



The Forum

NEWSLETTER OF THE MASSACHUSETTS CHAPTER AMERICAN ACADEMY OF PEDIATRICS

PRESIDENT'S MESSAGE

Empowering MCAAP Committees — Expanding Our Leadership for Children

Over the past few years, the Chapter has moved from being a loosely-knit group of individuals, many of whom are leaders in their own right, to a relatively cohesive organization that is seen as offering expertise and leadership on most issues relating to children's health and well-being. People now come to us for advice and support for their initiatives for children.

Although the MCAAP does wield influence by being the local chapter of "the Academy," we have achieved particular respect within the state and have furthered the cause of children, primarily through the activities of our committees.

Currently, a central goal of this Chapter is to help all our committees grow, empowering them to achieve more and greater things for children.

In order to do this, we have to actively recruit the most thoughtful and effective people we can find. Many of them are pediatricians and specialists already working in their communities or medical centers; some are residents, fellows, and even medical students going into pediatrics because they care about these issues. Others are non-pediatricians who work in parallel with us in local committees or specialty societies across the state.

Many of our most productive committees are working closely with other pediatric, public health, and educational leaders across the state. We have partnered with professional, legislative and community groups, and

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Membership Matters

Patricia Moffatt, M.D.

It is vital that the value of MCAAP and AAP membership resonates to all practicing pediatricians.

Ongoing recruitment and active membership is crucial to the longevity, productivity, and livelihood of the MCAAP as well as the AAP.

"The louder the lion roars, the greater the chance the rest of the jungle will hear."

We Need All of You

Pediatricians devote their careers to the health and overall well-being of children and families. Becoming involved in state and national advocacy initiatives can maximize the level of care that each child receives in every practice. The larger the number of pediatricians involved in the local and national pediatric organizations, the louder is the combined voice of advocacy for children. *The louder the lion roars, the greater the chance the rest of the jungle will hear.* Our message is that you speak to your pediatric colleagues, and if they are not members of the MCAAP and/or AAP, please share this *Forum* with them and urge them to become involved.

The business aspects of delivering good care to children is becoming increasingly difficult and burdensome to pediatricians. Involvement in the MCAAP and AAP gives pediatricians a forum in which to present questions, observations, suggestions, and constructive criticism.

What Is Being Done on the Local and National Level?

There are many active committees both on the state and national level. The AAP has over 30 committees and 51 sections that, among many other activities, contribute to developing legislation as well as policy statements that members can easily access and use as guidance.

The MCAAP has over 25 committees/initiatives that actively advocate for

children on a wide variety of issues. The following is a list of the MCAAP committees along with a description of their activities and/or priorities and goals:

Committees

Committee on Adolescence addresses issues that affect teens and those who care for them. Recent efforts have focused on

emergency contraception, fertility control, insurance coverage for OTC acne medications, preparation of pediatricians to care for teens, and education for appropriate relationships between teens and pharmacists. Harris Faigel, M.D., Chair, hfaigel@mcaap.org

Committee on Breastfeeding works to promote breastfeeding via education, advocacy, and legislative efforts. Through the Massachusetts Breastfeeding Coalition (www.massbfc.org), the Committee provides statewide resource guides, lectures to hospital and office staff, community awards, and the organization of conferences for medical professionals. The Coalition has formed strong affiliations with the Department of Public Health (DPH) and Women, Infants, and Children (WIC) to further goals and provide families with the benefits of human milk. Susan Browne, M.D., Co-Chair, sbrowne@mcaap.org; Jean Sheeley, M.D., Co-Chair, jsheeley@mcaap.org

Committee on Bylaws submits revisions of chapter bylaws as the need arises. The Committee does not have regular meetings. The most recent bylaws revisions were effective July 2000. Carole Allen, M.D., Chair, callen@mcaap.org

Committee on Child Abuse and Family Violence has been involved in establishing Child Death Review Teams throughout the state. The Child Death Review bill was passed a few years ago. Recently, the

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Help Keep New Moms Healthy

Healthy Moms are Better Able to Care for Their Children

Danna Gaynor, R.N., B.S.N., M.M. in Health Care

MassHealth is committed to optimizing care for all of its members.

Healthy mothers are better able to care for their children. We would like to solicit your support in our efforts to improve the extent to which new mothers return to their OBs or nurse midwives for postpartum visits.

The National Committee for Quality Assurance (NCQA) developed the Health Plan Employer Data and Information Set (HEDIS) to standardize the measurement and reporting of health plan performance across a number of domains. The Division of Medical Assistance (DMA) uses a subset of HEDIS to assess the performance of the five health plans that provide health care services to MassHealth managed care members. Prenatal and postpartum care measures were collected and analyzed in the 2001 reporting year. The postpartum visit results were disappointing; the percentage of postpartum follow-up among MassHealth members is much lower than either the national or Massachusetts commercial means for 2001. The MassHealth weighted mean was 38.4%, the National Medicaid mean was 47.9%, and the Massachusetts commercial mean was 82.1%. In an effort to improve quality health care, the MassHealth Managed Care Plans have suggested and implemented a number of initiatives to improve postpartum care rates, including educating providers and new mothers about the importance of the four to six week postpartum visits. In evaluating

opportunities to educate the new moms, well-child or sick visits for the infant represent a point of contact with the mom that provides an opportunity to educate and remind her to go for this important visit.

It is with this in mind that we ask your help in reminding new moms to go for this important postpartum visit when they bring their baby in for a health care visit. Please help us help new moms and their babies!

Why is a postpartum visit four to six weeks after delivery important?¹

Physical Exam

- ★ Episiotomy repair and healing
- ★ Uterine involution
- ★ Breast exam
- ★ Pap smear, if needed
- ★ Evaluation of emotional status, psychosocial support, and adaptation to the new baby
- ★ Provide appropriate counseling or referral
- ★ Confirmation of rubella immunization (for nonimmune mothers)

Counseling for the Mother

- ★ Discussion about breastfeeding
- ★ Health promotion and preventive health measures
- ★ Resuming sexual activities
- ★ Family planning, birth control, and future pregnancies
- ★ Schedule for subsequent periodic exams
- ★ Plan to address health issues identified during pregnancy

¹Massachusetts Health Quality Partners, 2002 Prenatal Care Guidelines issued March 2002.

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MCAAP COMMITTEES & ADMINISTRATIVE APPOINTMENTS

AAP Breastfeeding Coordinators Susan Browne Jean Sheeley	Emergency Pediatric Services Patricia O'Malley	International Child Health Open	Nominating Committee Eugenia Marcus
Bylaws Committee Carole Allen	Environmental Hazards Open	Legislation Alan Meyers	Nutrition Open
CATCH Co-Coordinators David Keller Emily Roth	Fetus & Newborn Elizabeth Brown	Susan O'Brien	Pediatric Council Walter Harrison
Child Abuse & Family Violence Robert Nelken	Financial Committee Paul Schreiber	Massachusetts Health Families Howard King	Pediatric Practice Open
Committee on Adolescence Harris Faigel	Forum Editor David Chung	Membership Patricia Moffatt	PROS Network Coordinators Hank Bernstein Ben Scheindlin
Continuing Medical Education Lynda Young	Foster Care Robert Abrams	Mental Health Task Force Walter Harrison Eugenia Marcus	School Health Linda Grant
Developmental Disabilities Richard Antonelli	Immunization Initiative Sean Palfrey Hadassa Kubat	MMS Delegate/ House of Delegates Carole Allen	Substance Abuse Open
	Infectious Disease Sean Palfrey	MMS Interspecialty Committee Representatives Carole Allen Sean Palfrey	Technology David Norton William Adams
	Injury Prevention & Poison Control Paul Schreiber		

Massachusetts Medical Home Network Project

Supporting Physicians, Families, and Communities in Caring for Children with Special Health Care Needs

Beverly Nazarian, M.D.

Interested in improving your care of children with special health care needs? Confused about what resources are out there and how to access them? Wondering how you can make small changes in your practice to help this population? Have you heard the term "medical home" but wonder how it relates to your practice?

The Massachusetts Medical Home Network Project is a pilot project funded by the DPH with a goal of increasing the capacity of physicians to care for children with special health care needs (CSHCN).

This program will bring primary care physicians together with community and parent partners for case-based discussions of CSHCN using an organized curriculum. Sessions will include the following:

- ★ Introduction: Medical Home, CSHCN, and Family Centered Care
- ★ Community Resources and Care Coordination
- ★ Practice Change

This three-part program is planned to be a CME-supported activity. It is an exciting opportunity to take a look at your own practice and see how you can more opti-

mally and comprehensively care for these children and adolescents.

The first Medical Home Network group will take place in Central Massachusetts and will meet for its first session in early February at UMass Memorial Medical Center. The project will expand to three additional regions later this year.

If interested in participating in these discussion groups, or in facilitating a group, please contact Alexa Halberg at (617) 574-9493 or ahalberg@reserve.org.

Massachusetts Partnerships CATCH Some Funding

David Keller, M.D., and Emily Roth, M.D., Chapter CATCH co-facilitators

As *The Forum* goes to press, we are still waiting for the final word on a various proposals submitted last summer by various groups in Massachusetts for funding through the CATCH Planning Grant program. I would like to take this opportunity to highlight two programs that were funded last year and are currently being implemented around the state.

Creating Medical Homes in Massachusetts

Richard Antonelli, M.D., of Nashaway Pediatrics in Sterling partnered with the Massachusetts Society for the Prevention of Cruelty to Children (MSPCC) in Worcester to "plan the creation of a medical home model of care delivery for children with special health care needs (CSHCN) across five underserved and needy communities in Massachusetts. Community-based primary care pediatric practices will work collaboratively with the MSPCC and with families as advisors. [They] will assess the needs of each of the communities surveyed by [their] constituent practices, as well as develop protocols for evaluating all medical and nonmedical service needs of CSHCN, and design procedures for coordinating care within the medical home." The communities of Worcester, Lawrence, Holyoke, Cape Cod, and Attleboro/Taunton will participate in the effort.

Southbridge Access to Oral Health Pilot Project

Angela Beeler, M.D., of South County Pediatrics in Webster, was invited to join with Dewey Tiberri, D.M.D., a pediatric dentist from nearby Southbridge, and Jackie Cepeda of Youth Opportunities Upheld, Inc. of Worcester to establish a coalition to try to bring dental services to children on MassHealth in South Worcester County. "In many towns in South Worcester County, up to 50 percent of public school children are on Medicaid. It is difficult for them to get adequate dental care in the community. All of us —

physicians, dentists, and school nurses — see the effects of this in the sorrowful state of the teeth of our children," said Dr. Beeler. "I'm sure, as a coalition of health care providers and community organizations, we will be able to combine our resources and find new resources to address this issue."

For more information about next year's CATCH planning grant cycle, please monitor the AAP website (www.aap.org/visit/catchhome.htm) or e-mail us at dkeller@mcaap.org or eroth@mcaap.org.

'PARI' Nebulizer Program

We supply the pediatric physician's office with nebulizers to be dispensed to patients in need. This program is easy for the physician and easy for the patient. Call for details and references.

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Membership Matters

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Committee reorganized and is looking at ways to expand child abuse services more evenly in Massachusetts, so resources are not concentrated in just the major medical centers. State models are being studied in New Jersey, Florida, Pennsylvania, and Maine — all of which have very organized systems throughout their state. **Robert Nelken, M.D., Chair, rnelken@mcaap.org**

Committee on Continuing Medical Education (CME) is committed to providing the highest quality educational programs for MCAAP members. The MCAAP maintains certification to provide category 1 credits through the Massachusetts Medical Society. The Committee plans and provides three CME programs per year. Recently, the Chapter presented “Vaccines Under Fire.” The Committee is in the process of planning the Annual Meeting for early spring, which will include the “Dr. Edward Penn Memorial Lecture” and another educational program to be announced. The Committee would like to expand to include a more broad representation of members, such as residents and medical students, and to provide programs aimed at their interests (i.e., joining a practice or academic position, advocacy roles, and legislative issues). **Lynda Young, M.D., Chair, lyoung@mcaap.org**

Committee on Developmental Disabilities assists pediatricians and pediatricians-in-training in ensuring that all children with special health care needs (CSHCN) will have access to a medical home. Committee members are involved with developing training opportunities for medical students, pediatric residents, and practicing pediatricians endeavoring to learn more about the medical home model of care and implementation of quality improvement efforts. The Committee also works closely with the Massachusetts Consortium for CSHCN to identify barriers and solutions within the health care delivery system for CSHCN and their families. For a broad view of issues concerning the medical home in Massachusetts and nationally, visit www.medicalhomeinfo.org. Pediatric residents and fellows are most welcome to get involved. **Richard Antonelli, M.D., Chair, rantonelli@mcaap.org**

Committee on Emergency Pediatric Services (COPEM) is seeking members to join them as part of the Pediatric Resource

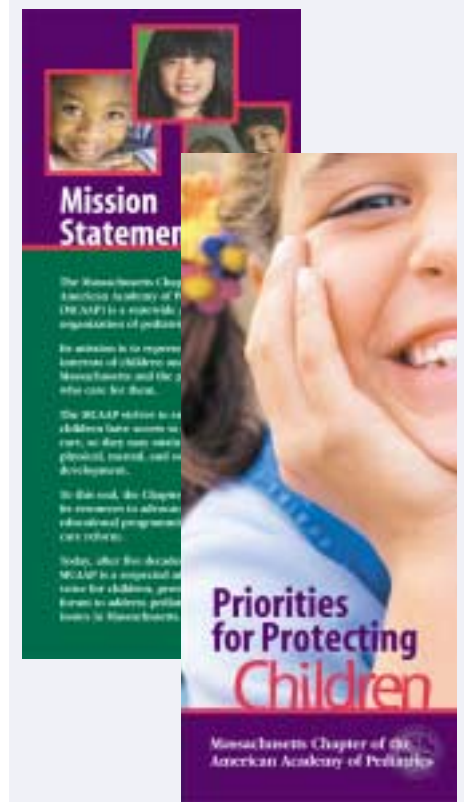
Group (PRG). The PRG is a standing subcommittee to the Medical Services Committee of the Massachusetts State Emergency Medical Services (EMS) Office and works closely with the state EMS for Children project. Recent COPEM/PRG activities have included the development of regulations regarding pediatric trauma care to implement the EMS 2000 legislation and distribution of a manual on primary care office readiness for pediatric emergencies. Members have participated in the AAP workshop “Fewer Emergencies, Better Outcomes,” presented at the October 2002 national AAP conference in Boston, and have attended the first statewide conference on newly formed state and local child fatality review boards. **Patricia O'Malley, M.D., Chair, pomalley@mcaap.org**

Committee on Environmental Hazards is seeking a chairperson and members.

Committee on Fetus and Newborn is seeking members and would like the MCAAP membership to suggest issues that they would like the Committee to address. Currently, the Committee is committed to early discharge issues, specifically the need for hyperbilirubinemia monitoring prior to discharge and appropriate follow-up. **Elizabeth Brown, M.D., ebrown@mcaap.org**

Committee on Finance is committed to the optimal management of the Chapter resources. **Paul Schreiber, M.D., Chair, pschreiber@mcaap.org**

Committee on Foster Care is committed to helping implement the following AAP March 2002 policy statement: “Greater numbers of infants and young children with increasingly complicated and serious physical, mental health, and developmental problems are being placed in foster care. All children in foster care need to receive initial health screenings and comprehensive assessments of their medical, mental, [and] dental health, and developmental status. Results of these assessments must be included in the court-approved social services plan and should be linked to the provision of individualized comprehensive care that is continuous and part of a medical home. Pediatricians have an important role in all aspects of the foster care.” This statement was released to ensure the execution of a 1998 Massachusetts Department of Social Services mandate that all children entering foster care have emergent and comprehensive examinations within a specific time frame. **Robert Abrams, M.D., Chair, rabrams@mcaap.org**



This past year, the MCAAP produced a membership identity piece that explained the Chapter's mission to support the establishment, implementation, and full funding of the following five priorities: (1) To assure continuity of primary care for all children in the state regardless of insurance type; (2) To assure quality care and services for children; (3) To eliminate known hazards in the homes, day cares, and schools of the children in the state (Domestic Violence, Smoking, Physical Abuse, Lead Poisoning, Sexual Abuse, Drug Abuse, Hand Guns, and Alcohol Abuse); (4) To assure medical, mental health, and dental insurance for all children in the state; and (5) To implement programs that will help eliminate both malnutrition (inadequate food for normal growth and development) and homelessness for children in the state.

Committee on Injury Prevention and Poison Control is committed to protecting children by creating a safer environment for them; major efforts have been mainly about passenger safety but have not been limited to this topic. **Paul Schreiber, M.D., Chair, pschreiber@mcaap.org**

Committee on International Child Health is seeking a chairperson and members.

Committee on Legislation works in collaboration with other AAP subcommittees and groups who are invested in children's

health. The goals of the Committee are to consider issues of importance to Massachusetts children that have been affected by legislative action (at local, state, and national levels); to research and to discuss such issues as they are brought to the attention of the Committee by its members, other Chapter members, and others; and to recommend appropriate actions to the Executive Committee after such study and discussion. Interested people are encouraged to attend and participate in Committee meetings. Alan Meyers, M.D., Co-Chair, ameyers@mcaap.org; Susan O'Brien, M.D., Co-Chair, sobrien@mcaap.org

Committee on Membership is committed to increasing membership with a specific emphasis on resident, student, and young physician recruitment. The MCAAP and AAP need the input of all to ensure an organization that has relevance to, and addresses the needs of, all pediatricians and children. Meetings are planned in an attempt to create a forum where questions, ideas, and criticisms can be explored, and the Committee has been actively involved in considering the issues facing women in the pediatric workforce. Additionally, the cost and inconvenience of recertification for practicing pediatricians continues to be on the front burner both locally and nationally. Pat Moffatt, M.D., Chair, pmoffatt@mcaap.org

Committee on Nutrition is seeking a chairperson and members.

Committee on Pediatric Practice is seeking a chairperson and members.

The School Health Committee has two primary functions. The first function is to be a resource for the 351 public school physicians in Massachusetts — 54% of whom are not pediatricians — and provide networking activities, didactic presentations, and legislative lobbying on areas of school health interest. The second function is to provide a forum for any pediatrician who has an interest in school health issues, whether they are school physicians or not. The priorities for next year are (1) to increase the networking opportunities for both school physicians and pediatricians interested in school health issues by conducting problem-solving seminars throughout the year in regional locations, (2) to lobby the Legislature to prevent cuts in school health funding, and (3) to continue development of the school physician website. Linda Grant, M.D., Chair, lgrant@mcaap.org

Committee on Substance Abuse is seeking chairperson and members.

Committee on Technology is committed to identifying and addressing the technological needs and interests of Chapter members. The Committee is working to make the Chapter website more useful to members by purchasing software that enables Chapter staff to easily and readily update the site. The Committee plans to offer printable online registration forms for MCAAP CME programs, as well as links to CME opportunities in the state and, hopefully, throughout New England. The Committee is also working with the Immunization Initiative to help develop the state immunization registry. We would welcome input and participation by pediatricians who have an interest and/or expertise in the use of technology for the pediatrician. David Norton, M.D., Co-Chair, dnorton@mcaap.org; Bill Adams, M.D., Co-Chair, badams@mcaap.org

INITIATIVES/ACTIVITIES

The Anti-Tobacco Advocacy Initiative works with the MCAAP legislative counsel and the Committee on Legislation to mon-

itor and influence legislation and activities pertinent to tobacco control, youth access, and “clean indoor air.” Specifically, the Chapter belongs to the Massachusetts Coalition for a Healthy Future, the foremost anti-tobacco organization in Massachusetts. Carole Allen, M.D., Chair, callen@mcaap.org

Community Access to Child Health (CATCH) is an AAP national program that provides a variety of support for pediatricians who want to work toward improving the health of children within their communities. Each Chapter appoints two CATCH facilitators to operationalize CATCH with the Chapter. The Massachusetts CATCH program focuses on training, CATCH planning grants, and technical support. The key to CATCH in Massachusetts is communication. E-mail your CATCH facilitator today to help to make your idea a reality. David Keller, M.D., CATCH co-facilitator, dkeller@mcaap.org, (508) 943-5224; Emily Roth, M.D., CATCH co-facilitator, eroth@mcaap.org

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What Are the Benefits of Joining the MCAAP?

MCAAP Benefits:

- ★ Chapter Newsletters (quarterly) — *The Forum* and *ShotClock*
- ★ Local PREP courses and CME meetings sponsored by the Chapter
- ★ Opportunity to advocate for children by serving on one or more of the Chapter's committees
- ★ Networking Opportunities

For more information, visit the MCAAP website at www.mcaap.org.

AAP Benefits:

- ★ Access to PedJobs.org — an online job database
- ★ CME courses now available online through *Pedialink*
- ★ Pediatric Review and Education Program (PREP) — A self-study CME program in general pediatrics that prepares pediatricians for the certification and renewal exam
- ★ Managed Care Resources, including managed care, practice management, and coding tools
- ★ Community Access to Child Health (CATCH) grants to assist pediatricians in using their own community's resources to lift barriers to child health care
- ★ Journals such as *Pediatrics* and *AAP News*, the *Red Book: Report of the Committee on Infectious Diseases*, and the *AAP Fellowship Directory*

Other benefits are detailed on the AAP website at www.aap.org.

How can potential members join?

If you would like further membership information and an application form, or if you are interested in serving on a committee, please contact the committee chair directly or Cathleen Haggerty at chaggerty@mcaap.org or by calling (781) 895-9852.

Membership Matters

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Children's Mental Health Task Force has led a coalition of HMOs, child psychiatrists, and various commissioners, legislators, employer groups, nurses, and groups from the education community in an effort to improve children's mental health in Massachusetts. The Committee has been successful in obtaining reimbursement for non face-to-face care, increasing payments for child psychiatrists, helping establish a Special Governor's Commission on Children's Mental Health, facilitating funding for the Parent Advocacy League from HMOs, and facilitating the creation of various local children's mental health programs. **Walter Harrison, M.D., Chair, wharrison@mcaap.org**

The Immunization Initiative continues to advocate for childhood immunizations and educate legislators and the general public about the importance of vaccines and vaccine safety. The Initiative sponsors about 15 grand rounds per year throughout Massachusetts and provides office tools that were developed to increase the awareness of immunization benefits (alert stickers, reminder/recall postcards, and resource kits). The program also publishes the *ShotClock*, a newsletter for Massachusetts providers who offer immunizations. **Sean Palfrey, M.D., Program Director, spalfrey@mcaap.org; Hadassa Kubat, DSc, MPH, Program Manager, hkubat@mcaap.org**

The Pediatric Council meets with the medical directors of the various health plans and the DMA and DPH to discuss a variety of issues that affect children and pediatricians. Items the Council has addressed over the years include coverage of spacers and peak flow meters, extra payment for evening hours, allowance for seeing children sooner than 12 calendar months, coding, coverage for vaccines, and documentation. **Walter Harrison, M.D., Chair, wharrison@mcaap.org**

Pediatric Research in Office Settings (PROS Network) is a national pediatric practice-based research network, with Massachusetts being the largest with 29 practices and 110 practitioners. Its mission is to improve the health of children by conducting collaborative practice-based research to enhance primary care practice. PROS is in the midst of several studies, including Life Around Newborn Discharge (LAND), Safety Check: A Randomized Controlled Trial to Prevent Child Violence, Child Abuse Recognition and Evaluation

Study (CARES), and Defining Patient Visits in PROS. Studies coming soon include the Healthy Lifestyles Study, Adolescent Smoking Cessation, Learning from Errors in Ambulatory Pediatrics, and Secondary Sexual Characteristics in Boys. PROS members choose which study they would like to participate in, and practitioners are always welcome to participate in manuscript writing for publication. For more information about PROS, visit the AAP website at www.aap.org/PROS. **Hank Bernstein, M.D., PROS Network Coordinator, hbernstein@mcaap.org; Ben Scheindlin, M.D., PROS Network Coordinator**

The Research Council is seeking a chairperson and members.

District 8 Representative **Michael Yogman, M.D.**, has succinctly and accurately summarized why membership is so important:

"The Massachusetts Chapter of the AAP needs all pediatricians — including specialists, academics, and primary care physicians — to join. In these lean economic times in the Commonwealth, the MCAAP is the only organization that can effectively advocate to preserve quality children's health services and to support providers in our efforts to deliver those services. Over the past few years, major efforts have been underway to support children's mental health services, access to care for uninsured children, and support for immunization administration, as well as to provide ongoing continuing education and monitoring of all proposed legislation affecting child health care. In spite of that, membership in the eighth district is surprisingly low. Please make every effort to encourage your colleagues to join the MCAAP."

The strength of the Academy comes from the active involvement of all of its members. ROAR!

President's Message

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our committees' leaders, in turn, are being appointed to statewide committees.

I would urge every committee (1) to recruit one or two residents and fellows to participate on your committee, (2) to invite non-pediatrician leaders you know who are working toward similar goals to participate on your committee, and (3) to partner groups you lead outside the MCAAP with our own committees' activities. Together, we can be even more effective than we have been individually.

The MCAAP can offer free meeting space, logistical support, and (limited) food for meetings. Through the Academy, the DPH, and other agencies, we have access to research and project funds. There are also reciprocal advantages — the approval of the Chapter for a proposal strengthens a group's application for many types of grants and having an affiliation with the Academy may help a group speak with added authority. On the other hand, partnering with other groups can increase our Chapter's visibility, our committees' effectiveness, and the effectiveness of the consortium as a whole.

If you are interested in participating at a national level on an AAP committee, or know a qualified colleague who might be, please contact us. We can help. Our region has provided the national AAP with many more committee members and chairpersons than other regions, in large part because of the richness of our academic communities, our networks, and the presence of active leaders in many fields. In these situations, membership and active participation at the state level is important in the nomination process, so if they have not linked their activities with ours, this would be a good time for them to do so. The benefits flow both ways.

Finally, I would like medical students, pediatric residents, and fellows to consider establishing their own committees/sections of the MCAAP. These committees can work on their own issues and can partner with existing local and national committees on a wide variety of initiatives.

Our strength is our extraordinary community, and the more we can work together, the more effectively we will be able to advocate for and improve the lot of children.

— John G. (Sean) Palfrey, M.D., FAAP

Web-Based Immunization Tracking Ready for Piloting

Bill Adams, M.D.

Most clinicians recognize the importance of computerizing their clinical care, but the vast majority of pediatric care centers today only have computer-based billing systems. The time has come to change, however, and a pilot program sponsored by the MCAAP Immunization Initiative is ready for use. Dr. Bill Adams, in collaboration with the pediatric primary care practice at Boston Medical Center, has successfully redesigned a pediatric electronic medical record (EMR) called the Automated Record for Child Health (ARCH) for use over the World Wide Web.

A pilot project is now underway that will share The ARCH with a limited number of pediatric practices in Massachusetts. The system will allow practices to enter immunizations when they are given, print adhesive labels for documentation in the paper record, print completed forms for families, and provide analysis of immunization data (i.e., coverage by age, HEDIS compliance, etc.). Clinicians will also have the option of using many additional EMR features if desired. The ARCH, successfully used for over three years at Boston Medical Center, will be accessible via the World Wide Web using Microsoft Windows Terminal Services technology. Each

practice will have its own database, hosted on a secure Web-server, and will use The ARCH EMR via a practice-specific connection. Technical support will be provided via Web-based multimedia materials and a pager-based telephone support system.

Practices interested in being part of the pilot project should visit The ARCH Project website, www.TheARCH.net or e-mail badams@mcaap.org or hkubat@mcaap.org.

Help Keep New Moms Healthy

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Counseling for Baby

- ★ Documentation of care with a pediatrician or family practitioner
- ★ Importance of immunizations
- ★ Supine sleeping position for baby

It is important to note that sometimes new moms have a postpartum visit one to two weeks after delivery. At this early stage, involution of the uterus has not occurred, and it is too early to adequately assess for postpartum depression; therefore, the four to six week visit is extremely important to the mother's health.

Thank you for support in helping us help new moms be healthy.

Looking to Hire or Be Hired?

Job listings are a free service provided by *The Forum* to MCAAP members and residents completing their training. Nonmembers may submit ads for a fee.

If you are looking to fill a position

MCAAP members: Free

Nonmembers: \$250

Please submit the following information:

- Practice name
- Position title and description (25-word limit)
- Availability (e.g., starting June 2003)
- Contact name
- Address, telephone number, and e-mail address

If you are looking for a job

MCAAP members and residents: Free

Nonmembers: \$50

Please submit the following information:

- Your name
- Contact information
- Residency program
- Availability (e.g., available now)
- Comment (25-word limit)

Please send text information via e-mail to dchung@mcaap.org. Checks may be mailed to the MCAAP office, c/o Cathleen Haggerty, Executive Director, P.O. Box 9132, Waltham, MA 02454-9132. All submissions must be received by March 15, 2003, to be included in the next issue of *The Forum*. All submissions are subject to review for appropriateness. For further information, please contact the editor at dchung@mcaap.org.



Drs. Sean Palfrey and Lynda Young (left) welcome guests to the Annual Officers Reception hosted by the MCAAP and Ross Products at the 2002 AAP Annual Meeting and Exhibition at the Westin Hotel in Boston.

SAVE THE DATE

2003 MCAAP CME Program, Annual Meeting, and Dr. Edward Penn Memorial Lecture

Wednesday, May 14, 2003
9:00 a.m. to 4:00 p.m.

Massachusetts Medical Society Headquarters
860 Winter Street, Waltham

TOPICS IN PEDIATRICS

Screening for Depression in Your Offices

Michael Jellinek, M.D.

Terrorism in Our Society

Joseph Hagan, M.D.

Case Discussions in Pediatric Urology

Bart Cilento, Jr., M.D.

Plus more to come!

MCAAP Immunization Initiative Launches New Website

The Immunization Initiative website contains information and breaking news about immunization issues and a listing of immunization-related CME programs, both onsite and on the Web.

You can read the *ShotClock* online and download forms for ordering office practice tools. The page provides easy access to immunization schedules and guidelines, as well as links for additional immunization resources.

We would be pleased to hear from you. For feedback, requests, and suggestions, contact us at ii@mcaap.org.

To connect to the site go to www.mcaap.org and click on Immunization Initiative or go directly to www.mcaap.org/ii.



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The Forum

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