



**NDAAP 2015 Spring Membership Meeting Minutes**

**Friday, May 1, 2015**

**University of North Dakota Clinical Education Center, Grand Forks, North Dakota**

**Attendance:** Joan Connell, Kylie Nissen, Kathy Anderson, Barb Bentz, Sarah Meyers, Becky Bailey, Hilory Liccini, Molly Howell, Joan Karpenko, Stephen Tinguely, Kora Dockter, Chris Maloney, Tracie Newman, Lori Sondrol, Brenda Thurlow, Chris Tiongson, Marc Ricks, Gloria Adjekum, Susan Zewleski, Emily Hvidston (med student)

The CME portion of the annual meeting was held from 10 am to 2:00 pm.

Minutes from the October 17, 2014 meeting were disseminated to participants.

**HPV Project**

*Joan Connell*

QI Project can be designed and executed however we want and receive an AAP \$15,000 grant. We need champions for this project. North Dakota, South Dakota is on board with us and will get their own \$15,000 grant and so will Minnesota. Sanford is on board, but we need to get Altru, Essentia, Mid Dakota, and Trinity. Project needs to be completed in 6 months, start end of July/beginning of August and complete the beginning of 2016. We are not demonstrating improved rates, we are asking questions that can be answered in 6 months. Goal is to improve immunization rates around HPV. What kind of participation would be required? We are trying to do a state-wide accumulation of data – ideally all pediatricians would be involved and submitting that info to Kylie, Sanford, and the Champion. What are the drivers of either the low rate or the high rate (not both). What are the drivers to not getting an immunization? If they offer it and they are turned down then the question is “Why?” Then can decide which one of these projects is the key to increasing the immunization rates. NDAAP needs buy-in from the pediatricians to ask the questions of their patients (yes or no questions that are on a form they complete and send to NDAAP). Do we want to adapt what MN already asks for questions.

Facility Champions:

Sanford, Dickinson (Mark Ricks) – agrees

Mid Dakota (Amy Juelson) – agrees

Amy will talk to Todd Twogood about this.

Sanford, Bismarck (Todd Twogood) – agrees

Altru, Grand Forks (Lori Sondrol) – agrees

Essentia (Barbara Bentz) – agrees

Trinity (Tom Carver) - ???

Sanford, Fargo (Clifford M) - ???

Jamestown (Myra Quanrud) - ???

Williston (Shiela Ponzi) - ???

Mark Ricks (Sanford, Dickinson) will see if he is able to attend – he’ll let Joan know within the week.

Barbara, Joan, Kylie, and possibly Mark will be attending the meeting in St. Louis July 30-31.

Molly Howell and Joan Connell have talked and ND DoH has funds for HPV and we are hoping to get all of this tied into one project. However, their project isn’t moving forward at this time.

Joan will talk to Minnesota about collaborating with them.

**Child Care Aware of North Dakota**

*Sarah Meyers, Child Care Aware ND*

North Dakota does require that the child has a care plan but it doesn't have to be approved by a physician or a medical provider, it can be completed by the parent. The licenses do not require that the parent's provide the emergency medication to the child care provider. They would like the pediatricians to ask "Is your child in childcare?" and if they are ask to work on their care plan and encourage them to have the emergency medication onsite with the childcare provider.

CCAND has inclusion specialist, Mary and Missy, one in the west and one in the east. (provided handout) All types of childcare are using their services. They help with developmental and behavioral issues. Go through ASQ3 with medical provider and parents and then if there are problems they go to the ASQSE with the pediatrician. Refer on to early intervention and pre-school screening to refer there. They do occasionally do onsite visits and make a plan of action.

Medical Providers can contact Child Care Aware or Mary or Missy directly. Pediatricians can also recommend the parents contact CCAND. Providers must be licensed to get assistance from CCAND. CCAND does give a form to the parent to give to the pediatrician to give them an idea of why they were referred to a pediatrician. Could a waiver be added to the summary that allows CCAND to send the summary directly to the child's pediatrician along with a contact number for the CCAND person if they have questions.

Inclusion program was maintained in this legislative session, but funding wasn't increased like they had hoped. All providers are now required to have safe sleep training annually.

**Asthma Tracker**

*Joan Connell*

Will be started in the Asthma Clinic and then get it into other practices. But, if they can't have it in their practices then have it accessible through the Asthma Clinic.

**Parent's LEAD**

*Becky Bailey, NDDoHS Mental Health & Substance Abuse Services*

Handed out copy of slides. Parent's LEAD is a partnership between ND Department of Human Services, ND Department of Transportation, ND University System, and NDSU Extension Service. Primary goal is to prevent underage drinking, but they are expanding into other areas (other substance uses, bullying, fathers, military, native American culture, grandparents, etc). You (and parents) are encouraged to go on their website at [parentslead.org](http://parentslead.org). Parents Lead has an area for professionals that it wants to expand on. 30-Day Parent Challenge was handed out.

Screening, Brief Intervention & Referral to Treatment (SBIRT) is another topic they cover and can be discussed in another presentation.

Senate Bill 2367, Dr. Brown is the NDAAP representative on this project and they will keep us updated.

**Teens Entering Adult Medicine (TEAM) project**

*Hilory Liccini, NDDoH Children's Special Health Services*

They passed out a letter that can be given to parents and their TEAM brochure. Program targets ages 12 to 17 years old. All of the trainings are delivered via web-based applications and other distance technology components via modules using Go Animate and Blackboard. If they are past the age of 18 they can still start the program (some practices see kids until they are 21). If any NDAAP members have any patients that they could have test the system, please let Hilory know.

### **Family Voices**

*Joan Karpenko, Family Voices of ND*

They offer a lot of trainings and after-hours learning calls about various topics. She provided brochures and handouts to take back to their practices. Project Carson is for families that have a prenatal or at birth diagnosis. New Beginnings is a list of contacts for early intervention. They hold a lot of activities for disabled persons. Family Voices is more on medical and Path Finder is more with helping the schools. Path Finder provides information for the schools and families to acquire information. They lost some funding during this year's legislative session.

### **Patients who refuse to immunize & HPV Vaccination**

*Molly Howell, NDDoH Immunization Program*

Dr. Dwelle wasn't able to be here today but they have received a lot of phone calls from the public regarding physicians who refuse to see patients who refuse to get vaccinated. They worked with the Board of Nursing and the Board of Medical Examiners to develop a policy for this (hope to put out by the end of May). You can provide any comments to Molly. The preferred practice is to listen to the parent's concern, offer educational materials, document that, if the parent still refuses, document that. They prefer that the physicians still provide the immunizations that they will take, which is better than them not getting any vaccines. AAP has a clinical report similar to that and they provide a form that can be given to parent's who refuse to vaccinate. One of the reasons that they may be refusing to see them is because it may affect reimbursement rates because one of the measures is based on immunization rates. Naturopaths almost gained prescription writing ability in this last legislative session; NDAAP needs to take a stance against this in order to protect the pediatric patients. Rates of immunizations have decreased significantly in states where naturopaths have this authority.

They are seeing an increase in 2<sup>nd</sup> and 3<sup>rd</sup> doses but 41% vaccination rate for girls 13-17 years old. Would like to see this rate increase significantly. In June they are sending a postcard to every parent who has a child in that age range that hasn't had their child vaccinated yet. Would be nice to have a brochure or endorsement from a Catholic church supporting the HPV vaccination that would help with some of the people who refuse. In Canada and Ireland they vaccinate right in the schools and they have very high vaccination rates. The schools don't require it so that leads to a decrease in the rates. HPV should be talked about like all the other vaccinations, not separated out.

*Kylie will send out the "champions" for the cities to Molly.*

### **PCAND Mailing/Survey/Early Childhood Education**

*Kathy Anderson*

Kathy disseminated and collected the survey at the end of the CME portion of the meeting. They will put together a provider online toolkit for Developmental screening for 0-3 year olds with follow-up phone calls available.

Possible idea is for PCAM is to see if they can be involved with the legislative funding for pre-school kids as a way to get kids evaluated.

### **DentaQuest/fluoride varnish grant**

*Kylie Nissen (on behalf of Bobbi Will)*

The DentaQuest Foundation grant started November 2011 and closed in October 2014. They still plan to share the Smiles of Life curriculum with medical professionals. They exceeded their goal of one medical school and one nursing school implementing Smiles for Life (SFL) curriculum. The UND School of Family Medicine currently has the modules integrated into their community based, eight week family medicine clerkship and physician assistant program. SFL modules are being implemented at Minot State University, in the pediatric nursing school and a nurse practitioner school, as well as in the University of Mary, Bismarck rotation of their students into dental offices and hospitals for oral health surgeries. Additionally, their goal of

increasing the basic knowledge of oral health prevention, screening, and application of fluoride varnish to 50 healthcare professionals in North Dakota was exceeded with training of over 250. With completion of the grant funds, the North Dakota Department of Health, Oral Health Program does not have the dedicated staff to continue training; however it is their hope that with regular contact they will keep the clinics interested. They are willing to revisit and give additional training when requested.

### **Treasurer's Report**

*Kathy Anderson*

Overall total of \$14,274.32 is in the NDAAP account. \$5,000 total for the Building Bridges grant. Got \$5,000 grant for today's spring meeting. \$6,940.43 in the account is not tied to any particular grant. In July the membership rates will go up slightly.

We now have insurance for our director. We go through the company that the AAP contracts through.

Quicken would allow easy transfer from treasurer to treasurer and provides transparency. Barb will check with the AAP into hiring an auditor to set up Quicken for our chapter. Could probably get this paid for through the HPV grant because it is required for it.

### **Committee Updates**

#### **Breastfeeding**

*Brenda Thurlow/Kathy Anderson*

Indiana set up a tent at their state fair for breastfeeding. For the past 2 years Fargo Sanford has set-up a tent at the Fargo Street Fair.

#### **CATCH**

*Brenda Thurlow*

Have had no CATCH grants. Joan would like to look into a CATCH implementation grant for the Asthma Tracker. Could pick an underserved population (areas of Dr. Patel or Dr. Jumping Eagle). They love that we are rural and you could tie to a medical home (required for CATCH grant).

#### **Legislative**

*Joan Connell*

Testified against medical marijuana. Joan will be leaving UND and will be working for the Department of Health to work with people who want to use medical marijuana and put them in contact with research studies.

The gun rights bill did pass, but the gage clause was removed. This would have prevented pediatricians from talking about guns in their practices.

\$3 million pre-school grants passed and it is felt that this has to do at least somewhat with our early childhood efforts.

### **2014 Outstanding Chapter Awards**

*Joan Connell*

NDAAP was one of three chapters that were nominated for the small chapter awards. Vermont won this year but we were a Distinguished Chapter. The HPV grant and getting Quicken established will help our chances of winning next year. Put the Distinguished Chapter award on Facebook when it arrives in July.

### **Pediatric Link Calls**

The numbers are low for attendance so we are going to change them meetings to first Friday of the month at 12:30 pm.

**Kylie will make a new flyer and these dates will start in July.**

**Fall Meeting**

Meeting will be September 18, 2015 (tentative). Fargo will be the location for next spring. Topic suggestions for the next meeting include having Dr. Cleveland present more information about asthma management (he presented at this meeting); HPV because this is a big hot topic right now and NDAAP is going to be doing a project on HPV; human trafficking of children because there is a rising problem of this in ND because of the oil boom; immunizations; mental health in children and adolescents (Dr. Fleissner was suggested as a presenter); juvenile arthritis, ADHD sleep problems.

**Meeting Adjourned**