



Wednesday, May 29, 2024

8:00am – Teams

MINUTES

CALL TO ORDER: The Northeast Florida Pediatric Society (NEFPS) meeting was called to order on Wednesday, January 31, 2024 at 8:11am by Julie Kellogg, MD, President.

ADOPTION OF MINUTES: The minutes of the January 31, 2024 NEFPS meeting were adopted as written.

OLD BUSINESS Dr. Kellogg reported that the executive committee and the Society Administrator have been working on building membership by updating contact information and encouraging people to rejoin for this calendar year. They are also making plans for this year's awards banquet. Dr. Reddy added that there has been renewed interest in membership after the last two educational dinners and we feel we'll see even more with the awards dinner coming up. We already have several topics we're considering for future educational dinners.

NEW BUSINESS None

STANDING BUSINESS **School Health Program:** Dr. Beverly reported that there has not been any real activity in the past few months, while the new superintendent is being appointed. Part of state laws requires each school district have a School Health Advisory Committee (SHAC). With school board elections coming up there will be interest around SHAC activities.

FL Chapter - American Academy of Pediatrics (FCAAP) & FMA/CMS –Dr. Alissa provided a report on FCAAP. With the legislative session concluding there is not a lot to report but was still busy and she deemed it successful. As usual there are issues with Medicaid, not limited to Florida, but nationwide. Work is continuing with Medicaid enrollment which is a disaster. The Chapter is focusing on registrations for the annual FCAAP annual meeting, August 30 – September 1 at Disney. It's a great meeting, with good networking and presentations. Nominations for the FCAAP Board of Directors are in. The Nominations Committee who will decide who is running for what position.

AAP Report - **Dr. Joseph** provided her report in advance of this call and it was included in the meeting materials. It was a summarization of 100 pages of the APP staff report from the last board meeting in May. Priorities are healthy mental and emotional development, Diversity, Equity, and Inclusion (DEI), safety and wellbeing for pediatric professionals. Dr. Joseph is a member of a task force, comprised of members with different expertise, targeting the wellbeing and safety of pediatricians and pediatrics as a subspecialty (medical / surgical). The task force will be meeting this June 31-June 1. Environmental and disaster readiness is also discussed in her report. After the pediatrics MATCH and the report that came out regarding a shortage and prediction of a worsening shortage for pediatrics as a subspecialty there is a lot of effort from the AAP to look at this with the ACGME and the **ABP** (what does this stand for?). She highlighted the work of the Section on Administration and Practice Management (SOAPM) which is looking at practices in crisis to see how they can be supported as well as collaborating with pediatricians regarding the use of AI and telehealth to decrease the administrative burden. The AAP DEI Team (Diversity, Equity, Inclusion) is working on videos and resources to encourage under-represented medical students to pursue a career in Pediatrics. There is also a sub-specialty organization called FlexSpeeds that supports female leadership and excellence in the pediatric subspecialty and works towards gender equality and professional development. They provide a lot of opportunities for mentorship, sponsorship, scholarship, and networking. There is much more in her provided report or if you would like more detail you can contact Dr. Joseph. The AAP national meeting is in Orlando this year, September 27- October 1, she encouraged attendance.

Dr. Reddy asked about the mental health initiatives, in particular the focus on preventative mental health. She wanted to know what steps are being taken to ensure that it's incorporated in the teaching agenda for future residents in a more effective way. **Dr. Joseph** responded that the AAP is working with the ACGME on this. There is also a lot of opportunity for CME and MOC through the AAP Pediatric Mental Health Education Center by first educating our own pediatricians on how to integrate within the Medical Home. **Dr. Zenni** added that the ACGME just did a major revision of the requirements for trainees in Pediatrics residencies that includes a strong emphasis on training in mental health, a substantial change compared to previous requirements. The local residency program is well positioned to easily meet those requirements as this issue was being addressed prior to the changes to the requirements. **Dr. Mirza** added that under the changes there is a required 4-week block in mental health for pediatric residents. UF has been fortunate as they have a Psychiatry department that has partnered with the residency program, thanks to the Division of Community and Societal Pediatrics and Dr. Goldhagen's foresight. Third-year UF residents have been required to take this rotation for close to 10 years! A couple of years ago the program developed an elective for PGY2 residents to work with the Psychiatry Department to develop a mental health elective that ensures varied experiences and includes some elements of counseling and addiction medicine. She currently has four residents interested in this elective rotation. There is a definite push to integrate mental health into primary care.

Dr. Goldhagen wanted to mention Diversity, Equity, Inclusion (DEI) while being a national issue, here in Florida it's an issue that affects our teaching institutions and our network of pediatric practices. Only a few of Florida practices care for low income, minority, migrant, refugee children. Here in northeast Florida this should be a critical issue and needs to be addressed in a comprehensive way by NEFPS. In addition to DEI we should be addressing socioeconomic diversity. The governor has refused to accept EBT money for low-income children this Summer.

and a host of other issues that discriminate against multiple groups within our community. The creation of a task force or group that will tackle this issue would be important. Fifty percent of children in our community rely on the free or reduced-cost lunch program for their basic meals. Refusing EBT money is a critical issue. The governor, and his wife, say government shouldn't be involved and that non-profits and that religious communities should be addressing it. The state chapter is dealing with this critical issue, how can we deal with it locally?

Dr. Joseph commented that patient safety, quality of care, and adherence to the Joint Commission's guidelines ensuring health equity, are all tied to payment. Regardless of anyone's politics, starting July 2025 payment will be tied to how we address social determinants of health and all the points Dr. Goldhagen mentioned. **Dr. Alissa** added that 50% of the population in the UF Newborn Nursery don't speak English creating a struggle to schedule these infants for follow-up care with a primary care physician. She agrees that here in Jacksonville we are in a crises situation. **Dr. Goldhagen** suggested working with The Baptist Foundation and the community to focus on potential funding, put together a request to various philanthropic foundations in Jacksonville, to look at how we can support an ongoing effort, to address this issue. **Dr. Rolle** added that the decline in the number of pediatricians in the community is tremendous. With more people moving to Florida we are unable to accommodate the workload and it's difficult to recruit. Physicians are being recycled within the community, leaving one job to go to another rather than us having viable candidates recruited from other parts of the country. Recruiting APP's is also difficult because not all are pediatric trained or willing to work in pediatrics. Another issue is practices who will not take on new unvaccinated patients and those practices that are willing to see these patients don't have the capacity, causing bookings to be doubled and tripled, this increases the primary care access issues. The influx of people moving to Florida seeking religious exemptions are easily obtained. We need to consider how we will address this problem from a legislative standpoint. **Dr. Goldhagen** said that he's not sure that we, as a community, have supported the Federally Qualified Health Centers (FQHC) to the extent we should, to expand capacity, which is tied to funding, and to add providers as the Health Department can't be depended upon to assist. **Dr. Pope** joined in the discussion. She differs from Dr. Goldhagen's statement about the Health Department saying that The Health Department has two bustling pediatric practices, The Center for Women and Children and the South Jacksonville Health Center. A number of you have worked at both of these clinics. We have a newborn, family planning nurse that goes to the hospital to gather newborns to ensure they get into the practice. We are at capacity but this doesn't mean we're not still trying. We are working on mental health, food insecurities, and transportation. We know we can't do it alone but provide a great safety net and are one of the few serving lower income populations. We all need to work together and with the city to make our city a better place for our peds population. **Dr. Goldhagen** thanked her for her comments. The State has not provided conducive environment to do this work anymore. In regard to the WIC program the health department's hands are tied and access is extremely limited. It takes months for families to get into the program. **Dr. Pope** added the challenges are around employment, retaining qualified nutritionists and dieticians at the salaries the Department offers. Our UNF internship program is bringing in and training dietitians and nutritionists but it's not enough in view of the increasing Jacksonville population, those

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already here and new arrivals. She admits their hands are tied but they are trying to hire to cover the increase in need. **Dr. Goldhagen** said that this points to the fact that we are beyond a crisis. The community needs to step up in some way. Months to get an appointment for WIC is unimaginable but currently a fact. **Dr. Pope** mentioned that during COVID they were able to work more efficiently using virtual visits and phone calls, etc. to keep up. Telehealth is still being used to decrease barriers but the usual red tape is there.

WCH – Dr. Toney reported:

- The St. Augustine freestanding ER had its ribbon-cutting about 10 days ago. There are some licensure requirements being fulfilled this week and it's expected to open in the middle of June. The Nassau Crossing Free-Standing ER is finishing construction. Both will have Wolfson branding. Peds ERG will be staffing these locations.
- The child /adolescent, acute crisis, mental health unit has opened, increasing the capacity to 34. This will satisfy the needs of the community now and for at least the near future.
- The reassignment of beds in the CVICU was completed and the unit has opened.
- About two weeks ago, with the reassignment of the CVICU beds the Level 4 NICU capacity is now 87 beds downtown as well as 24 NICU Level 2 beds split between South and Clay. This should serve the needs of the community for the next five years.
- Various options for the medical/surgical capacity are being explored.
- Patsy Williamson has been appointed Director of Nursing on the medical/surgical floors. Robin Fiedler, formerly in that position relocated to Tampa. Jennifer Rutland who was the director of the Medical Staff Office for many years is now Director of Specialty Services at Wolfson. She will have day-to-day oversight with operations management, program development for the Terry Heart Institute, our Neuroscience Institute, the Diabetes Center, and Bower Lyman Center for the Medically Complex Child. She will have system-wide leadership over the sleep and neuro-diagnostics unit.

University of Florida: No report

Nemours Children's Health (NCH) Update: Dr. Toney mentioned that as of May 1 Dr. Andrew Stec, Chief of Pediatric Urology, has taken over as Chief Medical Officer, Nemours, Jacksonville operations.

St. Vincent's Family Medicine Residency Program Update: **Dr. Rolle** reported that Ascension Health recently experienced a nationwide cyber-attack. Outpatient operations were affected in a limited manner. As soon as the issue was identified, all our vendors were asked to disconnect from our systems for a period of time. The **HIE** (What does this stand for?) was down and other factors were affected. Outpatient care was able to continue but the hospitals were affected as they were on another system. On the outpatient side we use Athena, the inpatient side Cerner, those were the primary areas affected. Everything is starting to slowly come back online, including our vendors. Pediatrics was impacted less and able to carry on business for the most part. There were some glitches in accessing immunization records. She and Dr. Kellogg, in dialogue with West Coast teammates, discussed any ongoing long-term effects when servicing our clients.

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They are also working on an avoidable ED visit program related to Senate Bill 7016. We are seeking a program where we link patients seen in our ED to primary care services in the community. Ascension sees a limited number of pediatric patients in our ED and urgent care centers. We will work to ensure those pediatric patients are attached to a primary care medical home. We are also doing extensive marketing to educate patients on the appropriate place for them to seek care, whether it's their primary care provider, the ED or an urgent care center. We have already seen a slight decrease in avoidable ED visits here in Duval County and surrounding counties.

She recently met with Dr. Jerry Bridgham and Sabrie Edmonston, Wolfson, and Megan Denk, THE PLAYER'S CENTER seeking to ensure that the services provided by Wolfson meet the needs of the community. During the meeting I expressed some of our concerns that relate to getting timely information in terms of diagnostics, imaging, and labs from the hospital. If this team hasn't met with you yet they most likely will in the future.

With the influx of patients coming to the State who choose not to be vaccinated, Ascension is being affected as they are one of the few systems that will see these patients. We're hearing from a lot of patients that they are coming to us because they've been turned away or will no longer be seen because they aren't vaccinated. Even though this practice is illegal in Florida it persists. She asked that if this is the case at your practice that you reconsider. They do try to see the undocumented and anyone whether they have insurance or not. The vaccination rates in Duval and across the State have decreased, we're now under 90%. Ascension continues to encourage vaccinations but folks are coming here because there aren't barriers to their children being in school if they're not vaccinated and other reasons as well. **Dr. Mirza** said that the drop in immunization rates is appalling and creates problems for the residency program when assigning residents for their primary care experiences since we want them to work in clinics where immunizations are being recommended and they see that as a major role for pediatricians besides advocacy. She wished that those at the State government level had an opportunity to visit a developing country and see people afflicted by polio or see someone with SSPE because they had measles as a child, to really understand the power of vaccination. **Dr. Kellogg** added that Ascension doesn't discharge people from their practice if they're not vaccinated but they use the APP informed consent form. There is frank conversation with the parents where all the risks are reviewed and they are told that we disagree with their decision to not have their child vaccinated. From the residency view we've talked about whether we can discharge from our practice but Legal tells us we can't. The parents can go to the Health Department and get a religious exemption. **Dr. Rolle** added that some parents are refusing to read the materials, have the conversation, or sign the declination form saying they're being deemed unfit parents and we want to take their children away. **Dr. Dal Porto**, from Carithers, added that they are devastated by this. Carithers has increased their vaccine policy to include everything including rotavirus and HEP A even though they're not required by the State because they "don't want to be part of new disease." People who want their personal rights are not considering the immuno-compromised people. She thinks a lot of private practices are getting more and more strident about this and dismissing these patients. Some do alternative scheduling, but shots still must given when the child's most vulnerable and by 2 years of age. All of our payors are grading us on our HEDIS measures for reimbursement. We do not share this with parents as we want them to know that it's really about health. **Dr. Mirza** questioned, again, the legality of discharging patients from care but believes with adequate notification and time to find another primary care provider a patient can be discharged. Their practice at UF is if you have immuno-compromised patients

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that would be compromised by those not immunized you can give them a three-month period to find another caregiver you just can't terminate them abruptly. **Dr. Goldhagen** added that targeting the families is one strategy but as long as these families are getting misinformed messages from our state surgeon general and others it would behoove us to be politically active, to work upstream and speak up. Misinformation is being pushed to the public and some are buying it.

A large part of the problem is that the doctor who is a UF faculty member (**Latimore?**) is supported by UF. UF needs to understand that this doctor's stance on immunizations is not appreciated and that he should be terminated as faculty. We can have our voices heard and UF is facilitating his role and responsibility which impacts the health and wellbeing of children.

Dr. Kellogg, regarding the St. Vincent's Residency program reported that the program has been approved to have 12 Family Medicine residents a year going forward. Over the next three years they total will go to 36.

Secretary –Treasurer's Report: Dr. Kellogg asked that those still on the call to spread the word, talk to colleagues and join or renew your membership. We'll see everyone on June 14th at One Ocean for the Awards Dinner. Our next member call will be on Wednesday, July 31st at 8am. again

There being no further business, the meeting was adjourned at about 9:05am. The next meeting of the Northeast Florida Pediatric Society will take place on Wednesday, July 31, 2024 at 8:00am via Teams.

Approved by:

Julie Kellogg, MD
NEFPS President