DAY ONE, October 23, 2019

Welcome & Introductions  Dr. Debra Boyer

CoPS Update  Dr. Debra Boyer

- 28 different subspecialties
- 8 Organizations
- Mission, Vision and Values from CoPS website
- Reviewed current Executive Committee
- Future Meetings:
  o Monday, March 30, 2020
    1:30pm – 5:15pm
    San Diego, CA
    In conjunction with APPD
- Elections
  o Call will go out in November/December, finalized in January/February – Term starts at March Meeting.
  o Not more than one spot for each subspecialty

Women in Subspecialties / ALF Resolution Updates – Drs. Christiane Dammann & Mel Heyman

- Resolution #64 passed - Promoting Women in Leadership in Pediatrics
  o Academy agrees to support endeavors until equality is achieved.
  o 1st Conference call has happened, looking for more ways to get together, train the trainer, career events, etc.
- 2020 Annual Leadership Forum on Paid Parental Leave –
  o 2nd conference call being planned – please let them know if you’d like to participate
- ALF Resolution accepted:
  o Paid parental leave for 12 weeks and mother/baby friendly workplaces
  o Women in Pediatric Subspecialties Task Force working to increase women leadership training
  o Would like one from each Subspecialty; if interested, contact Christiane Dammann
  o Include the 8 member organizations in this work
  o We will distribute once it is finalized and send it all out for a vote.
- Behavioral Mental Health Initiative – Mel
  o Didn’t make the top 10, but was acted on:
    ▪ See resolutions on slide
    ▪ Response from the Board: See slide
- AAP will be publishing a policy statement and will revise the toolkit.

The American Board of Pediatrics Roadmap Initiative – Dr. Carole Lannon

- Policy statement and technical report from ABP came out Monday
- Pediatricians lack training in emotional and behavioral health
- 65% of pediatricians lacked mental health training
- ABP really highlighted this:
  (good physical healthcare, no mental healthcare for emotional issues from parents)
  o Emotional health is tied to outcomes; 2 x as likely to have a mental health issue if chronic condition
  o To change outcomes, we need to do 3 things:
    ▪ raise awareness and build will for change
    ▪ share what works (education)
    ▪ execute (strategies for improvement)
  o Roadmap article coming out in Pediatrics soon
  o Many groups working on this including: APPD, CHA and AMSPDC
  o Change package developed: with 6 drivers needed to promote health and wellbeing of children with chronic conditions
  o Scripts and example conversations developed with 2-3-minute videos being developed for training
    ▪ Pilot learning collaborative for the next 9-28 months
  o Developing MOC Part 2 module; plan to develop a part 4 module
  o You don’t have to be a mental health professional to make a difference
  o Begin conversations about resilience and emotional health early
    ▪ Promote regular self-care
    ▪ Use ongoing surveillance as well as screening at specific ages to help at risk
    ▪ Most parents are not in crisis; need acknowledgement and validation
  o Working to develop specifics on business case issues of reimbursement
  o Some places train Social Workers to provide mental health care; 200 hours of training; some positions at Phoenix Children’s are supported by philanthropy
  o Challenges of physician productivity and issues around other initiatives that physicians need to address make people afraid to ask the question “How are you doing?”
  o Need virtual learning platform; simulation training
  o Post-critical care syndrome- some places have created post ICU clinics
  o Presented at ABP sub-boards this past year with lots of feedback re: barriers
  o Working to develop additional resources

Pay Discrepancies in Pediatric Subspecialties – Dr. Debra Boyer

- Medscape Compensation Report – Peds are at the bottom. By gender, male $240K, female $193K
- By Gender early and midyear, Women earned 76% of Men.
- New paper in Pediatrics found 6% lower pay ($8000 annually) for women even after accounting for a number of factors (AAP PLACES study-373 subspecialists)
- Women are underpaid in both private practice and academics
- Advocating for the value of children rather than adults – peds subspecialists are under-valued in compensation overall.
- Suggestion for a video or webinar for fellows around the data or negotiation
- Women do more teaching and mentoring which is associated with less support
- What is your institution structure and is it equitable; what do you do to ensure that it is equitable?
- Sponsorship and equitable development is also very important
- The question was asked about whether CoPS should have an action committee on this?

AAP Advocacy Update – Mr. James Baumberger

- Medicare/Medicaid – 70 cents on the dollar. Medicaid is heavily children.
- Primary care pediatricians reporting shortages in pediatric subspecialties
- CHA surveys hospitals on average wait times
- People with higher debt are more likely to go into private practice than subspecialty
- Loan repayment programs do not meet need and do not help subspecialties; title VII was approved but never funded-part of ACA in 2010-Ped Subsp loan repayment program-expired 9/30/14
  - New opportunity for funding outside of ACA context; congress working on reauthorizing EMPOWER for Health Act-passed in committee and awaiting floor vote in house (H.R. 2781)
  - Senate-Investment In Tomorrow pediatric health care act-needs to be included in senate’s title VII reauthorization bill (S. 2443)
  - Call your senator to ask their support for this bill; also click on AAP website
  - 1 million fewer kids enrolled in CHIP this year; 425,000 fewer insured children
  - Cuts in outreach and enrollment and increased eligibility/verification red tape
- Working to improve medical care at the border
- E-cigarette and vaping; more than 50 deaths now
- Gun violence
  - CDC has not had funding in 20 years to do meaningful gun violence research
  - Working with house and senate to get 50 million divided between NIH and CDC
  - Working to get universal background checks
- Children’s hospital medical education program-free standing children’s hospitals
  - Must ask and advocate congress on a yearly basis
  - CMS only provides about half of what’s needed for CHGME
  - How many states participate in the upper payment limit?-Most states do not participate because they have to fund. Most states are $0.7 on the dollar compared to Medicare and some states are much worse
- New opportunity
  - Subspecialty Advocacy Day - October 10, 2019
  - Coverage for Children
  - Trends are reversing

**Length of Fellowship Training – Dr. Suzanne Woods**

- NRMP Pediatrics match data 2668 to 2847 increase over 5 years (not growing well)
- Decrease in US med school grads going into Peds; slight increase in IMG and bigger increase in osteopath
- 58% go into Gen Peds or something else, but not fellowship; 30% go into fellowship straight out of residency
- ABP data newly out; trends in first year fellow numbers across subs
- Interactive ABP website to find discrepancy between match numbers and actual first year fellows starting
- ABP will consider modifications to training duration, but must meet these:
  - Subspecialty must petition ABP to modify training
  - Must use competency assessment framework that must be used (e.g. EPAs)
  - Must be a measurement to assess outcomes of training
- Why are training programs & positions increasing despite being under filled?
- Concerns re: research and training pathways with shortened training
- What are the data on EPAs and level of competence at the end of year 2 vs year 3?
- What is data to show that changing duration of training will increase recruitment in a given subspecialty?
- What is the possible impact on funding if training duration is shortened and what if individual needs/wants to extend one year.
- Redesign of residency- Emphasis on behavioral and mental health on every rotation; earlier and better exposure to subs; more ambulatory training
- How you present your profession to junior learners matters
- Article in JAMA on mentoring millennials
- EPAC studies-education in pediatrics across the continuum
- ABP is working with SHEP center for workforce modeling at UNC
Workforce Updates – Dr. Debra Boyer

- Updates on the action teams
  - Survey Action Team –
    - General workforce survey-new survey will be available soon; AAP revamping the general questions. Will be posted on CoPS website.
    - There are sections on:
      - Early Exposure
      - Length of training
      - Recruiting and sustaining fellows in research
      - Virtual Workforce Network
      - Subspecialty updates

- Virtual pediatric workforce network-improve research and advocacy; collaborative projects

- Various subspecialty updates:
  - ASPHO is collecting annual data on workforce by surveying PDs on employment of graduates; CoPS requested to get a copy of their redcap survey!
  - PES developed a committee on workforce
  - GI working on workforce and burnout survey & include division directors
  - Cardiology planning next workforce survey
  - Adolescent medicine-concern regarding diluting pool by adding new programs
  - Pulmonary-developing white paper for pipeline, training and future of pulmonary
  - APPD-Chief resident new section with an exec committee, mentoring program for URM
  - AMSPDC very interested in defining what is an FTE-could PIDS work with them?
  - PEDS ID just formed a division director group to determine “What defines a clinical FTE”?

- Have each sub look at their own data on ABP website
- Gary Freed commentary in Pediatrics on challenges in workforce surveys

Finding workforce data – Dr. Tandy Aye

- Dr. Aye gave an update on a summary of workforce data she has put together for Pediatric Endocrinology
- For program directors there is an enormous amount of workforce data available from the ABP and NRMP
- Putting together the data can help:
  - Potential survey development
  - Understand the workforce issue
  - Help prioritize and/or define the issue
- Peds Endo filled 65 out of the 96 positions offered by 64 programs
- 75% are matched to first choice
- What are the trends?
  - We need to think about foreign trained applicants, post-match spot
  - Dissemination of the correct data is important
  - Discuss as a society of your own subspecialty’s data
- Can COPS sponsor a webinar or post on the website on how to get this data for your subspecialty?
- APPD is developing some resources by March 2020
Reporting out from Breakout Sessions:

Emotional Health and Resilience – Dr. Carole Lannon

- CoPS should disseminate information, heighten awareness of importance of patient emotional health and resilience across peds subs
  - Communities have to develop specific resources, but there are some national resources, will add that info to CoPS website

- CoPS could consider:
  - Pilot a Mental Health EPA- take the residency EPA and tweak a little for fellows and pilot, maybe in SPIN and partner with ABP
  - Survey PDs about what the barriers are, to putting mental health curriculum into their fellowships

- Develop/host a webinar on this topic, with other partners (ABP, others) Next Steps:
  - Work with Carole Lannon and ABP to plan Spring webinar
  - Schedule a call of interested parties to further discuss surveying fellowship PDs, possibly through SPIN

Early Exposure Action Team – Dr. Mary Moffatt

- Observation: web and institutional activities are balanced, but societies are more resident based.
- Next: survey will be refined and edited.
  - Adding questions about checking efforts and outcomes; if people were convinced to apply for a fellowship or if they were already going to apply.
  - Discerning why they pick one subspecialty over others.

Questions / Discussion

- What resources do medical student go to? Is it just the exposure in residency? Is it mentorship?
- We need to come up with ways to expose students to specialties – career centers, shadowing, Advocacy, etc.
  - Summer programs, career talks/days, interested groups, close mentoring, extensive exposure, social events, research opportunities, social events, undergrad and even high school
  - Training programs at annual meetings, travel grants, free membership, etc.
  - Shadowing, podcasts and other subsp. Resource access, advocacy group talks to medical students
  - First couple of years of medical school is key-shadowing program can help

Pay Discrepancies – Dr. Angie Myers

i. Peds vs. adult
ii. Gender
iii. Subspecialty based
iv. Pay a tax to do a pediatric subspecialty-CoPS could voice concern
v. Part of issue could be RVUs-who defines what an RVU is worth?
  I. How do we change the landscape of what an RVU is worth?
  II. How do we find out who is on the RVU committee?
  III. What are our RVUs compared to our adult counterpart?
  IV. We need to advocate for higher RVUs as patients become more complex
V. Chronic condition index
VI. How much is an RVU worth as a pediatrician vs internist vs radiologist vs surgeon?
VII. What some subs do support the other subs that make the RVUs-helping subs bring more money in
VIII. Started by deciding to set up value of an RVU based on what an insurance company would pay-not really what they should be worth
IX. One thing CoPS could do is a better job in educating Peds subs in finances; advocate for our subs to make sure we are healthy in future
X. Need to speak language to have seat at table; need to understand how the system works
XI. Need transparency in how pediatric sides of things go; finance 101; how coding works, etc.
XII. CoPS should advocate and publicize the AAAP benchmarks; advocate to AAAP to make it available and get gender data too
XIII. CoPS could consider doing a salary survey?
XIV. Are internal medicine physicians expected to see more patients?
XV. Make sure that RVUs are same across board for Peds vs adults subspecialties
XVI. EPA on practice management-CoPS to develop content or find resources that can be available for that EPA to better teach our trainees to better understand what an RVU is, etc. Needs structure and curriculum (RVU, practice management, compensation)
XVII. Consider a position statement by CoPS that RVUs should not be the only way in which compensation is determined; other aspects that are critical to running a tertiary children’s hospital- health economist to help with this
XVIII. Supply and demand are mismatched
XIX. Academic centers are often inefficient; well-oiled machine in private practice
XX. Advocate that our RVUs should count for more because kids are more complex, we interact with whole family
XXI. The outcome is transparency of salaries
XXII. AMSPDC cares very deeply and wants to do what’s right; but they have many pressures from Deans and CEO’s

Physician Scientist Training and Beyond – Drs. Mel Heyman and John Barnard

- Developing 3 surveys: department chairs, physician scientist faculty, FPDs
- Protected time in fellowship 12 mos clinical study more
- Work with ACGME around program requirements
- White paper being submitted for publication

New item

- Academic General Peds Fellows are wondering how to find jobs – can we help them?
  o How can we be more transparent about those jobs when they come up?
  o The EC will continue to talk about this.
  o Fellow to Faculty Boot Camp - Fellow to Faculty Transition
DAY TWO, October 24, 2019

Liaison Presentations

APA – Dr. Teri Turner

- New in 2019-2020
  - Advancing Pediatric Leaders
    - 18-month program for mid-career faculty; professional coaching, F2F & online learning, networking
    - Deadline Dec. 2
  - Expansion of Advancing Pediatric Educator Excellence (APEX) Teaching Program
    - 2-year program focused on teaching and mentoring
    - New track at PAS-open to gen Peds and subs in addition to PHM track
    - Deadline November 15

- Medical Education Journal Club
  - Quarterly web-based discussion on latest med-ed pubs
  - Focus on study methodology & outcomes
  - Next is 12/3/19 1 CST

- National Academy for Distinguished Pediatric Educators
  - Honorary service academy
  - Deadline 1/9/20
  - Elected to 3-year term; 20 hrs. of service per year
  - Will meet annually at PAS; 5/3/20
  - Working with national academies collaborative through AAMC
  - Initially full professor status; scholarly productivity & national contributions
  - Educational excellence in 4/5 domains
  - Reviewed by National Academies Collaborative

- Scholarship Programs
  - Educational Scholars Program (ESP)
  - Health Policy Scholars Program (HPS)
  - Recruiting program directors
  - Recruiting scholars for next year
  - Quality and Safety Improvement Scholars Program (QSIS)
  - Research Scholars Program (RSP)

- Fellows’ conference at PAS
  - Focused on academic development

AMSPDC – Drs. Mitchell Cohen and John Barnard

- Dr. Cohen: Education Committee

  - Recent webinars:
    - How chairs can meet their educational mission
    - Gender intelligence
    - ABP roadmap
- Dr. Barnard: Clinical Care Committee
  - Virtual pediatric workforce network; quarterly phone calls;
  - ABP foundation and UNC Sheps workforce center; start in November and run for 2 ½ yrs.
  - Addressing gaps in pediatric scientist development
  - Phase I: cFTE initiative; AAAP and AMSPDC met together Mar 2019; develop a glossary of terms; monthly calls, define typical work conditions: consults, inpatient, outpatients, call, procedures (picking Endocrine first)
  - Phase II: fine-grain survey data of each subspecialty? (AAAP wants to do this part)

APPD – Drs. Rebecca Blankenberg and Jennifer Duncan
- Curriculum development for mental health; wellness
- Focus on URM pipeline with 2 projects; AIM and physician scientists
  - Considering international membership
  - LEAPES- Leadership empowerment for advancing pediatric education specialists
    iv. Coordinators, managers, administrators; active engagement for 3 years
    v. Mirrors LEAD program
  - Spring meeting 3/30-4/2 in San Diego, CA
    ▪ Workshops due 12/4
    ▪ Abstracts due 1/10
- FPD Exec: considering a mentoring program for FPDs, considering new studies
  - Role of Vice Chairs of Education and Super Fellowship Directors
  - FPD wellness
  - Funding sources for fellowship
- Collaborations with SPIN, CoPS, ABP, AMSPDC, APPD LEARN

ABP – Dr. Suzanne Woods
- Reworking Vision, Mission and Guiding Principles
- Updated ABP Professionalism Guide
  - Release to Training Programs
- New interactive data
- Subspecialty Tracking and Verification Form (Online Tracking Portal)
  ▪ rollout to subs 10/15
  ▪ SITE opens on 11/1—can check the online portal to see if registered; must go through portal and clear any red flags
  ▪ enter new trainees after match
  ▪ non-final evaluations spring 2020
  ▪ final evaluations spring 2021
  - Send communications through portal with attachments as needed
  - Form is going to change and may get rid of paragraphs on the final evaluation
- Electronically submit the SOC documents & collect signatures electronically
- Scholarly activity; most people meet the requirements; website details requirements
- May request a waiver of up to 2 months in addition to the 1 month per year; contact ABP no earlier than the final 3 months in order to deem competent; only waive scholarly or elective time
- Hospital medicine; 1,627 applications for grandfather, practice pathway exams 2019, 2021, 2023, exam eligibility requirements, petition of alleged gender bias
- MOCA Peds live for CHAB, GAST, IDIS, Gen Peds
- Please reach out early for professionalism issues, good info on website

COMSEP - Drs. Joe Gigante and Susan Bannister
- Membership comprised of 500 pediatric educators; most US and Canadian Schools
- Affiliate of AMSPDC and then became its own organization 5 years ago
- Initially a clerkship director group; but now throughout the 4 years of medical school
- Many go on to leadership roles: VCE and Deans
- 3 standing committees; awards and nominations, grants, & annual meeting; multiple collaboratives to foster innovation, creativity, and engagement
- Also have action teams; defined work for a period of time supported by COMSEP
- Curriculum revision action team-what every med student needs to know about pediatrics
- Monthly feature in Pediatrics; pilot project with APDP LEARN
- Annual survey that people can add their research questions to in order to decrease survey fatigue
- Professional development: coaching & leadership programs under development, on-boarding of leaders being developed

APS - Dr. Matt Davis
- Issue of the year is workforce in pediatric subs to promote research careers
- Might be coming back to membership in CoPS
- Partnering with AAP and others to study what is going on with research in Peds subs and how to better support research
- Dr. Davis distributed a one-page document outlining the 5-year strategic plan “Charting the Future and Ensuring Member Value”

EXECUTIVE REPORTS

Membership – Dr. Tandy Aye
- Expanding our Membership
  - Who else should be members of CoPS?
    - Nurse Practitioners
    - Physician Assistants
    - Palliative care
    - Medical Genetics
    - Sports Medicine
    - Different states have different policies
    - Child Psychology? (Even as a guest?)
    - Child Psychology return?
    - NAPNAP? (Even as a guest?)
  - Maybe other groups should attend as needed as a guest, but not necessarily join as a member
    - Allows them to be present and involved in discussion
- Attempting to add in CHA, APS/SPR, NIH, NICHD
- CoPS is always looking to consider new members

Budget (Available in Presentation)
- $11,000 in red due to spending on new website
- $40,000 in savings
- Maybe we could charge for job posting to provide more income to remain financially stable – suggested by Dr. John Barnard

FOPO Update on the 2020 Census – Ms. Laura Degnon
- FOPO 7 peds member organizations: AAP, APA, APPD, AMSPDC, APS, ABP, SPR
- Started about 20 years ago to implement the FOPE II recommendations
- Currently focused on the 2020 census. Article one, section 2
  - US census is the largest peace time mobilization; in US constitution; every decade
  - In 2010, 2 million children were not counted; some double counted, but a net missing 1 million; 10% of children under 5 years of age
  - Census determines congressional representation; helps to determine allocation of federal funding of 800 billion annually; including Medicaid, CHIP, SNAP, head start, foster care, Title I funding
  - Respondent information is strictly confidential; does not go to ICE
- April 1, 2020, education pamphlets will be available for Peds offices etc.
- FOPO is partnering with the census to get their children counted
- $800 Billion dollars not funded in
  - Medicaid
  - SNAP
  - School Lunch Programs
- FOPO working with Annie Casey Foundation to:
  - Participate in Focus groups
  - Regional meetings
  - Panels
- How pediatricians can help
  - Distribute Census Information
  - Get information out to patients’ family
  - Your trusted voice will help families understand the need to fill out census properly
  - Set up computer terminal in hospital to help people register online-staffed by residents and faculty especially for Spanish speakers-Mitch Cohen at UAB
- Launch is April 30, 2020 (first time online)
  - Videos for doctor’s offices, etc.
  - Get the kid’s counted
- Deb asked Laura to write something for the Council newsletter.
- FOPO is putting together a one-pager with specific asks

Website Review – Dr. Jill Fussell
- We welcome more committee members, and web-savvy members!
- We have moved the website to a new platform recently.
- Feborah has the list to make additional changes
  - Please send Feborah requests for changes.
- Committees and Action Team can be moved to its own tab.
- Fortify Action Teams and Transition Teams Sections
- Confirm spelling and links to drop town.
- Council was asked to update sections now and forward them to Degnon for website revision
- Council members were given time to update their Specialty Specific descriptions

Milestone Project – Drs. Mel Heyman & Debra Boyer

- Process:
  - Review of Pediatric Milestones in progress by the ACGME
    - Sharing Google documents with edits
  - Starting with updating the General Pediatrics Milestones
  - Meeting held in August 2019
  - Next meetings early Feb and late Mar 2020
  - Pediatric Sub Milestones to be tackled after completing General Pediatrics Milestones. This will again be put to the subspecialties to decide if they still want to use the gen peds milestones or develop their own subspecialty specific milestones.

Transition Committee Update – Dr. Lisa Imundo

Current projects:

- Serving as a library of different subspecialty and disease specific materials / tools for transition and quality assessment.
- Introducing information on novel models of transition across multiple subspecialties examples are institutional coordination and emergence of free-standing transition clinics, i.e. all patients are moved to a dedicated transition care team at age 16.
- Address the complexity of transitioning of the intellectually disabled patient in a subspecialty clinic.
- When to transfer complex care patients
- Reaching out to adult colleagues to engage and take on these patients
- Inclusion of adolescents in adult clinical trials-FDA plans to roll out as a guidance
- Improving partnerships and communication with our adult colleagues and assisting in the development of expertise and educational materials that will enhance the care of our pediatric subspecialty patients as they become adults.
- Need for dedicated person to help implement these best practices
- Asking for committee members who are interested in participating in this group

Fellowship Start Dates – Dr. Debra Boyer

- APPD Start Date
  - 40% did not delay.
  - Reactions from others who did not delay
    - I didn’t know
    - Institution would not allow the change
    - Concerned that trainees could not have a gap in income, visa issues, insurance, etc., home institutions have refused

Subspecialty Pediatrics Investigator Network (SPIN) – Dr. Angie Myers (Please see slides for results of first 2 studies)

- Consider showing the slides to your PD’s and your subspecialty society PD committee or other
  - There have been 3 studies completed to date
• The 1st was Assessing the Association between EPAs, Competencies, and Milestones: included 1,000 fellows over 2 time points, 208 programs programs across 80 institutions participated
• The 2nd was Determining the Minimum Level of Supervision Required for Graduating Fellows
  o 82% response rate
• The 3rd looked at whether or not FPDs use residency milestones for the 1st year fellows in in their fellowship
  o 68% response rate

The 4th study is Determining the Validity Evidence for Subspecialty EPA Level of Supervision Scales

• Primary Objective: Obtain validity evidence for the subspecialty specific and scholarship EPA scales
  o Longitudinal over 3 years; started fall 2018
  o MOC part 4 credit; 25 points for every 3 cycles (up to 50 points for the study)
  o Still enrolling programs; If you are interested please contact Marzia Hazara (marzia.hazara@labiomed.org)

The 5th study is an implementation study

• Primary Objective: To identify the facilitators and barriers to using EPAs to assess pediatric fellows
  o Mixed methods with structures interviews of EPA users and Non-users from all Subsp.
  o Survey of all FPDs in fall 2020

New Business – Dr. Debra Boyer

Possible action items –
- How to help fellows job search; CoPS to host job listings for a small fee?
- Consider new action teams; advocacy, gender equity/paid parental leave
- Develop a webinar series on resilience and emotional health; job search/salaries
- AAAP come to next fall CoPS meeting
- AMSPDC webinars available to CoPS members on their website

Wrap – Up - Dr. Debra Boyer

Next Face to Face Meeting:

The CoPS Spring meeting will take place in conjunction with the APPD meeting in San Diego, CA (March 30- April 2, 2020). Exact day/time of the CoPS meeting is Monday, March 30, 2020 from 1:30pm-5:15pm.