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Advocating for Kids

April – National Child Abuse Prevention Month

April is National Child Abuse Prevention month. The pinwheel is the national symbol for this month, and represents what we want for all children, a happy, healthy and carefree childhood. What could you do in your practice to celebrate this month – decorate your office with pinwheels, wear blue every Tuesday? Please check out the Idaho Children's Trust Fund website below to locate events in your community and around the state. https://idahochildrenstrustfund.org/childabusepreventionmonth/

AAP Advocacy Conference

The first week of March, **nearly 400 pediatricians** from 44 states, DC and Puerto Rico went to Capitol Hill and met with more than 260 congressional offices to **urge Congress not to cut Medicaid** as part of AAP's advocacy conference. The energy of that group of pediatricians was a real force, and I hope you'll consider joining us in DC next year if you haven't been before (Save the date! April 12 – 14, 2026). It's a meaningful experience to be part of, whether it's your first or tenth time attending.

Three of our Idaho chapter members, Drs. Tom Patterson, Joe Wilcomb and Gracie Strubel attended this conference, and we have included their reflections on the following page.

Advocating for Kids (cont.)

AAP Advocacy Conference (cont.)

<u>From Dr. Joe Wilbanks:</u> I highly recommend the AAP Advocacy Conference. It was my first time going and my first foray into federal advocacy. I left feeling charged and inspired despite some difficult meetings with our state's legislative offices. There were some great speakers with great pearls of wisdom that have stuck with me:

- Lawmakers are generalists that rely on others for pros/cons of policy. We are experts in child health and need to be their voice. People trust their physician more than any other when it comes to a health issue: 85% in a KFF poll (Jan 2025).
- Stories are the root of advocacy. I will begin collecting patient stories to help as I reach out to policymakers. They are more persuasive and memorable than statistics.
- Personalized calls/emails are much more effective than form letters that we are often asked to send. One
 former senator noted that his office only needed five personalized contacts from constituents before
 taking the response seriously.

Lastly, significant Medicaid cuts are going to harm our patients and their families. It is not too late to reach out to our senators and representatives to ask them to not cut Medicaid!

Thank you for the opportunity! It was a great experience.

<u>From Dr. Tom Patterson:</u> Having spent nine days in DC I saw division amongst community members around the capital while in the meeting and on vacation. The most impactful statement I heard was from Paul Wise who stated, "advocacy requires imagination". I love this as it integrates well with the current climate and advocacy challenges. "Facts will never set you free" was another impactful statement that highlights the Academy's move to impactful story telling rather than data.

Having been to DC to advocate now 4 times over my career I have seen my time preparing, moving away from studying facts to short advocacy statements that relate the impact on the ones we care for! I was responding to a mass email advocacy request during the meeting and, based on a legislator saying, "85 of the same letters do not count!", I edited significantly at the beginning and end and left only the major impact statement, added a story and sent it. This took advantage of some efficiency of a form letter while following the Academy's move to storytelling. It will count rather than be disregarded as a form letter. AAP now has a digital advocacy guide: , https://www.aap.org/en/advocacy/?srsltid=AfmBOoohmZjVe96 NolwbqPA88d9Ao0jxB6Y3Zq8dH8Hd03ZG1IMuidU.

We all need to come together and advocate during this tough time. Thank you for the opportunity to serve!

<u>From Dr. Gracie Strubel:</u> I found the conference to be helpful in so many ways. Being around like-minded people who have similar goals - keeping children safe and healthy, felt refreshing and validating especially in the setting of threats of Medicaid defunding. As a young pediatrician, it was motivating to see other seasoned pediatricians at the conference and hearing their advocacy wins as well as the stories of perseverance and resilience when things didn't turn out as they had hoped. Advocacy is a huge part of why I felt drawn to pediatrics in the first place, so I was grateful for the opportunity to attend this conference and further that passion for advocacy.

Spotlight on a Member

Pinwheel Award - Dr. Susan Bradford

The Idaho Children's Trust Fund presented Dr. Susan Bradford with the Pinwheel Award. On behalf of the Idaho Chapter of the AAP, we submitted Susan's name to receive the "Pinwheel Award". Susan retired last year after an amazing career as a pediatrician in the state of Idaho. Child abuse prevention has always been a passionate issue for Susan, starting in Pocatello in setting up a collaborative child abuse task force for that region. Susan has served on the State's Child's Mortality and Morbidity Review Team since the development of this program. Her pediatric insight and experience have been key in reviewing cases and developing educational recommendations to reduce child abuse and raise awareness. Susan has served as faculty for both the family practice residents and, for the last two years, the pediatric residents. Children in the state of Idaho have been safer under Susan's watchful eye; working on prevention and education. We congratulate Susan on this recognition of her past and continuing efforts.

Open Positions

There are several open positions we would like you to consider. The Idaho chapter is looking for an immunization champion and a breastfeeding champion. We are also needing to fill the position of Secretary Treasury for July 1, 2026 – June 30, 2027. Please contact Sherry Iverson at <a href="mailto:sherry-leasury-to-sherry-leasury-to-sherry-leasury-to-sherry-leasury-to-sherry

Spotlight on a Member (cont.)

Open Positions (cont.)

National AAP is looking for a pediatrician AAP PROS Coordinator from Idaho. Below is a summary of the position and we have attached PROS Coordinator "job description."

Interested in Pediatric Primary Care Research?

Join primary care pediatricians from across the country and be part of national studies on timely topics!

This includes an expense-paid trip to AAP Headquarters (Chicago) once a year to give feedback on studies!

- In 1986, the American Academy of Pediatrics (AAP) founded a national pediatric primary care practice-based research network, Pediatric Research in Office Settings (PROS).
- The work of AAP PROS is inherently tied to real-world experiences through the involvement of AAP PROS
 Coordinators who review proposed PROS study protocols—assessing them for "do-ability" in busy,
 community-based practices.

We are seeking AAP PROS Coordinators from Idaho.

- To be an AAP PROS Coordinator, you do not need any prior research experience.
- Time commitment: AAP PROS Coordinators are <u>volunteers</u> and select from various opportunities based on interests and as their time permits—from participating in study focus groups/interviews/surveys to joining an office-based AAP PROS study to helping to recruit patients/families to studies.

Are you a Board-Certified <u>primary care</u> pediatrician who sees patients in <u>private outpatient practice</u> (<u>not</u> in a hospital/academic center clinic) interested in offering your perspectives on the feasibility and science of proposed PROS studies?

Contact Everly Macario, ScD, Director of Primary Care Research, AAP, emacario@aap.org

AAP PROS Coordinators say they enjoy the camaraderie and intellectual stimulation serving this role. Become part of this meaningful experience!

Upcoming Educational Opportunities/Meetings/Events

St. Luke's Pediatric Emergency Conference

Save the Date for 2025!

The Pediatric Emergency Conference is excited to present two immersive education days designed for medical professionals dedicated to advancing their expertise in pediatric emergency care.

This year's conference, hosted in person at Shore Lodge in McCall, Idaho, on Thursday and Friday, October 9th and 10th, will address both pediatric trauma and medical emergencies in the emergent care setting.

Our mission is to enhance provider confidence and skill in treating acutely ill children, ensuring the highest standard of care for the communities we serve. Over these two days, attendees will benefit from presentations by experts in pediatric emergency medicine, hands-on training, and realistic simulations. Join us for an engaging experience that will empower and equip providers in this critical field.

Here is the link for additional information: Home - St. Luke's Pediatric Emergency Conference 2025

Upcoming Educational Opportunities/Meetings/Events (cont.)

Child Welfare Learning Collaborative

We are excited to invite you to participate in the 2025 Child Welfare Policy and Pediatric Learning Collaborative, an exceptional opportunity to expand your child welfare policy knowledge and skills engaging policymakers while earning **25 Maintenance of Certification (MOC) Part 4 points**.

Program Overview

The AAP Child Welfare Policy and Pediatric Learning Collaborative has been honed over the past four years into a unique experience that brings together a community of pediatricians who are passionate about making a positive impact on child welfare policy. The curriculum is made up of nine sessions grouped into three modules that aim to equip pediatricians like you with the necessary tools and expertise to engage policymakers effectively at the national, state, and local levels.

Curriculum Overview

Each module comprises courses designed to enhance your understanding of child welfare policy and strengthen your policymaker education abilities. You will have the opportunity to learn from national experts in the field, participate in interactive sessions, and gain practical skills through hands-on activities.

Here are some key highlights of the Learning Collaborative MOC Program:

- Knowledge Expansion: Deepen your understanding of child welfare policy foundations and core skills in policymaker education.
- 2. Policymaker Engagement Skills Development: Learn effective communication strategies, including writing op-eds, delivering testimony, and engaging with policymakers.
- 3. Partnership Building: Discover the power of collaborations and learn how to strategically partner with other organizations and experts in the field, including individuals with lived experience in the child welfare system.
- 4. Continuous Learning: Assess your progress and knowledge through knowledge tests, providing valuable feedback and insights for ongoing improvement.
- 5. <u>MOC Credit</u>: Earn 25 Maintenance of Certification Part 4 (QI) points, recognizing your dedication to professional improvement and expertise in child welfare policy.

Dates and Times: These sessions will take place on the following dates and times, and **your participation is required for virtual sessions** to earn MOC points.

- 1. April 23rd at 11am-1pm ET Session 1A
- 2. May 28th at 11-12pm ET Session 1B
- 3. June 25th at 11am-1pm ET Session 1C & 1D
- 4. July 23rd at 11-12pm ET Session 2A
- 5. August 27th at 11-12pm ET Session 2B
- 6. September 24th at 11-12pm ET Session 2C
- 7. October 22nd at 11-12pm ET Session 3A
- 8. November 19th at 11-12pm ET Session 3B

What's in it for you: By joining the Learning Collaborative MOC Program, you will become part of a community of pediatricians who share your passion for making a difference in child welfare policy. The program offers an excellent platform for networking, knowledge exchange, and collective action.

How to join: Please fill out this <u>FORM</u> or email Ella Mathews (<u>EMathews@aap.org</u>) if you are interested in joining this program. Spaces are limited, so we encourage you to secure your spot soon.

Who can join: The program is open to all pediatricians committed to enhancing their child welfare policy knowledge and advocacy skills.

If you have any questions or require further information, please do not hesitate to reach out to our team.

Upcoming Educational Opportunities/Meetings/Events (cont.)



From Extreme Heat to Fire:

Disparate Effects Through
the Arc of Human Health

DATE

FRI-SAT: MAY 9-10, 2025



DISTRICT VIII
Alaska
Arizona
Colorado
Hawaii
Idaho
Montana
Nevada
New Mexico
Oregon
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Washington
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This virtual summit will share the state of research, education, and advocacy at the intersections of environmental health and its effects on children, families, and communities throughout the arc of life. This meeting is hosted by AAP National and AAP DVIII Chapters.

Registration is complementary for all healthcare providers, educators, public servants and community partners. Scan the QR code to begin!



bit.ly/4bnlbEj

Register Here

Registration Now Open for the Idaho Perinatal Quality Collaborative (IDPQC) Annual Summit

Join the Maternal and Child Health Program of the Idaho Department of Health and Welfare, and Comagine Health for the annual IDPQC Summit this May. This free summit is open to anyone actively engaged with the IDPQC, and anyone interested in future engagement or implementation of other maternal quality improvement efforts.



Summit topics will include:

- The State of the State: Maternal Health in Idaho
- Updates on Implementing the AIM Severe Hypertension in Pregnancy Patient Safety Bundle
- Workshop on hospital policy implementation

Attendance is free.

Date: Friday, May 30, 2025

Location:

- Boise State University
- · Virtual attendance is also available



Upcoming Educational Opportunities/Meetings/Events (cont.)

Liver Disease Series CME

In response to the American Academy of Pediatrics (AAP) release of the clinical report, Identifying Infants with Biliary Atresia by 2-4 Weeks of Life: Guidance for the Primary Care Practitioner, the Academy is launching an "Ask the Expert" knowledgeseries tailored for primary care members this spring. Idaho Chapter of the AAP members are invited to attend.

Knowledge experts from the AAP Section on Gastroenterology, Hepatology, and Nutrition (SOGHN) released the clinical report in mid-February and plan to participate in the knowledge series.

"This clinical report is for like-minded practitioners committed to eliminating uneven care and health disparities in diagnosing and treating children with liver disease," said Sanjiv "Sonny" Harpavat, MD, PhD, FAAP, lead author of the report. "The goal of this work – creating the clinical report and "Ask the Expert Sessions" – provides primary care pediatricians with the appropriate confidence to know what to look for to make better referrals."

The compact series, which begins in May and spans three months, allows AAP chapter members to log in, listen to the report review and case study, and ask questions. Each 20-minute session will be held virtually on Tuesdays from 12:30 to 1 p.m. CT, May 13, June 17, and July 15. Register for an "Ask the Expert" session here: https://bit.ly/41tHTY8

For more information about the knowledge series, contact Alison Powers, Manager, District & District & Programs, at apowers@aap.org.

CLPPP Projects (Childhood Lead Poisoning Prevention Program) Information

The Department of Health and Welfare's (DHW) Childhood Lead Poisoning Prevention Program (CLPPP) has several projects that may be of interest to you including a project to provide point of care blood lead testing devices to medical providers and a provider survey to help identify barriers to blood lead testing. I have provided additional information below about each project.

- 1. LeadCare II Analyzer Project. The CLPPP seeks to reduce childhood lead exposure in Idaho through various activities including strengthening pediatric blood lead testing and reporting. One major barrier identified by medical providers to increase blood lead testing is accessibility to equipment. To address this barrier, the CLPPP purchased a limited number of LeadCare II analyzers in October 2024. The LeadCare II analyzers are point of care testing devices that can be easily used during an office visit to test a person's blood lead level. The CLPPP is offering the LeadCare II analyzers at no cost for medical providers who meet certain criteria and enter into a data sharing agreement with the DHW's Division of Public Health. To receiving additional information about the LeadCare II analyzer, contact Kelly Berg at 208-608-2847 or Kelly.berg@dhw.idaho.gov.
- 2. Pediatric Provider Survey. The Boise State University College of Health Sciences, in collaboration with the Idaho CLPPP, is conducting a survey of health care providers including medical doctors, osteopathic doctors, physician assistants, or nurse practitioners who work with children regarding lead screening and testing in Idaho. This anonymous survey of Idaho Primary Care Providers is intended to help us learn more about the current knowledge of lead screening/testing practices in the state as well as identifying challenges that providers may encounter. Participation in the survey should take 15-20 minutes and each eligible participant will receive a \$15 Amazon gift card for participating. The survey will run from March 5 April 10, 2025. The survey can be accessed via the QR code below.



UCare Training



UCARE TRAINING PROGRAM

CHILD ABUSE RECOGNITION & EVALUATION



REGISTER NOW

https://redcap.link/uucare

Are you an IH affiliate or within an IH service area?



Visit the registration page for a special offer.

WHO

Trainees: Healthcare providers who want more training in recognition of, evaluation

for, and multidisciplinary response to children presenting with potential child abuse.

Trainers: University of Utah Child Abuse Pediatricians from Intermountain Health Primary Children's Center for Safe and Healthy Families.

WHAT

UCARE is a novel training experience that uses online training sessions, including

cases, discussions, and scientific literature, to build a knowledge base about common forms of child abuse. Participants will also be trained in simple, evidence-based screening for and response to symptoms of traumatic stress and suicidality in children and adolescents who have experienced abuse and other adversities. After completion of the online sessions, the entire cohort will come together for a 3-day, in-person CAPSTONE Intensive that will include experiential learning working with standardized patients and a day of mock court with real attorneys and judges. Trainees also will receive training on photo documentation of injuries. Finally, the UCARE cohort will be mentored in monthly case reviews with the intention to develop a sustainable peer-to-peer professional support extending beyond the formal training program.

WHERE

Zoom for online training sessions (real time attendance preferred; recordings will be

available for unavoidable conflicts) and in Salt Lake City, Utah, for the 3-day CAPSTONE.

WHEN

First Session: April 23, 12:00-1:00 PM MST

Zoom sessions will occur every 3 weeks on Wednesdays at 12:00 PM MST. Monthly mentored case reviews will be developed and held separately with at least one faculty at each session. CAPSTONE: November 5-7 in Salt Lake City, Utah



Schedule available at https://medicine. utah.edu/pediatrics/safe-healthy/ucare

WHY

Child abuse is a common problem, and frontline providers must know how to recognize

and manage these cases effectively. Child abuse pediatricians generally are only available at large academic medical centers, yet most child abuse cases don't require tertiary care. Helping providers in rural and underserved communities feel more confident in the diagnosis and management of the potentially abused child is important for the health, safety, and well-being of the children that they see in their day-to-day practice. This training program is intended to build that confidence and provide ongoing peer consultation and review for providers.

HOW

Healthcare providers who see pediatric patients will receive 30 hours of CME for participation

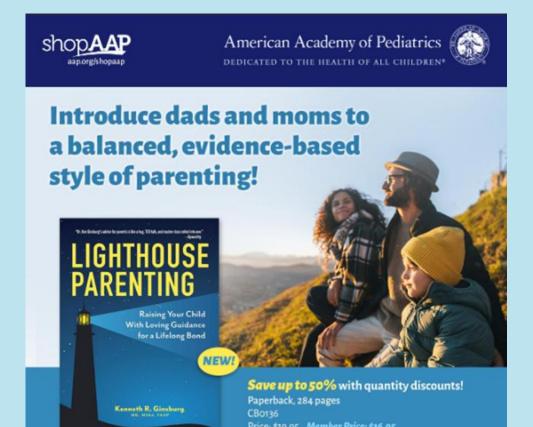
in the full course (MOC Part 2 Credit is also available for pediatricians). After completion of the training program, ongoing peer support by the child abuse pediatricians at the Center for Safe and Healthy Families at Primary Children's is available to support providers seeing patients with concerns for child maltreatment.

 OUESTIONS | Kali Scott • kali.scott@hsc.utah.edu Antoinette Laskey • toni.laskey@hsc.utah.edu MD, MPH, MBA, FAAP





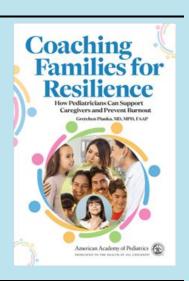
Books



Dr. Ken Ginsburg, a leading adolescent health expert, offers an evidence-based parenting action plan that lays the foundation for the kind of relationship in which parents will be welcomed as a guide in childhood, throughout adolescence, and beyond. This balanced approach is intended to help children have greater academic success, higher levels of emotional well-being, increased resilience, fewer behavioral risks, and reduced emotional distress. And, ultimately, following Lighthouse Parenting helps to build emotionally healthy children and adolescents who are more likely to develop deep, enduring relationships with their parents for their entire lifetime.

Support families and rediscover joy in practice

In a new book, Gretchen A. Pianka, M.D., M.P.H., FAAP, shares a trauma-informed approach to care that can help address some of the most pressing issues facing families and pediatricians. *Coaching Families for Resilience* presents a structured program that practitioners can offer within the framework of primary care office visits. It is designed to teach parents and kids skills and techniques to begin addressing trauma, toxic stress, and behavioral and mental health issues immediately. Click here to learn more and order.



Keeping Idaho Kids Safe

Idaho's Child Fatality Review Team

As a pediatrician who serves on the Child Fatality Review Team (CFRT), I would like to introduce you this team — who they are and what they do: CFRT is a multi-disciplinary team that has been in existence in Idaho since 2013 and reviews child deaths occurring in Idaho to children under age 18 in order to identify what information and education may improve the health and safety of Idaho's children. We review deaths in the following categories: Suicides, homicides, sudden unexplained infant deaths, motor vehicle accidents and natural manner/medically related deaths (such as perinatal conditions, congenital malformations, malignancies, viral infections, cerebrovascular causes, etc). Team members include coroners, forensic pathologists, general and child abuse pediatricians, law enforcement, EMS, health and welfare, injury prevention, CASA, education, behavioral health.

The team is revamping its approach so as to present more timely reviews and to share results with interested communities more effectively. In particular, I often hear details of cases that cause me to change my practice or anticipatory guidance and feel it is important to share these with the pediatric community. I plan to do this via a short column in the AAP newsletter a few times each year along with a synopsis of recent reviews.

CFRT is considering a subcommittee approach to reviews and would need additional participation of both general and specialty pediatricians on an occasional basis. If you would be interested in participating or have questions about the process, please contact me (Susan Bradford) at bradsusa3@gmail.com.

For prior reviews, see www.idcartf.org.

-V. Susan Bradford, MD, Affiliate Faculty, Pediatric Residency of Idaho

Book Corner

I am Stuck by Julia Mills

This wise and humorous story reminds us that when we're feeling down, sometimes what we need most is a friend by our side—and a deep belly laugh—to help us get back on our feet again.

Robinson's New Thing by Julia Mills

Robinson the raccoon loves to collect things, but when he meets a new friend, he discovers that memories and experiences make for the best collection of all.