

# "Preparing Future Pediatricians to Meet the Behavioral and Mental Health Needs of Children"

Thursday, April 5, 2018 5:30 pm - 9:30 pm

Friday, April 6, 2018 8:00 am - 5:00 pm

NASEM Offices Washington, DC



#### Dear Colleague,

It is our pleasure to welcome you to the stakeholders' meeting, "Preparing Future Pediatricians to Meet the Behavioral and Mental Health Needs of Children", organized by the National Academies of Sciences, Engineering, and Medicine (NASEM) in collaboration with the American Board of Pediatrics (ABP).

The overarching objective of this meeting is to improve outcomes for children and families through advancing pediatric education and training in behavioral and mental health (hereafter referred to as "B/MH").

You have been specially selected from a group of key leaders, including:

- Pediatric Department Chairs and Program Directors,
- Representatives from graduate medical education and pediatric organizations,
- Funders,
- Trainees.
- Parents, and
- Representatives from various health system organizations.

It is our goal that you and other participants walk away with new and/or reinvigorated professional and social networks and that you make specific action commitments designed to pave the way towards a brighter future for children, adolescents, young adults, and their families.

Thank you for bringing your expertise and enthusiasm to this important dialogue.

#### Best,

#### **Wendy Keenan**

Program Officer, NASEM Forum on Promoting Children's Cognitive, Affective, and Behavioral Health

#### Laurel K. Leslie

Vice President of Research, ABP Member, NASEM Forum on Promoting Children's Cognitive, Affective, and Behavioral Health

#### Marshall "Buzz" Land

Consultant, ABP Member, NASEM Planning Committee on Training the Future Child Health Care Workforce to Improve Behavioral Health

#### Julia McMillan

Member, NASEM Planning Committee on Training the Future Child Health Care Workforce to Improve Behavioral Health Outcomes for Children, Youth, and Families

#### Sarah Tracey

Associate Program Officer, NASEM Forum on Promoting Children's Cognitive, Affective, and Behavioral Health

#### **Ashley Tucker**

Program Coordinator, ABP



### 2018 Behavioral and Mental Health Stakeholder Meeting: "Preparing Future Pediatricians to Meet the Behavioral and Mental Health Needs of Children"

#### **OVERARCHING GOAL**

To improve outcomes for children and families through advancing pediatric education and training in behavioral and mental health (B/MH)

#### **OBJECTIVES**

- Raise awareness about children's B/MH and the need for a focused effort to improve general and subspecialty pediatric education and training in the prevention, identification, treatment, and appropriate referral of common B/MH issues
- Bring together pediatric chairs and program directors as dyads to engage with other critical stakeholders (other pediatric organizations, patients, trainees, undergraduate and graduate medical education leaders and funders, health systems representatives) in improving pediatric training
- Identify facilitators and barriers for improving training from perspectives of a variety of stakeholders, including academic programs, families, trainees, funders, and non-pediatric behavioral and mental health providers from other disciplines
- Identify actionable next steps

#### PLANNING COMMITTEE

Thomas Boat (co-leader), Cincinnati Children's Hospital Medical Center

Marshall "Buzz" Land (co-leader), American Board of Pediatrics and University of Vermont

Laurel Leslie (co-leader), American Board of Pediatrics and Tufts University School of Medicine

Julia McMillan (co-leader), John Hopkins University

Michael Artman, University of Kansas Medical Center

John Duby, Wright State University Boonshoft School of Medicine

Wendy Keenan, National Academies of Sciences, Engineering, and Medicine

Laura Miller, Ohio Perinatal Quality Collaborative

Jean Robillard, University of Iowa

**Terry Stancin**, Case Western Reserve University School of Medicine and MetroHealth Medical Center

Sarah Tracey, National Academies of Sciences, Engineering, and Medicine

Franklin Trimm, University of South Alabama Health System

Ashley Tucker, American Board of Pediatrics

Debra Waldron, American Academy of Pediatrics

#### **AGENDA**

#### THURSDAY, APRIL 5, 2018 KECK 100

F C	DECICEDATION			
5 – 6 pm	REGISTRATION			
5:30 – 6:30 pm	WELCOME AND INTRODUCTIONS			
	Facilitator: Marshall "Buzz" Land, American Board of Pediatrics			
	David Nichols, American Board of Pediatrics			
	· ·			
	<ul> <li>Wendy Keenan, National Academies of Sciences, Engineering, and Medicine</li> </ul>			
	Mike Artman, Children's Mercy Kansas City			
	Franklin Trimm, University of South Alabama Children's & Women's			
	Hospital and Association of Pediatric Program Directors			
	Troopital and Accordation of Foundation Frogram Directors			
6:30 - 6:45 pm	BUFFET DINNER SERVED			
6:45 - 7:15 pm	"THERE'S A BIG CRACK IN PEDIATRIC TRAINING, AND CHILDREN AND			
	FAMILIES ARE FALLING THROUGH IT"			
	Presenter: Laurel K. Leslie, American Board of Pediatrics			
7:15 – 7:45 pm	PARENT AND PATIENT VOICES			
	Facilitator: Laura Miller, Ohio Perinatal Quality Collaborative and March of			
	Dimes National Office			
	Teresa King, DC Department of Behavioral Health			
	Lydia Proulx, Youth M.O.V.E. National			
	Shauna Signorini, Oregon Health & Science University			
	Gridding Signorini, Gregori Fledicit & Ocience Shiversity			
7:45 - 8:20 pm	TRAINEE VOICES			
· ·	Facilitator: Debra Waldron, American Academy of Pediatrics			
	Stephanie Brennan, Texas Tech University Health Sciences Center			
	<ul> <li>Addison Gearhart, University of California, Irvine</li> </ul>			
	<ul> <li>Irène Mathieu, Children's Hospital of Philadelphia</li> </ul>			
	<ul> <li>Angela Sandell, Children's Hospital of Pittsburgh</li> </ul>			
	Kelly Wills, Boston Children's Hospital			
8:20 – 8:50pm	TRIZ EXERCISE			
	Facilitator: Franklin Trimm, University of South Alabama Children's & Women's Hospital and Association of Pediatric Program Directors			
	women's nospital and Association of Pediatric Program Directors			
8:50 – 9:15 pm	"THERE'S A BIG CRACK IN PEDIATRIC TRAINING, WHAT SHOULD, AND			
0.20 pm	CAN WE DO ABOUT IT?"			
	Presenter: Laurel K. Leslie, American Board of Pediatrics			

#### FRIDAY, APRIL 6, 2018 KECK 100

7:30 – 8 am	BREAKFAST AND MINGLE				
8 – 8:05 am	WELCOME AND OVERVIEW OF DAY'S AGENDA Wendy Keenan, National Academies of Sciences, Engineering, and Medicine				
8:05 - 9:15 am	WHERE ARE WE NOW? WHERE DO WE WANT TO BE? Facilitator: Julia McMillan, Johns Hopkins School of Medicine and American Board of Pediatrics PART 1: WHERE ARE WE NOW? Regulation and its role in B/MH training Ann Burke, Wright State University Boonshoft School of Medicine Sue Woods, American Board of Pediatrics  GME funding: Does it currently limit what we can do in B/MH training? Mike Artman, Children's Mercy Kansas City  PART 2: THE FUTURE: WHERE DO WE WANT TO GO; HOW DO WE GET THERE? Imagining the environment for training and care Terry Stancin, Case Western Reserve University School of Medicine, MetroHealth Medical Center  Can we get some help with reimbursement for training? Katherine Hobbs-Knutson, Duke Psychiatry and Behavioral Health Sciences, Alliance Behavioral Healthcare  The MH EPA: How will it help define the pediatrician of 2025? Kenya McNeal-Trice, UNC Department of Pediatrics Mike Barone, National Board of Medical Examiners  The Future: Meeting the needs of children John Duby, Wright State University Boonshoft School of Medicine				
9:15 – 9:30 am BREAK	DIRECTIONS FOR BRAINSTORMING BREAKOUT GROUPS AND BREAK Sarah Tracey, National Academies of Sciences, Engineering, and Medicine  Keck 100   Groups 1A & 1B Keck 101   Groups 2A & 2B Keck 105   Groups 3A & 3B Keck 106   Groups 4A & 4B				

9:30 - 10:30 am	BRAINSTORMING BREAKOUT GROUPS					
	Keck 100   Topic Area 1: Curricula Goals, Experience, and Assessment					
	Facilitator 1A: John Duby, Wright State University Boonshoft School of Medicine					
	Facilitator 1B: Franklin Trimm, University of South Alabama Children's & Women's Hospital and Association of Pediatric Program Directors					
	Keck 101   Topic Area 2: Faculty Engagement and Development					
	Facilitator 2A: Mike Artman, Children's Mercy Kansas City Facilitator 2B: Debra Waldron, American Academy of Pediatrics					
	Keck 105   Topic Area 3: Interprofessional Training and Practice					
	Facilitator 3A: Tom Boat, Cincinnati Children's Hospital Medical Center Facilitator 3B: Terry Stancin, Case Western Reserve University School of Medicine, MetroHealth Medical Center					
	Keck 106   Topic Area 4: Envisioning the Future					
	Facilitator 4A: Laura Miller, Ohio Perinatal Quality Collaborative and March of Dimes National Office Facilitator 4B: Jean Robillard, University of Iowa					
10:30 - 11:15 am	MERGING OF BRAINSTORMING TOPIC IDEAS (Stay in breakout rooms)					
11:15 am - 12 pm	ROUND ROBIN ROTATION: REPORTING BACK ON BRAINSTORMING BREAKOUT GROUPS					
	Facilitators: Marshall "Buzz" Land and Laurel Leslie, American Board of Pediatrics					
	See Flowchart & Map					
12 – 12:45 pm	LUNCH WITH ROTATING ABSTRACTS					
12:45 -1:45 pm	PERSPECTIVES FROM THE FIELD  Facilitator: Jean Robillard, University of Iowa  GME and Fellowship Funding  Ellen-Marie Whelan, Centers for Medicaid and Medicare Services  Laura Kavanagh, Health Resources and Services Administration					
	Insurers and Pediatric B/MH Patrick Conway					
	Health system reform and Pediatric B/MH Joan Alker, Center for Children and Families, Georgetown University McCourt School of Public Policy					

1:45 – 2:45 pm	COMMITMENT TO CHANGE DISCUSSION: "THERE'S A BIG CRACK IN PEDIATRIC TRAINING, WE'RE GOING TO DO SOMETHING ABOUT IT!" Facilitator: Laurel K. Leslie, American Board of Pediatrics				
2:45 – 3 pm	BREAK				
3 – 3:45 pm	INTERACTIVE "FISHBOWL" CONVERSATION: EXPANDING OUR VISIONS, PARTNERS, AND ASSETS Facilitator: Marshall "Buzz" Land, American Board of Pediatrics				
3:45 – 4 pm	PARENT/PATIENT RESPONSE Facilitator: Laura Miller, Ohio Perinatal Quality Collaborative and March of Dimes National Office				
4 – 4:05 pm	PERSONAL EPIPHANIES Facilitator: Terry Stancin				
4 – 4:10 pm	<ul> <li>SUMMARY AND KEY TAKEAWAYS</li> <li>Jean Robillard, University of Iowa</li> <li>Franklin Trimm, University of South Alabama Children's &amp; Women's Hospital and Association of Pediatric Program Directors</li> <li>Mike Artman, Children's Mercy Kansas City</li> <li>Jane Foy, American Academy of Pediatrics</li> <li>Sarah Tracey, National Academies of Sciences, Engineering, and Medicine</li> <li>David Nichols, American Board of Pediatrics</li> </ul>				
4:10 – 4:30 pm	EVALUATION AND ADJOURN  Marshall "Buzz" Land and Laurel Leslie, American Board of Pediatrics				
	ADJOURN				

### Brainstorming Breakout Groups - Day 2 9:30 am - 12:00 pm

#### **Breakout Group Questions for Consideration**

#### **BEFORE YOU START:**

- 1. Identify a notetaker
- 2. Identify a timekeeper
- 3. Use the questions below as a guide for your discussions
- 4. Remember, you will be merging with the other group discussing your same topic so leave time to summarize your ideas

\*\*\*See "Breakout Group Assignments" to review your assigned group.

#### **Group 1: Curricula Goals, Experience, and Assessment Worksheet**

Purpose: Explore current and potential educational strategies that are essential to behavioral and mental health training of future pediatricians.

#### Components

- 1. Starting with the end in mind, how will we know when a trainee has achieved the desired behavioral/mental health competencies?
- 2. What are the critical components of a curriculum for residents to achieve those competencies?
- 3. What are efficient, affordable and innovative experiences that can contribute to residents achieving these competencies? Particularly experiences that could be applied broadly across programs of differing sizes and resources.

Merged Group Facilitator: Franklin Trimm Merged Group Notetaker: John Duby

#### **Group 2: Faculty Engagement and Development**

Purpose: Explore opportunities and challenges of faculty engagement and development for implementing curriculum on behavioral, emotional, and mental health for future pediatricians.

#### Components

- 1. Starting with the end in mind: what is the measure of faculty engagement?
- 2. Engagement with the process
- 3. Engagement with self-learning
- 4. Engagement with trainees
- 5. What should faculty development entail?
- 6. Are there models for learning that have been successful? What are the barriers for implementation?

Merged Group Facilitator: Mike Artman Merged Group Notetaker: Debra Waldron

#### **Group 3: Interprofessional Training and Practice**

Purpose: Explore current and potential educational activities that enhance interprofessional training and practice.

Merged Group Facilitator: Terry Stancin Merged Group Notetaker: Tom Boat

#### Discussion components:

- 1. What health professionals do we want to see participating in the behavioral and mental health training of future pediatricians?
- 2. What might be ideal vs. most reasonable?
- 3. What roles can other health professionals assume in the training of pediatric residents?
- 4. How can pediatricians participate in the training of the mental health professional so that they develop the skills needed to provide interprofessional care in pediatric settings?
- 5. What are the training activities that promote skills for pediatricians to function as part of interprofessional teams?
- 6. Are there basic tenets (e.g., mental health trainees and pediatric residents should have joint training experiences)?
- 7. What kind of training activities might supplement basic experiences (e.g., simulated team experiences).
- 8. How do we get the health care system to build and support interprofessional health care teams? What are options for billing, reimbursement now and in the future to sustain interprofessional health care teams?
- 9. What should the end product look like?

#### **Group 4: Envisioning the Future**

Merged Group Facilitator: Jean Robillard Merged Group Notetaker: Laura Miller

The increasing number of children with diagnosed mental health disorders seen in primary care settings, the significant undersupply of mental health professionals trained to serve children, the lack of community services especially in rural areas, and the inadequate financing of mental health services are severely limiting the accessibility of mental health services to children. These problems are complex and cannot be solved with one single approach. Also, as the complexity of mental health problems being addressed rises, the need for new and more efficient collaborative approaches increase.

#### Some have suggested:

- 1. to develop a real system of care in which primary care pediatricians will be able to consult as needed with child psychiatrists via telepsychiatry or telephone either informally or formally
- to foster formal collaboration program between mental health specialists and practicing pediatricians
- 3. to co-locate mental health specialists work in the PCC's practice to improve access to care and enhance care coordination
- 4. to disseminate educational resources
- 5. to implement psychopharmacology quality initiatives to assure appropriate use of drugs and follow-up care
- 6. to improve reimbursement for mental health services in primary care by allowing a wider range of providers to bill for mental health services
- 7. by promoting research in the use of artificial intelligence to assist primary care physicians with the diagnosis and treatment of this population.

### Commitment to Change Breakout Groups - Day 2 1:45 pm - 2:45 pm

#### 2018 Behavioral and Mental Health Stakeholder Meeting: "Preparing Future Pediatricians to Meet the Behavioral and Mental Health Needs of Children"

#### **Commitment to Change Worksheet**

Project Leadership Names:						
What are you committing to change at your organization and/or as an individual over the next 6 months?						
"I am organizing (WHO — leadership & constituency) at (WHERE) to do (WHAT — measurable aim) by (HOW — tactics) because (WHY — motivating vision) by (WHEN — timeline)."						

#### **Six Strategic Questions to Consider While Making these Decisions:**

- 1. Motivating Vision: What is the <u>urgent challenge</u> you are choosing to address? What is your <u>hopeful vision</u> of the future? How will your project move you <u>one step closer</u> to this vision?
- 2. Theory of Change: What is your project's theory of change? (If we do X, Y will happen).
- 3. People: Who are your <u>people</u>? What <u>stakeholders</u> have an interest in your project? Who will be members of your <u>leadership team</u>? How will you grow new leaders? How will you manage naysayers?
- 4. Assets: What <u>assets</u> (resources, skills, talents, and experiences) do your stakeholders and leaders bring? How can you turn your collective assets into what you need to achieve your measurable aim?
- 5. Measurable Aim: What is the strategic objective on which you will focus your energy a clear, measurable aim to which you can commit?

An effective aim has the following qualities:

- Single strategic aim choose a single aim and focus all resources strategically on achieving it (even if different stakeholders contribute different resources and employ different tactics)
- Motivational force the aim connects with the heart and motivates people to act
- Leverage point the aim focuses on a place within a complex system where "a small shift in one thing can produce big changes in everything"
- Momentum building the aim allows you to pursue short-term wins within a longerterm, sustained effort
- Measurable you can easily determine and describe the aim's impact
- **Visible, clear** you can easily discern whether you are succeeding or failing, so that you can learn and improve
- Concrete the aim allows you to begin to act now and has a foreseeable end point that creates urgency to act
- 6. Tactics & Timeline: What are your <u>tactics</u>? By when will you <u>kick off</u> the project? When will you <u>evaluate</u> your project? After it ends, what's <u>next in building towards your long-term vision</u>?

### **APPENDIX**

#### **MISSION**

The American Board of Pediatrics (ABP) certifies general pediatricians and pediatric subspecialists based on standards of excellence that lead to high quality health care during infancy, childhood, adolescence, and the transition into adulthood.

The ABP certification provides assurance to the public that a general pediatrician or pediatric subspecialist has successfully completed accredited training and fulfills the continuous evaluation requirements that encompass the six core competencies: patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice. The ABP's quest for excellence is evidenced in its rigorous evaluation process and in new initiatives undertaken that not only continually improve the standards of its certification but also advance the science, education, study, and practice of pediatrics.

#### **VALUES**

- Accountability to the public
- · Fairness and excellent service
- Communication and transparency
- Continuous quality improvement

#### **VISION**

The "North Star" for the ABP is and will remain the improvement of health outcomes for children, adolescents, and young adults (hereafter, "children").

#### **GUIDING PRINCIPLES**

- The ABP is primarily accountable to the children and families that we serve.
- The ABP is also accountable to the public, including insurers, consumer groups, payers, and credentialers.
- To promote professional self-regulation and empower pediatricians to continually improve child health outcomes, the ABP has a responsibility to diplomates to utilize assessments that are fair, valid, reliable, and contribute to their lifelong professional development.
- The ABP acknowledges the importance of the varied professional roles that pediatricians play in improving the health care of children and strives to align assessments with professional activities.
- The ABP sets standards for key elements of accredited training based on health needs of populations served, recognizing the value added by the interdependence of the relationship between certification and accreditation.
- The ABP balances assessment strategies to embrace both assessment "of" and "for" learning across the
  professional life of the diplomate.
- The ABP is committed to the assessment of all core competencies.
- The leadership of ABP invites open dialog and communication with the public, our diplomates, other organizations, and stakeholders.
- The ABP's strong belief in improvement leads us to continually evaluate and improve our policies, programs, and processes.
- The ABP priorities focus on work that our organization is uniquely positioned to do.
- The ABP joins forces with other organizations and parent groups that align with our mission, each bringing its unique perspective but harmonizing our voices to advocate for enhanced quality in pediatric care.

## PROMOTING CHILDREN'S COGNITIVE, AFFECTIVE, AND BEHAVIORAL HEALTH

AN ACTIVITY OF THE BOARD ON CHILDREN, YOUTH, AND FAMILIES



#### **MISSION**

The Forum on Promoting Children's Cognitive, Affective, and Behavioral Health (C-CAB) aims to build a stronger research and practice base for practitioners and policy makers concerned with programs, practices, and policies that help promote the cognitive, affective, and behavioral (CAB) health of all children, including those with disabilities.

Through public workshops, commissioned papers, and ongoing dialogue, C-CAB brings together experts and practitioners to consider the evidence about implementation and its implications for policy and practice. In an environment free from partisan pressures and preset agendas, C-CAB members share their own research and perspectives and also look beyond them—making connections within and

across disciplines, sharpening questions, sparking new ideas, and exploring possible solutions. The C-CAB Forum offers a non-partisan setting for practitioners, researchers, policy makers, and other stakeholders to build relationships and unravel complicated issues over time.

The C-CAB Forum is guided by three strategic priorities:

- Identify opportunities for research in children's CAB health;
- Engage and educate policy makers and the public, including parents, families, researchers, and practitioners;
- Support the scaling up of effective interventions and programs.

#### **MEMBERS**

C-CAB Forum members hold expertise in a wide range of areas including child and adolescent psychiatry, health care systems, implementation and prevention sciences, pediatrics, psychology, policy, public health, social work, and substance abuse prevention. Members include representatives from sponsoring organizations as well as non-sponsor members who bring expertise and experience in the areas above.

Sponsoring organizations include federal agencies, philanthropic foundations, professional associations, and other relevant organizations. **See sponsoring organizations here**.

Members collaboratively drive the mission of the Forum. In 2017, members:

- Collaborated with the Forum on Global Violence Prevention, the Roundtable on Population Health Improvement, and the Roundtable on the Promotion of Health Equity on three public events addressing issues that impact the lives of children;
- Engaged representatives from state and national organizations regarding their efforts on improving children's behavioral health;
- Convened on quarterly membership calls.

#### **COLLABORATIVES**

**Collaboratives** are working groups of C-CAB members and outside stakeholders who meet to enhance ongoing conversations on issues relevant to improving children's behavioral health.

The Collaborative on Healthy Parenting in Primary Care, launched in 2015, highlighted research and policy for integrating multi-generational preventive interventions into primary care settings to advance the health of children and families. This collaborative connects practitioners, researchers, and policy makers to highlight promising programs, draft

articles for publication, and present on the evidence of family-focused preventive interventions at conferences and other events.

Additional Collaboratives that launched in 2017:

- Collaborative on Creating an Integrated Health Care Workforce to Improve Cognitive, Affective, and Behavioral Health Outcomes for Children and Families;
- Vital Signs for the Health and Wellbeing of Children and Families

#### **2017 YEAR IN REVIEW**

#### **C-CAB FORUM ACTIVITIES**

July 31-August 1, 2017

**The Neurocognitive and Psychosocial Impacts of Violence: A Workshop** of the Forum on Global Violence Prevention and the Forum on Promoting Children's Cognitive, Affective, and Behavioral Health.

This public workshop examined the research on the impacts of exposure to violence and trauma on children's neurocognitive and psychosocial outcomes. Presentations focused on exposure to trauma in childhood and its impact across the life course.

The workshop also explored opportunities for prevention and intervention that are grounded in science -- especially the ways in which parents and caregivers can work to build resilient and mentally-strong children and youth.

#### October 13, 2017

The 2017 DC Public Health Case Challenge, This annual activity, co-sponsored by the National Academy of Medicine, the Roundtable on Population Health Improvement, and the C-CAB Forum aims to promote interdisciplinary, problem-based learning around a public health issue of concern to the local Washington, DC community. Universities in the DC area form multidisciplinary teams to address a challenge

based on a local public health problem. Teams devise a comprehensive intervention which they present to an expert panel of judges.

2017 Case: Lead and Adverse Childhood Experiences: Neurological and Behavioral Consequences for Youth in the District of Columbia. Read the case.

#### November 14, 2017

Achieving Health Equity-Promoting Cognitive, Affective, and Behavioral Health: A Workshop of the Forum on Promoting Children's Cognitive, Affective, and Behavioral Health and the Roundtable on the Promotion of Health Equity.

This workshop explored health equity as it pertains to the behavioral health of children and families. Specifically,

presenters from state and local organizations highlighted policies and practices that address the barriers that exist in communities, both rural and urban. The workshop also included presentations on the social determinants of health, opportunities for behavioral health promotion across sectors and settings, and access to effective universal and targeted services that improve the behavioral health of children and families

#### **2017 PUBLICATIONS**



Implementing Evidence-Based Prevention by Communities to Promote Cognitive, Affective, and Behavioral Health in Children: Proceedings of a Workshop

Visit <u>www.nas.edu/communityprevention</u> to read the Workshop Proceedings and Workshop Proceedings-in-Brief.



Training the Future Child Health Care Workforce to Improve Behavioral Health Outcomes for Children, Youth, and Families: Proceedings of a Workshop

Visit <u>www.nas.edu/healthcarework-force</u> to read the Workshop Proceedings and Workshop Proceedings-in-Brief.



www.nas.edu/ccab www.nas.edu/healthyparenting www.nas.edu/healthcareworkforce

#### Forum on Promoting Children's Cognitive, Affective, and Behavioral Health

#### **Members**

#### William R. Beardslee, M.D. (Co-Chair)

Director, Baer Prevention Initiatives
Chairman Emeritus, Department of Psychiatry
Boston Children's Hospital
Distinguished Gardner/Monks Professor of Child
Psychiatry
Harvard Medical School

#### C. Hendricks Brown, Ph.D. (Co-Chair)

Professor

Departments of Psychiatry and Behavioral Sciences, Preventive Medicine, and Medical Social Sciences Northwestern University

#### Harolyn M.E. Belcher, M.D., M.H.S.

Director, Center for Diversity in Public Health Leadership Training Kennedy Krieger Institute

#### Thomas F. Boat, M.D.

Professor of Pediatrics and
Dean Emeritus, University of Cincinnati College
of Medicine
Cincinnati Children's Hospital Medical Center

#### Felesia Bowen, Ph.D., DNP, APN

Assistant Professor Director, Center for Urban Youth and Families Robert Wood Johnson Foundation Nurse Faculty Scholar Rutgers University School of Nursing

#### Debbie I. Chang, M.P.H.

Senior Vice President
Policy and Prevention
Nemours Children's Health System

#### Nathaniel Counts, J.D.

Director of Policy Mental Health America

#### Alexa Eggleston, J.D.

Senior Program Officer, Domestic Programs Conrad N. Hilton Foundation

#### J. David Hawkins, Ph.D.

Endowed Professor of Prevention School of Social Work University of Washington

#### Lynda Gargan, Ph.D.

Executive Director

National Federation of Families for Children's

Mental Health

#### Kimberly E. Hoagwood, Ph.D.

Cathy and Stephen Graham Professor of Child and Adolescent Psychiatry Department of Child and Adolescent Psychiatry School of Medicine New York University

#### Jennifer W. Kaminski, Ph.D.

Team Lead, Child Development Studies
Division of Human Development and Disability
National Center on Birth Defects and
Developmental Disabilities
U.S. Centers for Disease Control and Prevention

#### Kelly J. Kelleher, M.D.

Director, Center for Innovation in Pediatric Practice

Vice President, Health Services Research
Vice President, Community Health and Services
Research

The Research Institute at Nationwide Children's Hospital ADS/Chlapaty

Endowed Chair for Innovation in Pediatric Practice

Professor of Psychiatry & Pediatrics The Ohio State University

#### Uma Kotagal, M.S.S.B., M.Sc.

Senior Executive Leader, Population and Community Health Senior Fellow Cincinnati Children's Hospital Medical Center

#### Laurel K. Leslie, M.D., M.P.H.

Board of Directors, American Board of Pediatrics Professor of Medicine and Pediatrics Tufts University School of Medicine

#### Mary Ann McCabe, Ph.D., ABPP

Society for Child and Family Policy and Practice, Society of Pediatric Psychology Associate Clinical Professor of Pediatrics George Washington University School of Medicine Affiliate Faculty in Psychology, George Mason

#### Jennifer Ng'andu

University

Program Officer
Robert Wood Johnson Foundation

#### Mary Jane Rotheram-Borus, Ph.D

Director, Global Center for Children and Families Director, Center for HIV Identification Prevention & Treatment Services (CHIPTS) Department of Psychiatry University of California, Los Angeles

#### Andy Shih, Ph.D.

Senior Vice President, Public Health and Inclusion

**Autism Speaks** 

#### José Szapocznik, Ph.D

Professor Public Health Sciences, Architecture, Psychology, and Counseling Psychology & Educational Research

Chair Emeritus, Department of Public Health Sciences

Honorary Founding Director, Miami Clinical & Translational Science Institute

Co- Director, Florida Node Alliance, National Drug Abuse Treatment Clinical Trials Network University of Miami Miller School of Medicine

#### Vera Frances "Fan" Tait, M.D., FAAP

Associate Executive Director
Director, Department of Child Health and
Wellness

#### W. Douglas Tynan, Ph.D., ABPP

American Academy of Pediatrics

Director of Integrated Care American Psychological Association

#### Deborah Klein Walker, Ed.D.

Immediate Past President, Global Alliance for Behavioral Health and Social Justice

#### David W. Willis, M.D., FAAP

Division Director of Home Visiting and Early Childhood Systems Maternal and Child Health Bureau Health Resources and Services Administration