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President's Message

by Edward D. Lewis, MD, FAAP, AAP NY 1 Chapter President
elewis@lewispediatrics.com

I am honored to serve NY Chapter 1 as President for a second term. I would like to thank the past presidents who have both followed and preceded me in this endeavor. Eric Beyer, Carolyn Cleary and Henry Neilley have served the pediatricians and their patients well and I hope to be able to continue the projects that they have undertaken during their terms. Probably the biggest news is that New York State has eliminated all but medical exemptions for vaccines. This is a huge victory for not only us, but for the health of our patients. However, despite my elation, I found out that only 2 of my local legislators, Jamie Romeo and Mark Johns, voted for the bill. I sent them a thank you letter and, to those who voted against it, a letter expressing my disappointment that they ignored the science and voted based on the loud voices of anti-vaxxers. I have received responses from 2 of these representatives. I guess the best way to put the dialog is that "I will agree to disagree" with their rationales. One stated that he "believes in the science and is immunized and his children are immunized." But he believes that everyone should have the ability to "request an exemption." Hmm, wouldn't it be nice if we could request an exempt from so many of the regulations we deal with daily? The second voted against it because "it could infringe on a person's religious choice."

I just don't get it. We really shouldn't even be debating "religious exemptions." My hero, Paul Offit, has repeatedly reminded us that the first vaccine was discovered in 1796, hundreds if not thousands of years after the major religious teachings were written. The only religion that has a foot to stand on when it comes to religious exemptions would be Christian Scientists.

New York Chapter 1

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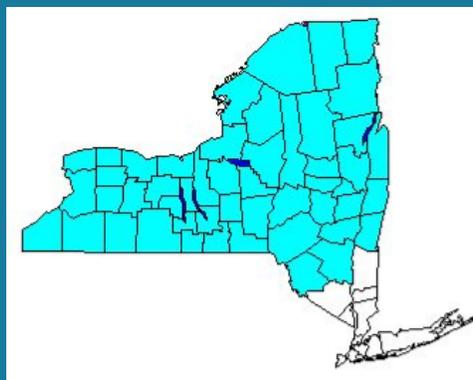
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Presidents Message, Continued...

I look forward to seeing how schools implement this new law and to the day when we once again can say that we have eradicated a vaccine preventable illness.

I am happy to report that the Chapter has secured a grant to continue its work on quality improvement in HPV immunization rates. I have participated in this project and have found the results interesting and very helpful. Please consider participating in future projects. Not only will they help provide MOC credits but will improve some of your practices' work flows and quality of care provided.

Both my son and daughter attended institutions founded by Thomas Jefferson, the United States Military Academy at West Point and the University of Virginia. One of Jefferson's beliefs when it comes to education is that we are continual learners. There were no Freshman, Sophomores, Juniors or Seniors. There were First Year, Second Year, Third Year and Fourth Year students. The way I look at it, I am now a Forty Eighth Year student and looking forward to the coming years where I will learn even more.

The Chapter is in an excellent financial position thanks to our leadership and the guiding hand of Chris Bell. He has proven himself as a friend of pediatricians and has followed in the very big footsteps of his predecessor, and my dear friend, Nancy Adams. Moving forward, we will be able to continue our efforts to serve all of you and your patients.

As important as it is to work for the betterment of the health of children in upstate NY and the nation, the only way we can do that is if we have healthy pediatric practices. Our four Pediatric Councils continue to meet with medical directors of insurance plans to address practice concerns. If you have any issues please reach out to your local council chair, Chris or me.

There is strength in numbers. We can always use more members, including medical student and resident members. Please reach out to colleagues who are not members, and any students or residents you encounter to make sure they join.

I look forward to the next 2 years and beyond to continue to fight the good fight and keep NY Chapter 1 great.

Edward D. Lewis, MD established his solo pediatric practice in 1981. He is a board-certified pediatrician in general private practice and a Clinical Professor of Pediatrics at the University of Rochester School of Medicine. A graduate of Rutgers College and the University of Rochester Medical School, he did his pediatric training at Cincinnati Children's Hospital Medical Center and Strong Memorial Hospital. Dr. Lewis is a medical director for RochesterHealth.com and active in the American Medical Society and American Academy of Pediatrics. He is a past-president of the Monroe County Medical Society, and the Medical, Educational and Scientific Foundation of NY. Dr. Lewis is also active in community organizations. He is the very proud father of three children and two grandchildren.

New York Chapter 1

American Academy of Pediatrics

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District II Chair's Report



by Warren M. Seigel, MD, MBA, FAAP, FSAHM
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In our last newsletter, I wrote about the importance for all pediatricians to speak with one voice. On June 13th, we saw how important our voices are and how powerful we can be by speaking together! Yes, June 13th was a very important day in the history of New York State when science prevailed over myths and fear. It was the day that the state of New York became a “medical exemption only” state for immunizations. And, of course, that didn’t just happen by magic! It happened because of the tireless efforts of pediatricians all over this state with the assistance of our Director of Public Policy and Advocacy, Elie Ward. This was a wonderful way to end the legislative session for children, their families and for pediatricians. But there’s even more that we can be proud of in New York. We were successful at lowering the lead blood action level, the passage of a Gun Safe Storage Act, making conversion therapy illegal in the state and many other pediatric related health issues. (Please see Elie’s related article about advocacy and the 2019 legislative session). In this article, I would like to highlight some of the work that is being done on a national level.

1. At the June meetings of the Board of Directors, the Task Force on Addressing Bias and Discrimination delivered their final report to the Board of Directors. Prior to the delivery of the final report, the task force had developed education for pediatricians/trainees on bias and effective strategies to promote inclusion and created resources for parents to help children develop empathy and resilience. Additionally, the task force worked with a public relations firm to develop messages that will help pediatricians communicate with families about strategies to mitigate bias and promote positive, healthy development. The final report included recommendations to incorporate bias and discrimination content in CME and MOC activities, to approach policy development using a health equity lens, and to help educate families on how to effectively identify, manage, and prevent the negative physical and emotional outcomes resulting from experiences of bias and discrimination. The Board will continue to discuss the recommendations at the 2019 Board Strategic Planning Retreat.

2. Physician health and wellness was added as a child health priority on the AAP Agenda for Children in 2018 and AAP remains a collaborating partner with the National Academy of Medicine’s (NAM) Action Collaborative on Clinician Well-Being and Resilience. A virtual AAP Wellness Steering Committee was approved by the Board of Directors in January 2019. The initial activity focused on mapping current pediatric resources to the NAM conceptual model in order to identify possible gaps. The weekly all member e-mail, *On Call*, featuring relevant resources and member perspective articles continues to be shared monthly. The curriculum for the Women’s Wellness through Equity and Leadership (WEL) cohort has been developed around the three core topics of leadership, equity, and wellness, and involves three-four webinars and an in-person meeting on each. The cohort meets monthly to address topics critical to effective leadership, including understanding leadership disparities for women in medicine, change management, organizational strategic planning, and organizational financial planning. The leadership series culminated in an in-person meeting on May 6-7, 2019 and the equity series will begin with a webinar on common workplace inequities.

3. Gun Safety and Injury Prevention Research Initiative (GSIPRI)

On May 6-7, 2019, the AAP hosted the Summit on Gun Injury Prevention which brought together 74 experts from health care, public health, law enforcement, business, education, faith and community. A primary goal was to generate ideas for local and/or state action within and across sectors that, together, could create a comprehensive, “whole” approach to reducing gun injury among children and youth. Meeting participants identified action steps which included implementing effective training strategies for health care providers, developing, promoting and evaluating effective public health campaigns, devoting resources to root causes of gun violence, and establishing federal standards for preventing unsupervised and unauthorized access to firearms. Staff are now developing a strategy to engage AAP internal stakeholders in the implementation of action steps.

4. The AAP continues to prioritize the digital transformation initiative across the Academy. The newest DTI effort is reviewing, refining, and migrating content that currently exists on AAP.org to a new platform and to implement new processes and governance for creating, managing, and maintaining content moving forward. The goal is to offer members a digital front door of the AAP and to improve the member experience. AAP will soon begin migrating AAP section and council web pages that reside on AAP.org. For many sections and councils, updating of web pages has already taken place with the establishment of Section/Council collaboration sites. AAP will standardize the structure of the section/council pages on AAP.org to clearly communicate the purpose, goals, and objectives of the group and facilitate member engagement. Content migration will be done in stages and content creators will have prior notice of the migration schedule.

I want to congratulate all of the new officers of Chapter 1 including Dr. Ed Lewis (President), Dr. Winter Berry (Vice-President), Dr. Doug Bennett (Secretary) and Dr. Joyce Zmuda (treasurer), who along with the assistance of Executive Director, Chris Bell, will continue to spearhead all of the health care initiatives in Chapter 1 to continue to support our pediatricians, improve the health and welfare of our patients as well as their families.

Wishing you a wonderful and safe summer!

*Dr. Seigel is Chair, New York State American Academy of Pediatrics (NYS AAP)
Chairman, Department of Pediatrics, Director of Adolescent Medicine, Coney Island Hospital
Associate Professor of Clinical Pediatrics, SUNY Health Science Center at Brooklyn*



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AAP NY1 Annual Meeting

June 7-8, 2019

This year, the AAP NY 1 Annual Meeting was held at the Staybridge Suites, Rochester University, in Rochester, NY. Attendees enjoyed a welcoming reception on Friday and full day of education on up-to-the-minute topics on Saturday.



Patrick Brophy MD, MHCDS, FAAP, Steven Lipshultz, MD, FAAP, Chelsea Bell (Daughter of Executive Director Christopher Bell), Barbara Ostrov, MD, Gregory Conners, MD, MPH, MBA, FACEP, FAAP



Attendees to Friday night's welcome reception and dinner.



Henry Neilley, MD, and Ed Lewis, MD, FAAP



Jessica Holst, MS, CCC-SLP



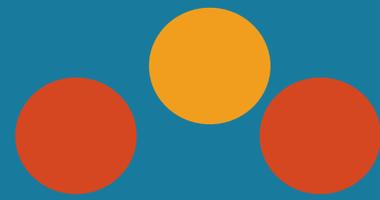
Jeffrey Birnbaum, MD, MPH



Jennifer Nayak, MD

We'd love to hear what you're up to! If you have news you would like to share with other AAP NY1 members, please email it to jcasasanta@mcms.org!

Western NY Pediatric Council



by Michael D. Terranova, MD, FAAP
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The Western NY Pediatric Council met on June 20, 2019. We reviewed the recently passed NYS law eliminating religious exemptions for immunizations. It was noted that in California, several MDs were writing fraudulent medical exemptions for cash. Members were advised to be on the lookout for similar behavior in NYS so that the proper authorities could be contacted. Much of the meeting was spent reviewing the results of our mental health survey. Most medium to large Pediatric practices in WNY participated. Results showed that the majority of offices had one or more CAP-PC trained MDs and extenders. All offices were diagnosing and treating ADHD, depression, anxiety and autism. Independent Health Association and Blue Cross - our largest private insurers, are currently capitated for sick visits. We have never felt that the payment rates were adequate for Pediatrics. Our goal for the survey is to prove to insurers that we are doing the work and get paid at a fair rate for the work. Several options for improved payment were discussed and this issue will be revisited at the next meeting.

Finger Lakes Pediatric Council



by Carolyn Cleary, MD, FAAP
ccleary@elmwoodpediatrics.com

The Council met on May 23, 2019. During the meeting, we discussed the advertisements that major insurers have been sending directly to patients encouraging the use of telemedicine (through companies with which the insurers are contracting). Chapter Executive Director, Chris Bell contacted both Excellus and MVP and was able to get them to change the language going forward, to encourage patients to always seek care through their primary care doctor first. Insurers have contracts with national telemedicine groups, and the national AAP has a discount with a national telemedicine group, but at this point there has not been a lot of uptake in use by local physicians. The group would like to stay informed of any efforts being made to encourage the use of telemedicine, and NYS AAP Chapter 1 leadership will be at upcoming meetings on this topic. We also discussed the recent vaccine price increase and the struggle to keep vaccine reimbursement through insurers on the same pace. Members are strongly encouraged to use vaccine purchasing groups to get the best prices for vaccines.

A special congratulations for distinguished service and dedication to the Mission and goals of the American Academy of Pediatrics goes to:



Melinda Clark, MD, FAAP

for her many years of service as chapter treasurer and her work promoting oral health



Vito Losito, MD, FAAP

for his work in establishing a Central NY Pediatric Council



Jennifer Nead, MC, FAAP

for her work in establishing a chapter-wide pediatric hospitalist committee

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Hospital Medicine Update: Practice Profile

The Division of Pediatric Hospital Medicine Upstate Golisano Children's Hospital SUNY Upstate Medical University, Syracuse, New York



by Jennifer Nead, MD and John Andrade, MD
neadj@upstate.edu andrakej@upstate.edu

The Division of Pediatric Hospital Medicine at Upstate Golisano Children's Hospital provides comprehensive care for children from newborns to young adults, up to age 20, requiring inpatient medical care. The division provides care for a variety of disorders, acute and chronic, with general and sub-specialty needs. Common conditions on the inpatient service include: acute and chronic respiratory illnesses, gastrointestinal disorders, infectious diseases, rheumatologic and cardiac conditions, neurological and psychological concerns. The faculty provides direct care and coordination of care for medically complex patients while they are inpatients. The division also provides consultative care for patients on surgical and medical sub-specialty services.

Our patient care teams include pediatric hospitalists, pediatric residents, family practice residents, medical students and nurse practitioners. Patient care is enhanced with the assistance of dedicated pediatric case managers, social workers, pharmacists, child life specialists, and art and music therapists.

Educational Highlights

Hospital Medicine faculty are involved in a variety of educational activities. The division is responsible for all the inpatient educational activities for the students on the Pediatric Clerkship and Inpatient Pediatric Acting Internship. Dr. Nead serves as the Clerkship Director and Dr. John Ervoes serves as the Pediatric Acting Internship Director. Dr. Ajagbe is the Associate Program Director for the Residency Program. The faculty provide the inpatient education and evaluation of all residents. Residents have also opted to take additional Hospital Medicine electives to hone their skills in the care of pediatric inpatients.

Dr. Ajagbe along with Dr. Myszewski are in the process of establishing a Pediatric Hospital Medicine Fellowship Program. Division faculty regularly participate in monthly Morbidity and Mortality Conferences. Drs. Ajagbe, Ervoes, and Nead have routinely led innovative resident workshops on patient handoff education, teamwork skills, communication including challenging clinical encounters, and inclusion and diversity.

Dr. Shafer is instrumental in teaching the residents about quality improvement. Drs. Nead and Ajagbe were selected to participate in the AAP APEX (Advancing Pediatric Educator eXcellence) Teaching Program.

Research and Quality Improvement Highlights

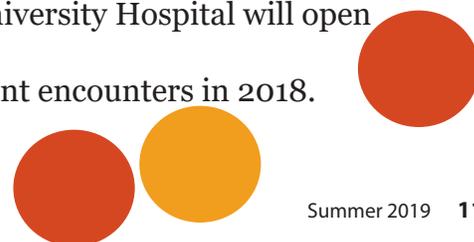
Members of the division have participated in medical education research projects and QI projects that have been presented locally, regionally, and nationally. Others have presented case presentations at Pediatric Hospital Medicine National Conferences. Dr. Nead has collaborated with other institutions on antibiotic use in skin and soft tissue infections and in Staph Scalded Skin Syndrome. Faculty have also participated in projects involving Pediatric Sepsis and Blood Culture Positivity, Community Acquired Pneumonia, and Bronchiolitis. The faculty are members of the Pediatric Research in Inpatient Settings (PRIS) Network and the Quality Improvement and Innovation Network (QuIIN).

Division Highlights

The division has been actively involved in patient safety. Each member of the Division leads a team, which focus on eliminating patient harm. We participate in the Children's Hospitals' Solutions for Patient Safety Children's Network, which is a network of Children's Hospitals across the US and Canada. This collaborative addresses Catheter Associated UTIs, injuries from Falls and Immobility, Pressure Injuries, Catheter Associated Blood Stream Infections, Peripheral IV Infiltration and Extravasations, Ventilator-Associated Events, Venous Thromboembolism, and Adverse Drug Events. In addition, Dr. Schafer is the Pediatric Quality Officer and Dr. Myszewski is a member of the Pediatric Quality Improvement Team. Dr. Schafer has an interest in Sepsis and has worked on Sepsis quality improvement locally as well as with New York State Department of Health and the Children's Hospital Association Improving Pediatric Sepsis Outcomes project. Dr. Nead is a faculty member of the Upstate Golisano Children's Hospital Family Engagement Committee. Dr. Mittiga is the hospitalist representative on the Children's Hospital Resuscitation Committee and Rapid Response Review Committee.

Clinical Snapshot

- There are 71 licensed inpatient beds in the Children's Hospital. University Hospital will open an additional 8 Adolescent Psychiatry beds in November 2019.
- There were about 31,000 ED encounters in 2018 and 8,120 inpatient encounters in 2018.



Hospital Medicine Update: Practice Profile

Meet the Hospitalist Staff at Pediatric Hospital Medicine Upstate Golisano Children's Hospital SUNY Upstate Medical University, Syracuse, New York



John Andrade, MD
Associate Professor of Pediatrics, Associate Professor of Emergency Medicine, Division Chief of Pediatric Hospital Medicine

Areas of interest:
General Inpatient Medicine, Systems Improvements in Hospital Medicine, Student and Resident Education



Olamide Ajagbe, MD
Assistant Professor of Pediatrics, Associate Pediatric Residency Program Director, Pediatric Hospital Medicine Fellowship Director

Areas of interest:
Medical Student and Resident Education, Teaching Providers to be Effective Communicators, Diversity, Social Justice and Inclusion



John Ervoes, MD
Assistant Professor of Pediatrics, Pediatric Inpatient Acting Internship Course Director

Area of interest:
4th Year Medical Student Pediatric Advisor



Matthew Mittiga, DO
Assistant Professor of Pediatrics, Assistant Professor of Emergency Medicine

Areas of interest:
Medical Education, Community Hospital Outreach and Transfer Issues



Jennifer Myszewski, DO
Assistant Professor of Pediatrics

Area of interest:
Simulation, QI, Pediatric Hospital Medicine Fellowship Program



Jennifer Nead, MD
Assistant Professor of Pediatrics, Pediatric Clerkship Director

Areas of interest:
Medical Education, Skin and Soft Tissue Infections, Patient Handoffs, Family Engagement Committee, AAP NY Chapter 1 Hospital Medicine Committee Chair



Melissa Schafer, MD
Associate Professor of Pediatrics, Pediatric Quality Officer

Areas of interest:
Patient Safety, Quality Improvement, Sepsis



Nusrat Zaman, MD
Assistant Professor of Pediatrics

Areas of interest:
Palliative Care



Mary T. Caserta, MD, of Rochester, NY, was appointed to the Committee of Infectious Diseases and began her term July 1, 2019.

The Committee on Infectious Diseases monitors current developments in the prevention, diagnosis, and treatment of infectious diseases and reports these to the membership with pertinent recommendations. It also prepares updated editions of the “Red Book: Report of the Committee on Infectious Diseases” and develops and reviews policy recommendations on the use of vaccines.

Dr. Caserta is a Professor of Pediatrics, Division of Pediatric Infectious Diseases and the Director, Pediatric Infectious Diseases Fellowship at the University of Rochester Medical Center. She is a member of the pediatric society.

Pediatrician Wanted:

We are a busy primary care pediatric office, located in the north west region of Rochester, NY and we are currently looking for a board certified (board eligible) pediatrician to join our busy growing practice.

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We currently have 10 pediatricians on staff as well as two part time pediatric nurse practitioners.

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If you are interested in meeting us and discussing your possible future with our practice, please fax your resume and contact information to 585-473-5894

Legislative Update- What We Accomplished



by Elie Ward, MSW, Director of Policy, Advocacy & External Relations
eward@aap.net

As you may have read or heard this years' legislative session has been extremely productive. I am very pleased to report to you, that it has also been very productive and positive for the children of New York. Many of our key legislative priorities, like repeal of the Religious Exemption to Immunization and Lowering Blood Action Level from 10mgdl to 5mgdl and passage of a Gun Safe Storage Act were achieved. In addition, we had several significant legislative successes in the areas of child safety, the environment and further curbs of tobacco access for young people.

The following is a summary of our victories in the legislative arena. Many of our bills which passed both houses still need to be signed by the Governor. Most have been agreed to and the Executive has indicated that they will be signed. If we encounter resistance or an assault by opponents, like perhaps the Chemical Industry fighting the Child Safe Products Act, I will let you know and we will activate our Action Alert system.

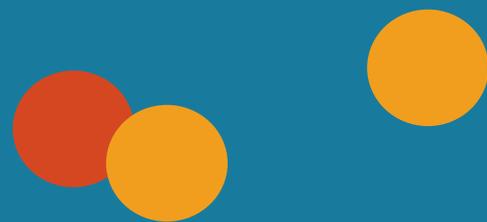
But for now, enjoy the fruits of your labor. We couldn't have done this without the active participation of you, our members and close support and coordination from our partners in medicine, public health, early childhood development, child safety and child wellbeing and environmental health. Our friends and supporters in the legislature and in the Executive were also helpful.

Together we raised a strong and multi-focused voice for the children of New York and here is what we accomplished:

- A 2371a/S2994a** "Medical Exemption Only for Immunization" passed both Houses signed by Governor all in one day!
- A2686/S2450** "Gun Safe Storage" passed both Houses
- A 0558/S.02833** "Tobacco 21." No one under 21 can purchase tobacco products. Passed both Houses
- A.00217a/S 3788a** "Crib bumpers" Crib bumpers cannot be sold in NYS. Passed Both Houses
- A.7371/S 5341** "Kids Safe Products" Banning & disclosure of dangerous chemicals in children's products. Passed both Houses
- A576/S1046** "Conversion Therapy" No longer legal in NYS. Passed both Houses, signed by Governor
- A2477/S5343** "Chlorpyrifos Ban" passed both Houses
- A.164/S.2387** "Period Products Disclosure" passed both Houses
- A6295/S4389 1,4** "Dioxane Ban" passed both Houses

Congratulations to all who worked so hard this session to get good things done for the children of NY.

Upstate Collaboration



by Patrick Brophy, MD, MHCDS
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On Friday, June 7th, in conjunction with the AAP meeting, I was fortunate to be able to meet with my Department of Pediatric Chair counterparts from across upstate New York. Dr. Steve Lipshultz (Buffalo), Dr. Greg Connors (Syracuse), Dr. Barbara Ostrov (Albany) and myself met to begin discussing some potential regional collaboration on research, education and clinical fronts. Each of us had the opportunity to introduce ourselves and outline our institutional priorities for the dinner meeting group in attendance.

Given all of our focuses on regional health for children as well as keeping patients and families in our region we identified some of the collaborative opportunities. On an educational front, we discussed the potential of developing a regional loan repayment program in order to attract under-served Pediatric Specialties. In fact, this will be the subject of our first potential white paper. This along with other innovative approaches to attract and retain sub-specialists to upstate New York is critical to expand our workforce and deliver quality and sustainable specialty care in our region.

From a research perspective we already have several research collaborations that are being conducted in the areas of oncology, health services research, and neonatology, among others. Clinically, we have several opportunities to develop an upstate collaborative with programs that make regional sense. As we begin to focus on value-based care we are in the process of developing a regional Pediatric Cardiovascular program, Developmental and Behavioral Pediatrics and liver/renal and cardiac transplantation.

Each of us are committed to Children's Health and our upstate patients and families. We look forward to working with all of our AAP colleagues as we build our regional future. These are exciting times! More to come.

Chapter Immunization Representative (CIR) Steering Committee Members

The AAP Executive Committee has approved a Steering Committee on Chapter Immunization Representatives (CIR). This groups will guide the AAP in supporting CIRs by assisting in developing a strategy for the CIR network; identifying educational, leadership and other needs of the CIRs; developing a schedule of educational material to disseminate to CIRs through a network-specific Listserv®; and planning/presenting educational webinars focused on leadership skill-building and immunization-related topics. The new Steering Committee members are listed below and include Chapter Executive Director, Christopher Bell.



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AAP District Meeting Update



by Winter Berry, DO
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I recently had the privilege to attend the yearly district shared meeting between Districts II and IX at AAP Headquarters in Itasca, IL. This was my first time attending the district meetings, and its goals of networking, educational and strategic planning opportunities was so well executed that I'd love to share my experience with the rest of our chapter membership. Yearly district meetings involve two chapters attending a joint meeting in Itasca with a rotating cast of pairs of districts. Our joint meeting with District IX (which encompasses all of California) was well timed in light of New York's new law eliminating all but medical exemptions to vaccines. Having a similar law since 2015, our California colleagues were able to provide insight on their experience related to issues with vaccine hesitant/refusing families and challenges in logistics of "catching up" vaccines in previously under or unimmunized children. We were also able to discuss, with our downstate colleagues, plans for fielding parent questions and challenges to pediatricians and their practices from continued critics of the law, and anti-vaccine supporters.

I was pleased to have the opportunity to spend time with and hear remarks from our two current AAP Presidential candidates, Lee Savio Beers, MD, FAAP and Pamela K Shaw, MD, FAAP. They shared their thoughts, goals and priorities for the future of the AAP, child health and pediatricians. I would urge all AAP members to read more about the candidates and remember to vote at www.aap.org/election between September 7th and 21st.

As you've likely heard from many colleagues, attending AAP meetings is always motivating. This held particularly true after federal and state advocacy updates from Mark Del Monte, JD and Elie Ward, MSW, respectively. They beautifully summarized the ever growing list of advocacy and legislative victories made in the recent months on behalf of child health. They also educated us all on the ongoing challenges and opportunities to advocate on behalf of pediatricians and children. During these updates, it was easy to see how continued membership and financial support at the national and local level makes these advocacy efforts possible.

As a newly appointed vice president at the chapter level, I also appreciated sessions outlining chapter board responsibilities, strategic planning, and approaches to increase membership, engagement, and value at the chapter level. These sessions, coupled with District II wide meetings, helped in setting our goals for individual chapters and the district as a whole, moving forward with new leadership.

Lastly, I think it worthwhile to highlight some excellent educational programming. While all the lectures were excellent, what struck me most was the content on physician mental health, well being and suicide. The speakers included Stuart Slavin, MD, MEd Senior Scholar for Well Being from AC-GME and Alan Nager, MD, MHA who shared his own family's journey with physician mental health. The lecturers presented not only striking and sobering evidence of the breadth and depth of this issue, but also heartbreaking stories of how this epidemic can touch any one of us. However, this message

was also buoyed by hope about what comes next. I was both impressed and encouraged by the down to earth, realistic approach the ACGME is utilizing to take on this critical issue. I look forward to the upcoming curriculum to address trainee and, more broadly, physician mental health, in the coming months. In addition, Dr. Nager is using his family's experience to trail-blaze how physician mental health can be addressed at the system/institutional level rather than relying solely on bolstering the resilience of the physician, trainee or student.

Overall, I think district meeting attendance was an invaluable opportunity for networking, education and a chance to be excited and optimistic about all that our local and national AAP have done and are doing to advance the cause of pediatrician and child health. I look forward to translating this momentum and knowledge into exciting things for the future of Chapter 1!



Warren Seigel, MD, FAAP; Kome Oseghale, MD, FAAP; Winter Berry, DO, FAAP; Joyce Zmuda, MD, FAAP; Michael Terranova, MD, FAAP; and Edward Lewis, MD, FAAP.



Dr. Kome Oseghale presents an update of the Section on Early Career Physicians. Dr. Oseghale was joined by Vanessa Salcedo, MD, MPH, FAAP who was able to call into the meeting.

Breakfast After the Bell: Fighting Food Insecurity

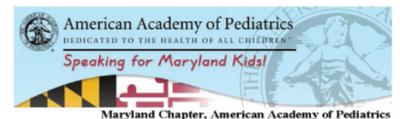
School breakfast can help children meet their nutrition recommendations. This may be especially true for the 1 in 6¹ children who live in a household faced with food insecurity.



To help our nation's children whose households have limited access to adequate food, we are committed to increasing student participation in School Breakfast Programs.

Collectively we will work together to:

- **Increase awareness** of the impact School Breakfast Programs can have on nutrition security, diet quality and student health.
- **Provide resources** to empower schools to champion school breakfast.
- **Inspire families** and communities to embrace school breakfast.
- **Empower children** to take action to help increase access to breakfast in their schools.
- **Support initiatives** to move Breakfast After the Bell for better participation



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¹U.S. Department of Agriculture Economic Research Service. Household Food Security in the United States in 2015



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