vaccination in adolescents. The chapter block grant supported by Merck provides another unique opportunity for chapters to continue efforts in regard to adolescent vaccinations and wellness.

If your chapter is interested in applying, an application for funding must be submitted by the pediatrician and/or executive director who is initiating and coordinating the proposed Adolescent Vaccinations and Wellness Educational program or conference. All applications can be e-mailed, faxed or mailed to Hope Hurley, Manager, Chapter Programs, by Wednesday, October 15, 2014. No late submissions will be considered. The chapter, as well as the primary contact will be notified of the award in writing.

If you have additional questions or comments or would like an application, please feel free to contact Hope Hurley, Manager, Chapter Programs at 800/433-9016, ext. 4752 or by e-mail at hhurley@aap.org.


W e are pleased to announce the availability of the updated 2014-2015 Chapter Manual! The manual is intended to assist you with the various duties and responsibilities required of you to effectively manage your chapter. It also provides information on chapter governance, tax-exempt status considerations, legal and incorporation issues, and much more!

The Chapter Manual has a new look - the Table of Contents has been consolidated (see attached) and the manual is electronically linked throughout to be more user-friendly and interactive. Updated materials on financial management, tax-exempt information, and human resource information (to name a few) have been added. We would like to extend our thanks and appreciation to the members of the Chapter Executive Directors’ Steering Committee for their input regarding the new format and content for the Chapter Manual!

Due to the manual’s length and to be environmentally conscious, it will only be available electronically. The manual can be accessed directly online at: http://www.aap.org/en-us/my-aap/Documents/chapters_districts_chapter_manual.pdf. It can also be found by visiting “My AAP”, click on “Chapters and Districts” on the left hand side, then “Manual/Guides”, and then “Chapter Manual.” If you have any questions regarding the Chapter Manual, please contact Hope Hurley, Manager, Chapter Programs at 847-434-4752 or via e-mail at hhurley@aap.org.
Business Case: Improving Mental Health in Primary Care

The American Academy of Pediatrics (AAP) Private Payer Advocacy Advisory Committee (PPAAC) worked with the Mental Health Leadership Work Group (MHLWG) to develop a business case for improving mental health services in primary care. As payers look to design benefit plans within the scope of the Affordable Care Act and the Mental Health Parity and Addiction Equity Act, this document will be a timely resource to advocate for benefits coverage and payment for mental health services in the primary care setting.

The business case recommends steps payers can take toward increasing access to mental healthcare for children and adolescents through improved support of mental health services in the primary care and specialty settings and improving coordination of services between primary care and mental health care systems.

Examples of health plan policy changes that carriers are urged to implement include:

- Provide benefits coverage and payment for mental health services including those provided by pediatricians. Also, expand the number of mental health visits with a provisional diagnosis (or diagnoses) that can be paid under the health plan.
- Establish parity between medical services and mental health services in benefit plan design.
- Expand and align provider network and empanel pediatricians as part of the mental health provider network.
- Provide appropriate payment and ensure that key primary care clinicians and mental health professionals (eg, licensed clinical psychologists and social workers, and nurses with specialized psychiatric training) are eligible to receive payment for assessment and treatment services.
- Support integrated models of care within the family-and-patient centered medical home.
- Incentivizing a standard of mental health practice that requires exchange of information between mental health professionals and primary care clinicians including non-face to face care, team-delivered care and team meetings.

Adoption of these strategies by payers and health plans will enhance the value of member benefits coverage and increase access to necessary and effective mental health services.

The business case has been sent to the largest national carriers and benefit plan consultant groups to encourage benefit coverage and payment for mental health services by pediatricians. AAP chapters, pediatric councils and members are encouraged to access and use the documents in discussions with payers in your state. These documents can be used with other resources (talking points, PowerPoint templates) developed by the AAP to advance advocacy for expanded coverage and payment for pediatric mental health. Please see the Mental Health resources at http://www.aap.org/en-us/professional-resources/practice-support/financing-and-payment/Pages/Private/AAP-Chapter-Pediatric-Council-Shared-Resources.aspx

For additional information please contact, Louis A. Terranova, MHA, Senior Health Policy Analyst, AAP Department of Practice at ltteranova@aap.org or 847/434-7633.
SOYP District VIII Member Spotlight
Meghan Treitz, MD, FAAP
SOYP Member since June 17, 2011

Q. Who are you?
A. I am a general academic pediatrician and Assistant Professor of Pediatrics at the University of Colorado / Children's Hospital Colorado. Most of my scholarly work is in the realm of medical education. I am the Director of the Pediatric Resident Advocacy Rotation and Assistant Clerkship Director for Pediatrics at the University of Colorado.

Q. How did you get involved in the AAP?
A. As a resident, I joined the AAP and Colorado chapter, thanks to my residency program and the Colorado chapter who paid our dues. Upon completion of residency, I began creating an advocacy training program for our pediatric residents and thus became the liaison between the chapter and pediatric residents. Soon thereafter I was elected to the Board and then became Colorado’s representative to the Section on Young Physicians. Soon I was also on the chapter Legislative Committee. Currently I am the chapter Secretary/Treasurer.

Q. What is your favorite book?
A. As an avid reader (I read at least one book per week) I have many favorite books, including The Count of Monte Cristo (Dumas), Bleak House (Dickens), Alexander and the Terrible, Horrible, Very Bad Day (Voigt), Rebecca (deMaurier), Anne of Green Gables (Montgomery), and The Westing Game (Raskin).

Q. What is your favorite developmental milestone?
A. Who doesn’t love the social SMILE at the 2 month well child check? It warms the hearts of parents, staff, and pediatricians alike!

As a Reach Out and Read Medical Champion, I enjoy teaching residents about development around books and literacy -- from the 6 month old baby who learns about the board book by putting it in his mouth, to the 12 month old who starts pointing to pictures, to the 3-4 year old who "reads" the story she has heard again and again.

I also enjoy having kids engage in the Draw-a-Person exercise. I love to see the development from early pictures with arms coming out of the head to the mature pictures that include every detail – from eyebrows to dimples to fingers and shoelaces.

Q. What advice do you have for other young physicians?
A. Become involved in your Chapter AAP! Once you get to know people in your chapter, you suddenly have a pediatric home that is larger than your institution or office. The enthusiasm is contagious and the opportunities are endless.
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Visit www.aap.org/livecme or call 866/THE-AAP1 (866/843-2271) for more information.
The Chapter Executive Directors’ Steering Committee held its annual meeting at the Academy’s offices on August 14–15, 2014. The purpose of the committee (comprised of seven experienced executive directors) is to share and discuss challenges, concerns, and ways to improve communications and collaboration in order to build a stronger relationship among executive directors, chapters, and the national AAP.

During the 2014 EDSC meeting, discussion items with AAP staff included the chapter annual report template, State Government Affairs resources, young physician initiatives, group membership and the Web-based Chapter Membership System (Web-CMS).

The committee also reviewed the slate of upcoming open positions, the governance guidelines, the new ED welcome phone calls, the annual publication choice, and the EDSC column in Chapter Connections. A significant amount of time was devoted to planning the content for the 2015 Chapter Executive Directors’ (ED) Conference.

Errol Alden, MD, FAAP, the Academy’s Executive Director/CEO joined the EDSC for lunch on the second day of the meeting.

Current EDSC Members are as follows:

- Linda Lee, Chairperson, Alabama Chapter Executive Director
- Melissa Arnold, Vice Chairperson, Ohio Chapter Executive Director
- Nancy Adams, Immediate Past Chairperson, New York 1 Chapter Executive Director
- Sherry Iverson, Committee Member, Idaho Chapter Executive Director
- Aimee Olinghouse, Committee Member, Arkansas Chapter Executive Director
- Ashley Politz, Committee Member, Louisiana Chapter Executive Director
- Stephanie Winters, Committee Member, Vermont Chapter Executive Director
Chapter Connections is a quarterly publication that shares pertinent news from the national office, innovative chapter programs, and timely association management topics with chapter officers and staff. Comments and suggestions are always welcome and can be sent to:
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You can also call 800/433-9016, extension 4752, or e-mail hhurley@aap.org