



Wednesday, July 31, 2024

8:00am – Teams

MINUTES

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

ADOPTION OF MINUTES: The minutes of the May 29, 2024 NEFPS meeting were adopted as written.

OLD BUSINESS

Dr. Bedard reported that the awards dinner was successful. There has been an increase in the membership, but we are hoping it will continue to rise. He asked that those on the call talk to peers and colleagues about NEFPS. He also noted that PAs and APRNs are also welcome to join. The more members we have the more powerful and involved we can become in the community. We plan to continue the educational “Small Talks” that we started at the end of 2023. We also had a time crunch in the planning of the awards dinner so we were not able to give as many as we would have liked. That should continue to pick up in the coming year. If anyone has any thoughts, questions, or ideas to increase membership please let us know.

NEW BUSINESS

Dr. Bedard introduced the speakers from NAMI, Vance Meyer and Cheryl Virta saying that they will share what NAMI does and how NAMI can be utilized in a world inundated with mental health problems and a lack of care. Mr. Vance stated they NAMI was excited to be given the opportunity to present as they extend their model as it relates to youth mental health. Mr. Vance is a volunteer and the President of the Board of the National Alliance on Mental Illnesses in Jacksonville. I am a retired head of corporate communication for CSX and most recently with the Nemours foundation for a couple of years. Cheryl Virta is an attorney who retired her practice last year after volunteering for NAMI. She is now full-time staff as operations manager and advocacy liaison for NAMI. The NAMI national organization is the nation’s largest grassroots mental health organization with people who have experienced mental illness directly or as caregivers, we work to support each other using trained facilitators and an evidence-based set of programs, that you might think of as support groups. It is central to our mission to share personal journeys. Ms. Virta shared her personal history with a family member with several mental health issues. She found NAMI through Google and started attending their family support group where she was able to hear from other people dealing

with someone with a mental health condition. She also took part in an eight-week course where she learned a great deal about mental illness, having a crisis plan, hearing from folks who were successfully dealing with mental illness. She learned how to communicate with her family member who is now stable and in therapy. She has also learned through NAMI how to take care of herself and have the tools to manage things better, contacts to reach out to for support. Her experience with NAMI and the help they provided her led her to volunteer with them. Cheryl's experience highlights the family services NAMI offers but NAMI also offers help for the person trying to navigate their mental illness.

Mr. Vance talked about the power of family and people ask him about his experiences. He says the world of mental illness is divided in two parts. One is the people experiencing mental illness who have people who care about them and those who do not have anyone who cares. When parents or caring people come to NAMI who feel like they've "turned over every stone" but still have gained the knowledge they need to deal with their situation soon realize that they have something to share with others and magic occurs in NAMI meetings. Personally, 40 years ago Mr. Vance had a family member commit suicide which led to his own depression which led to hospitalization. He vowed that if he was ever able to climb out of that he was going to help others suffering from depression. He and his wife are caring for a son who has multiple mental health diagnoses. They have spent a long time looking for answers that they have found and still finding others.

NAMI's Jacksonville affiliate is relatively new. It began with some parents looking for answers and ways to support each other, many are still around today helping and raising money. The CDC reporting on the prevalence of mental illness in our area could be as high as 200K people living with mental illness in Duval and Clay counties alone. That does not include young people or the families we serve. Our small staff and large volunteer base builds on our firsthand experiences with training and evidence-based support programming that keeps our discussions structured and positive. The reason it is called an alliance is because everyone is an equal, important partner with something to offer towards NAMI's success. Mental health practitioners, health practitioners, community leaders, even politicians and legislators who advocate for mental health have something to offer. We do not offer professional services, we are not therapists, but we do educate and help break stigma, direct people to needed help, we provide support and spend time advocating for policies that help people with mental illness. Ms. Virta is the key person who keeps track of all of that and liaisons with the community and politicians. Services NAMI provides to end the silence around the stigma of mental illness: courses and support groups; presentations for teens and teachers; presentations for corporations & community groups; Northeast Florida public policy advocacy group (led by Ms. Virta); helpline offering vital information and resource-leads; integrating NAMI services with 988 crisis support system that was mandated by Congress and funded through the states.

NAMI is increasing their focus on youth. Support groups focused specifically on youth are relatively new. The mental health crises in America have taken on a new shape when dealing with kids. The CDC estimates the one in five kids, ages, 13-18 have or have had a serious debilitating mental illness. NAMI has done a great job addressing the needs of adults and adult caregivers for kids. Since COVID the entire mental healthcare system is strained, and NAMI felt it crucial to provide support services specifically for young people. NAMI goes into

schools to provide education there and now have support groups for youths (high school age 14-18) and young adults. Concerns for children under fourteen can be addressed with the family-focused support group. There are other considerations with the youth and young adult groups, unlike the adult/family group, when sharing information ensuring confidentiality is paramount but engaging with parents, educators and medical practitioners is also important, as well as legal issues. We are figuring out how NAMI can be there while working with all these factions to provide the needed support. NAMI should be considered an extension of pediatric practices and would be to everyone's advantage to all when addressing the problems of youth mental health. Sending parents to us so they can get useful help and vent their concerns and frustration is so helpful. We welcome your ideas, as pediatric practitioners, for financial support that we might not think of, especially in this new area for us.

Dr. Bedard thanked Mr. Vance and Ms. Virta for the information they provided commenting that this is an area that pediatricians struggle with on a regular basis, whether personal, in the community, or at their practices.

STANDING BUSINESS

School Health Program: No report

FL Chapter - American Academy of Pediatrics (FCAAP) & FMA/CMS –**Dr. Rathore** reported that Dr. Alissa Rana is now the president-elect for the FCAAP. The Annual Meeting of the FCAAP is August 20-September 1 in Orlando at Disney World. Further information can be found at www.fcaap.org.

AAP Report – **Dr. Rathore** reported that he attended an inspirational AAP Leadership Conference where delegates from all over the country to develop resolutions and provide advice and guidance to the APP Board regarding issues important to the membership. One of the resolutions regarded support for pediatricians in states where DEI is under attack. Dr. Rathore will provide the top ten resolutions to be shared with the members and will be included in the minutes. The annual meeting of the AAP will be in Orlando September 27-October 1, also in Orlando.

WCH – **Dr. Toney** reported:

- **System-wide** – Freestanding ER opened at the State Road Exit 16 in St. John's County. There is a higher percentage of pediatric patients then expected around 33-50% on any given day. The facility at Nassau Crossing is slated to open in the next quarter. Both provide Baptist and pediatric services.
- Thanks to all who participated in the physician engagement survey, particularly the provider one. There were 170 respondents which is a substantial double digit percent increase from last year. Preliminary results are back. Will have more detail to report on the October member call. Forty APPs responded but anyone with WCH privileges is welcome to complete the survey. For WCH patient experience has gone up in NEO, ER, and inpatient but still below where we would like them. Quality metrics regarding hospital-acquired infections and other hospital-acquired conditions are hitting target for fiscal year 2024. Goals for next year will be discussed on the next call.

University of Florida: **Dr. Zenni** mentioned Dr. Hudak stepping down as pediatric department chair at the UF College of Medicine, but he will not be completely retiring yet. The College of Medicine is in the final stages of its search for a new chair. It should be finalized over the next month and the new chair announced. **Dr. Rathore** mentioned that Dr. Fletcher Osborn has joined the UF faculty in peds ID. This addition to staff has opened up the outpatient schedule so that most patients are seen the same week.

Nemours Children's Health (NCH) Update: No report

St. Vincent's Family Medicine Residency Program Update: **Dr. Rolle** reported that St. Vincent's was back online.

Secretary –Treasurer's Report: Dr. Osman reported that the final bill for the awards dinner was paid, that she is now on the bank account to conduct Society business and we have around \$1300 in our account.

Discussion/Membership/Society Future – **Dr. Rolle** addressed the problem with membership saying that this is a struggle many organizations experience. She feels that folks do not see the value and that NEFPS membership is one of the cheapest, every pediatrician in the city should be involved. She suggested a membership drive, a fun event for everyone to come out to, mingle and get to know each other. Dues would be paid at the event. Doctors do not check their emails on a regular basis. We do ourselves a disservice if we do not get involved, do something on a big scale. It is a matter of name recognition, competing priorities and showing value.

Dr. Bedard noted that as membership increases, we will be able to do more. We are planning on an educational dinner this Fall, when the date and venue are settled notices will be sent. Increased membership will also allow more work on advocacy which has been lacking. Dr. Toney asked about goals for membership which would ideally be 100% of NE Florida pediatric providers. Pre-COVID membership was around 230, if we could get to 150-200 in the next year that would be ideal.

Dr. Zenni agreed with Dr. Rolle's points and felt that educational opportunities and meals were not enough of a draw, many do not see the benefit of membership to themselves or their practices. What has NEFPS done for the peds community? She is cutting back on her own professional memberships. NEFPS needs to be able to show and articulate our purpose, how we are effective and how more members would further success.

Dr. Bedard said that after COVID NEFPS has not had the support or funding to support our members and families, advocacy is lacking. NEFPS had, in the past donated through our grants program to different groups, increased membership would allow us to do that again. We have a lot of room to improve and grow and we are open to all suggestions. We have a long way to go.

Dr. Reddy added that she finds the membership calls a very informative venue to learn about resources available in our community and that this is valuable information for all the pediatricians in our community. We all work in our individual silos, different departments, the subspecialists in the hospital, without a comprehensive network for communication. For instance, the earlier NAMI presentation was a resource she knew nothing about. She feels that the sharing of information like that is the most important function that NEFPS can make available, a communication network to inform the pediatric community in Jacksonville.

Dr. Zenni wondered if there could be some kind of welcoming packet or letter for new pediatricians.

Dr. Rathore noted that with folks working so much their down time is spent with their families. He feels like NEFPS would be more successful if it became a fun, social entity where conversation and sharing is fostered not educational events, CMEs are not a draw. Many events, like Grand Rounds do not happen anymore, practice patterns have changed, community pediatricians do not come to the hospital to see patients. WCH did start a luncheon on Thursdays that many attend and is a place to interact with colleagues.

Dr. Bedard noted that we have balanced the educational events with fun and an opportunity to interact with pediatric colleagues. We have many challenges. FYI, NEFPS educational events do not award CEUs, they are peer to peer presentations on subjects pertinent to pediatric providers.

There being no further business, the meeting was adjourned at about 9:12am. The next meeting of the Northeast Florida Pediatric Society will take place on Wednesday, October 30, 2024, at 8:00am via Teams.

Approved by:

Mark Bedard, MD
NEFPS President