

**AMERICAN ACADEMY OF PEDIATRICS
CHAPTER ANNUAL REPORT
January 1, 2009 – December 31, 2009**

FINAL

All AAP chapters should use this report format. The District Vice Chairpersons Committee will review all submitted reports to determine nominees for and winners of the **Outstanding Chapter Awards, Awards of Chapter Excellence** and the **Special Achievement Awards**. The template is a Word document and can be saved and shared between the chapter president, vice president, and executive director. The final report should be emailed to pstien@aap.org, with copies to the respective district chairperson and vice chairperson.

Name of Person(s) Preparing Report:	Sarah Stelzner, MD and Dawn Haut, MD
Chapter:	Indiana
District:	V

GOALS (30%)

Please briefly describe your goals (up to a maximum of 5), and include information on how they were developed (for example, part of your strategic plan). **See example below:**

EXAMPLE GOAL: Promote optimal immunization of children (top priority in chapter strategic plan, adopted March 2007).
MEASURABLE OBJECTIVES:
1) Increase immunization rates of two-year olds in the state from 65% (2005 rate) to 85% by May, 2010.
2) Increase pediatric practices' participation in the state immunization registry from 150 (number participating in 2006) to 300 by May, 2010.
3) Support 100 of the state's pediatric practices in implementing a Quality Improvement (QI) initiative focused on immunizations between September 2007 and May 2010.
ACTIVITIES:
1) Track statewide immunization rates of two year olds.
2) Fulfill contract with state Department of Health and Human Services to carry out an "academic detailing" and technical assistance program for pediatric practices on immunization best practices (including training for participation in state registry).

3) Provide workshops on immunization practice at chapter annual meetings.
4) Discuss immunizations at Open Forums and in chapter newsletters, reporting on immunization rates and level of participation in immunization registry, as well as members' experience in addressing barriers and developing strategies to improve immunization practice.
5) Collaborate with state AHEC system to disseminate and support a QI module on improving immunization practice.
OUTCOMES/RESULTS:
1) Chapter provided: immunization workshops at annual meetings in 2007, 2008, and 2009; Open Forum discussion of immunizations in January, 2008 and 2009; 5 newsletter articles on immunizations, June 2007 & 2009 (2 in fiscal year 2009); 75 office technical assistance visits for immunization assistance, July 2007-May 2009 (32 in fiscal year 2009).
2) State immunization program chart audits in March 2009 revealed that 83% of children received the recommended immunizations by 30 months of age. Rates did not vary by race or ethnicity.
3) The chapter gets participation data from the registry and, as of May 2009, 205 pediatric practices reported that they are participating in the state immunization registry.
4) As of May 2009, the state AHEC program reported that 35 pediatric practices have completed an on-line program on immunization QI. The chapter responded to technical assistance requests from 20 of these practices.

GOAL A: Partner with the Indiana Immunization Coalition to develop a strategic plan to improve immunization rates of children and adolescents over the next 3 years. (continuation of 2008 goal)
MEASURABLE OBJECTIVES (up to 3):
1) Apply for AAP Healthy People 2010 funding (\$20,000 over 18 months) to continue work of 2008 Immunization Summit
2) Indiana Immunization Plan completed by Dec 2009
3) Dissemination of information regarding vaccine production, reimbursement and financing
ACTIVITIES:
1) Healthy People 2010 application submitted
2) Newsletter articles submitted on "Increase in Hib Cases as Hib Shortage Continues" and "Final report from Immunization Committee"

3) Survey Monkey developed to get member feedback on H1N1 vaccine distribution
4) Attended H1N1 scientific advisory committee meetings
5) Actively planning multidisciplinary H1N1 summit to discuss lessons learned and begin quality improvement for distribution
OUTCOMES/RESULTS:
1) Awarded HP 2010 grant “ <u>Promoting Pertussis Vaccination to Teens Using Music and Social Networking</u> ”
2) Indiana Immunization Strategic plan completed by deadline
3) Network in place for future communication with state/local health departments on H1N1 vaccine distribution and other rapid cycle responses

GOAL B: INAAP will establish a training and quality improvement initiative to improve developmental, social-emotional and behavioral surveillance and screening in primary care practices in Indiana. (extension of medical home goal from 2008)
MEASURABLE OBJECTIVES (up to 3):
1) Partner with Indiana State Department of Health (ISDH) to develop a training for primary care practitioners to Implement Developmental surveillance and screening in their practice using Continuous Quality Improvement PDSA cycles.
2) Recruit pediatric practices from around the state to bring multidisciplinary teams to training.
3) Sustain learning collaborative to provide technical assistance and support for CQI cycles and further medical home innovations.
ACTIVITIES:
1) Wrote proposal and obtained funding from ISDH to cover costs of training and to offer Mini-grants to practice teams for training, travel and purchase of ASQ screening tool.
2) Conducted Developmental Screening Learning Collaborative CME event 4/20/09 in conjunction with AAP Medical Home Videoconference Series (participants were able to view AAP videoconference and then participate in training.)
3) Active planning to conduct follow-up technical assistance visits to 6 mini-grant recipient practices

OUTCOMES/RESULTS:
1) Fourteen Practice teams from Indiana trained on how to use CQI methodology to implement the AAP Developmental Screening guidelines.
2) Five other presentations given this year on developmental screening
3) Monthly conference calls with learning collaborative participants
4) Providing expertise to local MCOs and Health Systems re developmental screening as quality benchmark

GOAL C: Promote the Indiana Chapter as a valuable resource to members (developed from feedback from strategic planning June 09)
MEASURABLE OBJECTIVES (up to 3):
1) Increase members understanding of requirements and process for Maintenance of Certification by providing at least one session to review this process
2) Increase involvement of INAAP membership in Chapter activities by engaging previously underrepresented members (St. Vincent's faculty/residents, DO's, subspecialists)
3) Offer at least one INAAP hosted event or meeting using video conferencing to expand reach beyond Indianapolis
4) Update website and improve communication via email with members to promote services and resources of chapter
ACTIVITIES:
1) Two INAAP newsletter articles written on MOC and link on website
2) Attended Ohio Chapter AAP meeting (11/09) to attend Judy Dolins' presentation on MOC and to partner with them on pursuit of certification from ABP for part IV MOC for INAAP developmental screening learning collaborative
3) Created new Emergency Medicine section
4) Created a new DO Liaison position to our Board
5) Created an additional resident liaison position so that both pediatric residency programs (St. Vincent and Riley) are represented
6) Made Developmental Screening CME in April and Annual Legislative Advocacy Forum in September available to remote attendees by videoconferencing

7) Actively planning H1N1 Vaccine Summit videoconference in early 2010

OUTCOMES/RESULTS:

1) Increased awareness of members about MOC

2) Successfully recruited DO liaison

3) Successfully recruited 2nd resident liaison

4) Active EM section chairpersons

5) Increased involvement in chapter events by members in rural areas by offering remote access by videoconference

6) Actively completing application process to ABP for certification for our developmental screening learning collaborative for part IV MOC

GOAL D:

Increase payment for providing pediatric services in Indiana (Top priority by members when surveyed prior to strategic planning in June 09)

MEASURABLE OBJECTIVES (up to 3):

1) Organize and implement at least 2 new payment advocacy efforts

2) Support of national advocacy efforts—Health Care Reform

ACTIVITIES:

1) Formed Reimbursement Task Force

2) Attended 3 meetings with Medicaid Managed Care Organizations and Private Payors and 1 Medicaid Quality Oversight Committee meeting.

3) Surveyed membership with survey monkey tool for feedback regarding interaction with one MCO and presented feedback to MCO leadership.

4) Letters were written to 3rd party payors (public/private) advocating appropriate payment for H1N1 vaccine administration.

5) Planned and successfully implemented the Health Reform Legislative Advocacy Forum – September 2009.
OUTCOMES/RESULTS:
1) Completed 2 advocacy efforts to improve communication between and engagement of members, payors and elected officials: formed Reimbursement Task Force with first conference call Dec 09 and presented multiple pediatric/family perspectives to local/federal legislators during Health Care Reform Legislative Forum
2) Timely communication and tools provided to membership via new website and email tool (Constant Contact)
3) Communication between OMPP, MCOs, elected officials and INAAP improved.

GOAL E:
Enhance IN Chapter Infrastructure
MEASURABLE OBJECTIVES (up to 3):
1) Chapter leadership will participate in formal strategic planning
2) Organize and implement a systematic communication structure for chapter
3) Increase chapter capacity to support growth and expanded initiatives
ACTIVITIES:
1) Strategic Planning pre-work and session completed June 2009
2) Follow up activities to strategic planning begun (see goals above)
3) Outside consultant hired for website design and communication strategies
4) Board meetings and newsletters all paperless since June 09 and investigating videoconferencing abilities for meetings
5) Bylaws amended to authorize electronic voting;
6) Bylaws amended to decrease length of term for officers
7) Recruited new lobbyist
8) Recruiting pediatricians traditionally not involved in INAAP through task force structure
OUTCOMES/RESULTS:

1) New website and improved email communication up and running since June
2) Immediate impact noted on budget regarding mailing expenses—used to improve website
3) Improved and immediate communication with members regarding time sensitive information (i.e. H1N1 and healthcare reform) with new website and email
4) Increased capacity for greater impact on state and federal legislative arena
5) Rebuilding of succession strategy for officers and leadership

OTHER CHAPTER ACTIVITIES (30%)

PLEASE DO NOT EXCEED 50 WORDS PER TOPIC AREA. We realize that chapters often expend resources, both time and money, on initiatives that are important to the success of the chapter, but may not be specifically spelled out in the goals. The following are topic areas that have been noted in previous years’ chapter annual reports. Please indicate whether your chapter is involved in activities focused on any of these areas, and briefly describe the activity..

Immunizations: See Goal (specify) No Activity Activity (describe)
Goal A

Mental Health: See Goal (specify) No Activity Activity (describe)
Published article in newsletter "Guide to Supporting Military Children"

Oral Health: See Goal (specify) No Activity Activity (describe)
1.Communicated with Amos Denaird and Beth Yudowski re AAP’s Oral Health Initiative. As Indiana is a targeted state for Medicaid coverage of fluoride varnish.
2.Presentation being developed to 5 pediatric practices on oral health risk assessment and fluoride varnish by Pediatric Dental Liaison
3.Chapter Advocate Training On Oral Health (CATOOH) article in INAAP newsletter
4.Participated in the IN Statewide Planning Council Oral Health Task Force, which developed the IN Strategic Oral Health Initiative

Children With Special Health Care
Needs/Foster Care: See Goal (specify) No Activity Activity (describe)
1. YP dinner with guest speaker on International Adoption
2. Reviewed and endorsed Levels of Care Consensus Statement from Indiana Perinatal Network; reviewed Consensus Statement on ER Management Of Pregnant Woman; sponsored their Annual Meeting
3. Letter for support of funding the HANDS in Autism model
4. Work collaboratively with About Special Kids in many arenas including Legislative Forum, link on our Website

Access: See Goal (specify) No Activity Activity (describe)

CATCH Program very active in Indiana. Chapter will have both co-facilitator positions filled by Jan 2010. This year we had 5 CATCH grants awarded all to residents! This is in part due to the strong resident CATCH representation that we had in Emily Sherer. She has since graduated and will become the next AAP District V CATCH facilitator. Also see goal D re work toward increasing reimbursement to increase access for children on Medicaid/SCHIPS

Quality: See Goal (specify) No Activity Activity (describe)
Goal B. Additionally, 3 members participating in AAP Quality Improvement Innovation Network (QuIIN)

Child Health Finance: See Goal (specify) No Activity Activity (describe)
1. Sarah Stelzner, Board Member of Covering Kids And Families Indiana
2. Sponsor of their Annual Meeting

Health Care Equity: See Goal (specify) No Activity Activity (describe)
Joe Oneil, Member, appointed to Indiana Commission On Childhood Poverty and Board Member of Children's Coalition

Medical Home: See Goal (specify) No Activity Activity (describe)
Goal B. Additionally, we collaborated with other professional organizations to advocate for children regarding Retail Based Clinics; actively recruited pediatric practices to participate in Indiana State Dept of Health Medical Home Initiative; consistently bring Medical Home model into discussions with other professional group leadership at quarterly meetings.

Profession of Pediatrics: See Goal (specify) No Activity Activity (describe)
Goal C. Maintenance of Certification

Adolescent Health: See Goal (specify) No Activity Activity (describe)
Maggie Blythe received an AAP Adolescent Education Grant to invite a speaker to the Chapter Annual Luncheon in May. Dr. Blythe also authored a resolution for the ALF 2010 regarding training for school law enforcement staff. Letter to Gov. Daniels to support comprehensive sexuality education for adolescents. Letter to Senate Judiciary Committee to support Bill HB 1536 to prohibit termination of Medicaid services for juveniles who are detained, committed or incarcerated.

Breastfeeding: See Goal (specify) No Activity Activity (describe)
We have a very active and passionate breastfeeding liaison, Kinga Szucs. This year she was selected to be on the AAP's Section of Breastfeeding Executive Committee. In Indiana, she has grown the number of active coalitions 400% and now spends time supporting and mentoring those communities. A statewide breastfeeding newsletter has been started in 2009. Also, a new task force is working with Indiana Medicaid to look at reimbursement for breast pumps and lactation services. Additionally, expansion of workplace lactation efforts and other educational efforts are ongoing.

Community Outreach: See Goal (specify) No Activity Activity (describe)

INAAP members hold board positions on various community organizations, including Covering Kids and Families Indiana and The Children's Coalition. This year our chapter supported the following community organizations/events: Better Healthcare Indiana, Covering Kids and Families Indiana and Safe Sitter. We also sponsored a table at the Military Pediatric Conference held here in Indianapolis. Engaged in planning and providing speakers for America's Promise Alliance Summit in Indianapolis. Interview with Sarah Stelzner on local news re new AAP policy on bullying.

Disaster Preparedness: See Goal (specify) No Activity Activity (describe)
Goal C.1) Development of a new chapter Section of Emergency Medicine interactive pedestrian safety course for children at the Indiana State Fair 2) Statewide surveys of hospitals regarding interfacility transfer agreements/policies for ill children 3) Statewide surveys of EMS agencies/providers regarding pediatric equipment, education, protocols, medical support; coalition building with EMS, others 4) Education outreach to prehospital and hospital providers to include about 500 of the state's 2000 paramedics. 5) Development of cards with expected normal vital signs by age for EMS providers

Early Brain Development See Goal (specify) No Activity Activity (describe)
Anna Dusick, member, attended the AAP meeting on Developmental Screening In Early Childhood Systems 3/25/09; Partner with IN State Dept of Health with projects Early Comprehensive Childhood Systems/CISS

Early Hearing Detection & Intervention See Goal (specify) No Activity Activity (describe)
Place link to website of new outreach program to families for resources during newborn hearing screening on our new website

Health Care Organization
Collaboration: See Goal (specify) No Activity Activity (describe)
1. Collaboration with BHI (Better Healthcare Indiana), Covering Kids And Families And IN Perinatal Network. Attended each of their annual meetings including full day kick off for BHI
2. Indiana State Dept. Of Health – Board Participation (Ganser),
3. Attend quarterly IN State Medical Assoc meetings with president's of state medical professional societies

Increase Chapter Visibility
Expert Recognition: See Goal (specify) No Activity Activity (describe)
1. Two new members selected for AAP National Committees
2. Two members received AAP National Awards
3. Hired new lobbyist to improve visibility with statehouse
4. First AAP chapter to have co-Presidents
5. Visits by chapter leadership to meet with Senators Bayh and Lugar's health aides regarding Health Care Reform

Managed Care Medicaid: See Goal (specify) No Activity Activity (describe)
Goal D.

Obesity: See Goal (specify) No Activity Activity (describe)
"Stop Taking On Pounds (STOP) Program" that was initiated by CATCH Grant funding continues to expand. This year added new site in Indianapolis.

Pediatric Councils: See Goal (specify) No Activity Activity (describe)
Goal D.

Practice Management: See Goal (specify) No Activity Activity (describe)
Goal B & D. Specifically, billing/coding information provided during developmental screening CME event. INAAP collaborated with ISDH regarding access/information for H1N1 vaccine, as well as advocating with third party payors around payment for H1N1 vaccine administration.

Professional

Education/CME: See Goal (specify) No Activity Activity (describe)

1. Goal B. After April CME event, all statewide participants invited to join monthly learning collaborative calls for CME credit.
2. Co-presidents invited speakers at IU School of Med/Dept of Peds CME event on topic of developmental screening.
3. Maggie Blythe received an AAP Adolescent Education Grant to invite a speaker to the Chapter Annual Luncheon and CME in May.
4. YP grant used to invite experts on adoption to give talk to YPs for CME

Public Education: See Goal (specify) No Activity Activity (describe)

1. Development of new website includes family section with health education resources.
2. Gave funding and support to ISDH for the production of the DVD on Substance Abuse in Pregnancy and Smoking Cessation

Public Health: See Goal (specify) No Activity Activity (describe)

1. Goal A (specifically H1N1) & B (collaboration with ISDH for support of mini-grants and dev screening CME event.
2. Support/collaboration with IN State Dept of Health in Medical Home Learning Collaborative

Reach Out and Read

Literacy: See Goal (specify) No Activity Activity (describe)

INAAP has long history of promotion of ROAR. INAAP is fiscal agent for some of the grant funding

Smoking Cessation: See Goal (specify) No Activity Activity describe)

1. Dr. Touloukian's presentations on Smoke Free Homes to practices and organizations
2. 11/09 letter of support to ITPC (IN Tobacco Prevention Coalition) for the grant application to support Smoke Free Workplace
3. Actively partnered with Indiana Comprehensive Smoke Free Air Coalition (ICSA) to advocate for statewide Comprehensive Smoke Free Legislation See attached new regulation regarding SHS in foster homes

4. Worked with Senator Vi Simpson to introduce a bill banning smoking in foster homes and develop an administrative letter to strengthen policy regarding smoking in resource homes.

Other(s) Please specify:

Active in the Indiana School Health Network (IN Chapter of national organization)

CHAPTER FINANCES (10%)

Please describe your budget process and how it relates to your defined goals (eg. allocation of your resources based on identified priorities).

Each year in January the President, VP, Treasurer and ED meet to review the past year's expenses, evaluate anticipated projects and those approved by the Board and their financial requirements. These items are placed into the budget. The budget is then presented to the whole Board at the January meeting for approval.

With the planned redesign of the chapter website, and effort to become paperless, funds were reallocated from copying, printing, stationary/envelopes and postage to the development of the website and its maintenance. Now that the website has been developed, we anticipate lower yearly costs for maintenance. We will also continue to utilize the website and email for all chapter communications eliminating the need for the majority of our paper costs as above. Additional funding allocated to teleconferences has increased board attendance and committee activity. We hope that the increased use of teleconferencing will reduce our overall travel reimbursement expenses. We have seen a decrease in dues with the implementation of the rolling anniversary payments. This should even out over the next year and make our projections of dues income more accurate. We did see a decrease in dues from our residents due to budget cuts in the residency program. They will continue to support the membership of active residents, but we will need to look for ways to increase their participation and dues income. As our administration costs and overhead have increased, we will need to look for ways to stabilize this expense. We anticipate that some of the changes to electronic communication will decrease these expenses as well.

Operating Budget: \$77,500

Reserves: \$60,000

Total Full Time Staff: 0

Part Time Staff: 1

Which of the following tactics does your chapter employ to generate non-dues revenue? Check **all** that apply.

Grants

National and/or state agency contracts to carry out projects and initiatives

- Chapter Continuing Medical Education opportunities
- Advertising space sold in the chapter newsletter and/or on chapter Web site
- Exhibit fees at chapter meetings
- Pharmaceutical/corporate contributions
- Personal/individual donations
- Private foundation donations
- Other(s)

(please specify) _____

MEMBERSHIP DEVELOPMENT (20%)

Please indicate what recruitment and retention strategies your chapter employs. (Check **all** that apply.)

- Mailings/letters to members and non-members
- CME opportunities
- General communications (e.g. e-mails, Web site, general correspondence)
- Personal contact by chapter officers and/or staff
- Chapter newsletter
- New member information packets
- Resident outreach
- Membership recruitment campaigns
- Participation in advocacy efforts
- Chapter membership committee
- Recruitment of affiliate members
- Member surveys
- Other(s)

(Please specify) Waive Resident Fees to be members of Chapter as residency program no longer covers this expense for residents. This will maintain all residents as members.

If you have a successful recruitment or retention strategy that you would like to share, please briefly describe it below. Specify how your chapter demonstrates value to your members. Please be sure to indicate, if at all, how that strategy addresses diversity. *Diversity may reflect values, beliefs, attitudes, principles and other attributes that define our culture. These may be personal attributes (e.g. gender, race, ethnicity, language spoken, age, sexual orientation, religion, family composition, etc.) or professional (e.g. type of community, site of practice, types of practice, administrative, practice owner or employee, or research interests, etc.)*

Our chapter continues to welcome and engage residents from both pediatric residency programs in the state. There is resident presence at every board meeting. These residents often stay involved with the chapter after completing their training. CATCH grant recipients are another source of retention, as well as recruitment for future leadership positions.

PLEASE DO NOT EXCEED 50 WORDS PER CATEGORY. Please briefly describe your chapter's recruitment activities, if any, related to the following member types in the space provided below.

Medical students

We applied for and received an AAP Chapter Outreach Grant. With this money, we invited members from the Pediatric Medical Student Society from IU School of Medicine to attend a focus group on ways we could work together. From this activity, we created a Medical Student Liaison Position for our chapter. Our first student in this position is Janice Liu and she has been invited to attend our board meetings, as well as give feedback on our website and other projects

Residents

1. Supported two residents to attend the AAP's Legislative Advocacy Conference 4/09
2. Mini-grant awarded to a resident to study cultural influences on parenting
3. Created a second resident liaison position to include new pediatric residency program in IN
4. Changed dues structure to allow residents to join chapter for free
5. Supported two residents to attend the NCE 10/09

Young Physicians

Chapter hosted a dinner and speaker on 3/26. 27 YP chapter members attended.

Medical subspecialists

Work with neonatologists to raise awareness of new guidelines on synagis and endorsing guidelines from Indiana Perinatal Network. Peds Subspecialists participated in Health Care Reform Legislative Advocacy Forum

Surgical specialists

Academicians

Riley Hospital for Children and Indiana School of Medicine heavily represented/involved with chapter

Seniors

Initial discussions this year on starting a senior section

Underrepresented and Minority Physicians

Actively involved in planning IU School of Medicine Diversity Week and sponsored reception

Other

Created and successfully recruited for new chapter DO liaison position

CHAPTER ADMINISTRATION/STRUCTURE/GOVERNANCE (10%)
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Do you have a strategic plan? yes no

If yes, when was it last reviewed? 6/09

Do you use the balanced scorecard? yes no

Date your bylaws were last reviewed: 9/09

PLEASE DO NOT EXCEED 50 WORDS PER ACTIVITY. Of the following choices, please describe what activities, if any, your chapter engages in to support the continued growth and development of its leadership and staff.

Implementation of Pediatric Leadership Alliance principles

Mentor program

1. During our strategic planning process this summer, we discussed having a "Welcome To The Board" Packet and this is on our balanced scorecard
2. Plans begun to host a local (Indiana) version of AAP Federal Advocacy Conference to mentor more members in this area.

Succession plan

We changed the officer's length of term from 3 yrs to 2 yrs. We have also been the first chapter to have co-President's. We think these changes might attract the younger/part-time pediatricians who are concerned about the time involved

Professional education seminars/teleconferences

1. Developmental Screening Conference 4/09 and subsequent learning collaborative monthly calls
2. Health Care Reform Legislative Advocacy Conference - 9/09
3. IU School of Medicine, Dept of Pediatrics: Pediatric Pearls CME
4. Annual Chapter Business Luncheon - invited speaker Abigail English

Sponsor attendance at AAP national leadership conferences

We sponsored two residents to attend the Legislative Advocacy Conference In April and two other residents to attend the NCE in Oct

Support membership in professional organizations

Covering Kids And Families Indiana

Other(s)

CATCH has a strong presence in our chapter and has contributed to significant leadership development.

SUMMARY

In 250 words or less, please summarize the distinct reasons or accomplishments that your chapter should be chosen as an outstanding chapter, including any challenges that you had to overcome.

The last few years have brought many challenges to our chapter's leadership. Unexpected departures in multiple key positions resulted in vacancies that were filled by members who had not benefitted from, or were not committed to the usual succession process. We have also struggled with infrastructure support with an outdated website, poor email communication tools, a part time Executive Director and an unproductive lobbyist. Despite all of this, our chapter has updated the strategic plan and bylaws, improved communication with its membership with a new website and email tools, has served as a resource for health care reform information and H1N1 and has positioned itself for 2010 to be a resource for members with regards to maintenance of certification and payment issues. We hired a new lobbyist this year to strengthen our advocacy efforts and visibility. We are actively recruiting members who have not been involved to do time limited and focused projects as part of task forces as opposed to longstanding committees. We have altered the term limits and have served as role models for innovative ways to work together to be able to fulfill the job description of chapter leadership positions. We have reached out to many organizations to partner with them in project work and to leverage skills and expertise they may have that we may be missing. Finally, we are now taking steps to look into forming a foundation and a senior section. We are eager to continue our work to fulfill the goals set out in our balanced scorecard.

SPECIAL ACHIEVEMENT AWARDS

After reviewing all the reports, the District Vice Chairpersons (DVC) Committee identifies individual member achievements, as well as successful chapter projects, that they believe are innovative and worthy of consideration for a Special Achievement Award. Special Achievement Awards recognize outstanding AAP work of individuals or chapter achievements.

To assist the DVCs in their efforts, please briefly highlight chapter and individual projects below that you consider to be bright and innovative. Please indicate whether these are chapter projects, or projects spearheaded by an individual member. If it is a member project, please identify the member so that he or she can be considered for a Special Achievement Award.

Chapter Projects:

Legislative advocacy forum in Sept – innovative, timely and relevant by showcasing examples of

how national health care reform debate is local; both state and federal elected officials were represented. Presentation was innovative because it included testimony by a parent of children with special needs, as well as using technology to have Bob Hall present from Washington DC, as well as participants attend remotely from around the state.

Individual Projects:

1. Charlene Graves – HP 2010 Immunization grant to improve information to teens through social media—partnered with Butler University Fine Arts Dept
2. Paul Rider/Laurie Goebel – related CATCH grants resulting in STOP obesity program in multiple locations in state and now offered in Spanish and supported by medical group
3. Kinga Szucs – Incredible dedication to improving breastfeeding efforts in Indiana and results to show for it
4. Anne Eliades – for 7 ½ years of loyal and dedicated board participation
5. Jennifer Walthal and Elizabeth Weinstein for proactively starting new EM section
6. Nancy Swigonski – for taking a lead role in the ISDH/CISS Medical Home Initiative
7. Maggie Blythe – for involvement in the Juvenile Mental Health Screening and Assessment Pilot Project, run by the Indiana Bar Association Lawyers