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# Health Care Research and Quality (AHRQ) Forum

—*Deborah Gaebler-Spira-AACPDM Past President 2009-2010; Diane Damiano, PhD, PT-President 2007-2008; Peter Rosenbaum, MD-President 1995-1996; Michael Msall, MD-Chair, Treatment Outcomes Committee*



The AACPD enthusiastically participated at the October 26<sup>th</sup> 2010 Agency for Health Care Research and Quality (AHRQ) “Effective Health Care Program Issue Exploration Forum on Cerebral Palsy” held at AHRQ headquarters in Rockville, Maryland. Among the 60 participants were three AACPD past presidents, a past chair of the Treatment Outcomes Committee, and six active AACPD members. Cerebral Palsy was identified as one of three developmental disability topics of interest for health comparative effectiveness research at the Agency for Health Research and Quality, the others being autism and intellectual disability. These topics were apparently chosen because of the need to address unmet clinical outcomes research needs for individuals with developmental disabilities and functional limitations, so as to address gaps in comparative evidence effectiveness and health care disparities in vulnerable populations.

AHRQ, a previously underfunded agency, has done a lot of work on defining treatment guidelines primarily through a methodology that compares treatments. (See AHRQ website [www.ahrq.gov](http://www.ahrq.gov)) Though our Academy has been in the forefront of systematic reviews, the AHRQ is setting an agenda to address the gaps in research and the lack of support for methodologies that may be better suited for the study of chronic conditions that are complex, are integrated into many systems, and do not fit the model of RCTs that are funded primarily through NIH. In essence they are our friends! I quote from their factsheet:

“The Agency for Healthcare Research and Quality (AHRQ) is the lead federal agency charged with improving the quality, safety, efficiency, and effectiveness of health care for all Americans. As one of 11 agencies within the US Department of Health and Human Services (DHHS), AHRQ supports health services research that will improve the quality of health care and promote evidence-based decision-making. In 2005, AHRQ launched the Effective Health Care (EHC) Program to fund individual researchers, research centers, and academic organizations to produce systematic reviews and comparative effectiveness research for clinicians, consumers and policymakers. EHC Program research focuses on 14 priorities health conditions as determined by the Secretary of DHHS.”

# President's Message

Reaching out and reaching others!

—Scott Hoffinger, MD



Thank you to the membership for making 2010 a great year for the AAPCDM. Our membership numbers are strong with a stable base of about 1100 members from all fields. Our finances are holding well – in fact, 2010 may be the best year yet for the AACPDm. The meeting in DC helped that financial performance exceeding budget projections (making Rich Stevenson happy). I just heard that this year set yet another record for abstracts submitted for the Las Vegas meeting. Add to this a new research grant from the Pedal with Pete Foundation and your Academy is in good stead. This all serves to give us a strong base from which to carry out our mission.

In addition to that mission, there is a sense that some of us share about your Academy's role in the many issues involving children with disabilities around the world. That role is to be "primary." We desire to be primary. We desire to be the primary source of information for professionals,

the primary source of information when parents ask, the primary source of information when pharmaceutical, educational, and governmental agencies seek information on children with cerebral palsy and other developmental disabilities. Put even more simply, it is our goal to be the "go to" professional organization when individuals seek to discuss or learn about issues in the patients we serve.

We are well positioned to be just that organization. Think of the breadth of talent we have, the range of speakers we have hosted, and the depth of research our members carry out. Even while many of us have other organizations that we belong to, the AACPDm remains the "go to" organization for us for the population that we are passionate about. This is shown by our members being asked to serve on national committees, governmental research groups, and large philanthropic and other lay organizations.

You should be proud of your membership. Your Academy thanks you, just as your patients and their families thank you. It is working. Keep it up.

## AACPDM 65th Annual Meeting Las Vegas, Nevada, USA October 12-15, 2011

It is our pleasure to invite you to participate in the AACPDm 65<sup>th</sup> Annual Meeting scheduled to be held at the Rio All Suite Hotel in Las Vegas, NV. The AACPDm's Scientific Program Committee will be reviewing over 400 high-quality abstracts in order to assemble an outstanding program which will include: Free Paper oral presentations, Scientific and Demonstration Poster displays, Instructional Course lectures and Breakfast with the Experts sessions. There will pre-conference sessions, along with a new and improved Family Forum session. There will also be notable guest speakers and award recipients that will intrigue your professional appetite.

Registration for the meeting will open by June. For more details and updated information please visit the 65<sup>th</sup> Annual Meeting website: <http://www.aacpdm.org/meetings/2011/>



Please join us for this meeting which promises to have something for every medical discipline and the meeting will ultimately lend itself for long-term networking and collaboration. ■

# News from Mac Keith Press

— Caroline Black, Mac Keith Press

We hope that members have been listening to the podcasts discussing articles in *Developmental Medicine & Child Neurology*, now at [http://onlinelibrary.wiley.com/journal/10.1111/\(ISSN\)1469-8749/homepage/podcasts.htm](http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1469-8749/homepage/podcasts.htm)

Recent podcasts include Donald Greydanus and Theresa Lax-Pericall on suicide risk in adolescents with chronic illness, and Emmanuel Godeau and Peter Rosenbaum on improving attitudes towards children with disabilities in school.

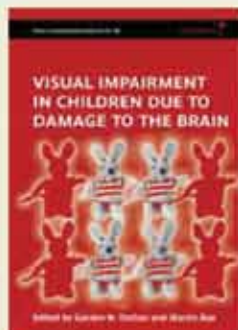
New books out recently include;

- *Visual Impairment in Children due to Damage to the Brain*, edited by Gordon Dutton and Martin Bax
- *Comorbidities in Developmental Disorders* by Martin Bax and Christopher Gillberg
- The third edition of *The Neurological Examination of the Child with Minor Neurological Dysfunction*, by Mijna Hadders-Algra with a foreword by Bert Touwen. This book includes an invaluable CD-ROM of videos illustrating typical and atypical performance of the tasks described at different ages.

The next book to be published in the Clinics series will be *Alcohol, Drugs and Medication in Pregnancy: the Outcome for the Child*, edited by Phillip Preece and Ed Riley.

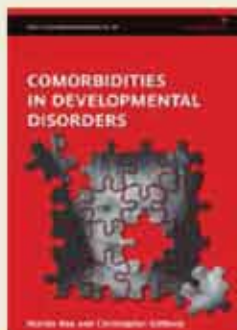
Finally, may I remind you of the Mac Keith Press online books collection? This contains 20 recent titles and is on the Ebrary platform. If your librarian is interested, he/she should contact me ([caroline@mackeith.co.uk](mailto:caroline@mackeith.co.uk)) for further information.

If you would like to have a look at the collection yourself, do let me know so that I can give you a time-limited password.



ISBN: 978-1-898683-86-5  
HARDCOVER / 224 PAGES  
SEPTEMBER 2010

Cerebral visual impairment in children, is the most common cause of visual impairment in children in the developed world, yet the subject is in its infancy, with very little published to date. Information on this complex topic has been needed by all disciplines working with disabled children for many years; thus, this book, a major contribution to this exciting and important field, will be welcomed.



ISBN: 978-1-907655-00-5  
PAPERBACK / 176 PAGES  
NOVEMBER 2010

The contributors, all world experts in their fields, discuss what we can learn from the presence of comorbidities about the aetiology and treatment of neurodevelopmental disabilities. In particular, they demonstrate how our increasing understanding of the mechanisms underlying the common association of many 'comorbidities' is helping us to understand the natural history of these conditions and improve our management of them.



ISBN: 978-1-898683-98-8  
PAPERBACK / 168 PAGES  
NOVEMBER 2010

This highly practical book brings the examination of minor neurological dysfunction developed by Bert Touwen and his colleagues in Groningen right up to date. The approach is designed to detect a possible neurobiological basis for learning, behavioural and motor coordination problems in a child and thus inform decision-making and management.

## Order Information

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Mac Keith Press

# The Perlman Center at Cincinnati Children's

## A Model for Integrated Therapies and Ongoing Care Coordination for Cerebral Palsy

—Linda Wnek, Senior Director and Jilda Vargus-Adams, MD, MSc

At Cincinnati Children's Hospital Medical Center in Cincinnati Ohio, children, youth and adults with cerebral palsy and their families find a unique resource at the Aaron W. Perlman Center. The Perlman Center, part of Cincinnati Children's new Comprehensive Cerebral Palsy Program, offers a unique approach to therapy and support programs that focus on improving outcomes for kids with cerebral palsy across the age continuum.

From early intervention through support for teens and adults, the Perlman Center provides an holistic approach to integrated therapy, developmental support and care coordination designed to address the complex needs of kids with CP and their families.

The Perlman Integrated Therapy model was developed for the young child, from infancy to kindergarten age, to be more responsive to the critical learning and developmental needs of this age group and to recognize the important role of parents. Unlike conventional outpatient therapy, the therapy program is designed to provide small groups of children with frequent and extended contact with a dedicated interdisciplinary team of occupational, physical and speech therapists...all in one environment. An early childhood specialist and a social worker complete the Perlman care team. Children become familiar with the early childhood environment and families stay connected through early and ongoing care coordination and support. Within the larger CP Program, the care team expands to include all of the child's physicians and care providers at Cincinnati Children's.

At the earliest age possible, early intervention programs are structured for a quality first program for families. Within the small group model, the care team provides one-on-one therapy combined with focused parental education to assist with handling and care management at home. The group environment provides opportunities for parent-to-parent support, which often results in long-standing relationships. As with all Perlman programs, care and resource coordination is provided by the team social worker.

Upon first observation, the Integrated Therapy Program for the preschool years has the look and feel of a preschool environment with children engaged in activities and interacting with peers. However, the primary focus for the therapy team is on functional outcomes. The interdisciplinary plan of care for each child and family is developed to provide a holistic therapy-rich experience, which moves each child forward toward maximum participation and independence. Because the early childhood specialist plans the environment to provide



the best opportunities for age-appropriate participation, therapists can focus their attention on ongoing assessment and implementing a variety of individual and group treatment options aimed at improving active participation and overall improved health. Communication, emergent literacy, physical access, mobility, twenty-four hour positioning and strength training are among the key components of every child's plan of care. The Integrated Therapy Programs are infused with the most advanced assistive technology and therapy equipment, which is applied liberally and in innovative ways by all members of the clinical team. Therapists are present in the group for an extended two and a half-hour session two or three times a week. Consequently, they are better able to see how children apply newly developing skills, identify target areas that need attention and stay connected with parents.

*Continued on page ???*

## The Perlman at Cincinnati Children's — continued from page ???

Working closely with their team, therapists understand and support the treatment goals of other disciplines...so the effects of direct one-on-one therapy are strengthened by indirect support of therapy goals by all team members.

Complementing the Integrated Therapy Programs is Perlman's Assistive Technology Program. A regional resource for the most advanced assistive technology, the Perlman Center has a state-of-the-art lab where comprehensive interdisciplinary evaluations and training take place for children, youth and adults with CP and many other physical conditions. This includes evaluation, training and follow-up for augmentative communication, power mobility, twenty-four hour positioning, computer access, environmental controls and exercise technology.

As children enter school the Perlman Center shifts its focus to establishing a partnership with the schools and providing ongoing support for the child in and out of the classroom through its assistive technology programs. The Perlman team is involved with the schools at transition from preschool to kindergarten, providing detailed information regarding equipment needs, assistive technology and goals for performance improvement and physical access. Throughout the school years, assisted by the ongoing care coordination provided by team social workers, the Perlman therapy teams stay connected to support school therapists and teachers as well as to provide periodic



assistive technology evaluations for the kids. Other innovative enrichment programs, such as the Teen Tech Writers, are designed to provide focused therapy support for kids, youth and adults, as well as for siblings and parents.

For more than twenty-five years, the Perlman Center has made cerebral palsy its priority...staying connected, continually assessing changing needs and improving outcomes with evidence based treatments, new ideas and innovative interventions. Breaking the mold of more traditional therapy models and adopting new approaches for more integrated holistic care, such as those found at the Perlman Center,

may result in improved outcomes for kids with complex conditions like CP. Nearly 400 children, youth and adults received services at the Center in 2009. Outcomes are encouraging. Over 85% of parents report high satisfaction with the Integrated Therapy Programs. Nearly every child leaving the program enters kindergarten with an improved means of communication, best options for mobility, twenty-four hour positioning and physical access, as well as early computer and literacy competencies. Over 90% of the school age kids and adults evaluated at the Center get the technology they need and the additional support to learn to use it. And most importantly, families experience a reliable connection with a resource that they can turn to throughout the lives of their children.

For more information about the Perlman Center or the Comprehensive Cerebral Palsy Program at Cincinnati Children's, visit our website at [cincinnatichildrens.org/Perlman](http://cincinnatichildrens.org/Perlman) or contact us. ■

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# AACPDM Advocacy Committee

—*Jerie Beth Karkos, MD, Advocacy Committee Co-Chair*

The role of the Advocacy committee is:

- To review and provide assistance to the board regarding advocacy efforts affecting members of the AACPDM. This may include providing letters of support for national initiatives or collaborating with other organizations.
- To provide direction and assistance for educational activities related to advocacy at the yearly conference and throughout the year.

Create, review and update the information on the AACPDM website regarding advocacy.

The Advocacy Committee had an exciting and productive year. The most visible activity was to sponsor a preconference training session September 21, 2010. The goal was to train interested members in the practical skills needed to successfully advocate at the federal and state government level.

The training exercise focused on information needed to provide a uniform voice for *dedicated* Federal funding for cerebral palsy research, currently not in place. The ½ day training session was provided and coordinated by the staff of the Department of Federal Affairs for the American Academy of Pediatrics (AAP). This activity was further strengthened by a “leave behind” document reflective of collaboration between three organizations: AACPDM, Reaching for the Stars: A foundation of Hope for Children with Cerebral Palsy (A grass-roots parent and family organization which will be spotlighted separately in this newsletter), and Cerebral Palsy International Research Foundation.

This activity was standing room only—attended by 27 persons. The majority of attendees were members of the Academy (with a large presence



from the Board and the Advocacy Committee, but we were joined by our partners from Reaching for the Stars (RFTS, Inc.) and Cerebral Palsy International Research Foundation (CPIRF) with CEO, Glenn Tringali.

- Mark DelMonte, Jamie Poslosky, and Dan Gage from the AAP provided training. Their slides will be placed on the Advocacy Committee website, along with the “leave behind” document they helped develop. This can serve as a resource guide for Academy members interested in future advocacy efforts.
- Following the training, the attendees headed to “Capitol Hill” and visited more than 37 Senators and Congressmen. This was followed by a post-visit debriefing to guide future collaborative advocacy efforts.

Additional activities of the committee includes:

- Ongoing Website development- to provide resource materials facilitating future advocacy efforts by our membership, not only at the federal and state level, but also at the patient level, to help improve the quality of life of the population we serve.
- Investigating effective ways to educate our membership on advocacy.
- Developing ways the academy can communicate with interested AACPDM members when legislative support is needed, such as writing letters or calling Congressmen.

Stay tuned...

Our Research funding initiative will require ongoing support and from academy members as well as collaborating organizations. ■



# Cerebral Palsy International Research Foundation (CPIRF)

—Glenn Tringali, CEO

Our mission of supporting research for identifying the cause, evidence based care, and ultimately the cure for Cerebral Palsy and related developmental disorders dates back to our founding in 1955, as the United Cerebral Palsy Research and Educational Foundation (UCPREF). These fundamental objectives have not changed; however, our new name reflects the global reach of our organization, by fostering research and supporting scientists worldwide. The mission of CPIRF is to revolutionize the treatment of CP and related neurological conditions. We draw together the world's best biomedical minds to place their talent and commitment towards accelerating early identification of Cerebral Palsy (CP) and the development of new treatments.



Our aim is to move away from expensive invasive procedures by developing comprehensive treatments and educational strategies that will serve not only CP patients but other chronic neurological conditions as well. Through partnerships with clinical and educational programs, CPIRF is focused on Preventing CP, using transformational technologies to capitalize on the innate plasticity of the human nervous system, researching the needs and providing the data necessary to develop evidence based care for children and adults with CP, and through our International Programs and Projects bringing the largest and most diverse community of researchers and clinicians together to focus their talents on prevention, best care and cure for developmental disorders.

CPIRF provides support for cutting-edge research that explores new ideas on a pilot basis. The program is an investment in new approaches which could have profound impact on the prevention of cerebral palsy, the lessening of disability due to cerebral palsy and other developmental disorders and the improvement of function and quality of life both in the child and adult with CP.

Grants are awarded on a competitive basis taking into account scientific merit, scientific and clinical significance, and relevance to the Foundation mission. Grants are generally awarded for up to 2 years at a maximum of \$50,000 a year. Research grant applications are reviewed

by the Foundation's voluntary Scientific Advisory Council. The applications with the best scores are then presented to the Foundation's Board of Directors for funding approval.

Internationally, the "Crossing Borders in the Middle East" initiative has created a model of cooperation among researchers and institutions in Israel, the Palestinian territories, Jordan, Egypt, Morocco, and Italy that is enviable from a political perspective. This program has been tremendously successful. Rigorous clinical data has been collected and new discoveries relevant to physical therapy interventions have been made through the Middle East Research Collaborative for Cerebral Palsy.

The Ethel and Jack Hausman Clinical Research Award is one of our most successful programs. Each year CPIRF identifies promising, clinician researchers that are engaged at their respective institutions, whether universities, hospitals or clinics, in finding new and better approaches to diagnosing, preventing, and rehabilitating children and adults with CP. The prestigious award provides program and salary support for each of three years and carries a \$75,000 per year stipend for a total of \$225,000 for the recipient, enabling him or her to pursue research in an area relevant to developmental disabilities, while continuing to spend time providing hands on clinical care to the developmentally disabled.

Another area of key interest for CPIRF is education. CPIRF regularly organizes and sponsors workshops that bring together the world's best minds to focus on a particular research area important to preventing, treating, and curing individuals with CP. In addition to workshops, CPIRF staff and members of the CPIRF Scientific Advisory Council post on the foundation website [www.cpirf.org](http://www.cpirf.org) Fact Sheets discussing a new research topic relevant to cerebral palsy and other developmental disorders. The website also features web casts from our workshops to help generate interest and support for new research areas that demand further study.

Finally, CPIRF actively advocates for increased funding dedicated to CP research. We collaborate with various organizations with similar objectives and are proud of our recent advocacy initiatives in September '10 with AACPD and Reaching for the Stars to encourage congressional representatives to provide \$10 million in funding for CP research and surveillance. ■

To support and expand the EHC Program's research efforts in the area of developmental disabilities and functional limitations, AHRQ hosted an Issue Exploration Forum on Cerebral Palsy (CP). The Forum was an opportunity for a range of participants to provide input to the EHC Program on future research related to cerebral palsy.

The process of the Forum included two conference calls and culminated with an in-person meeting at the AHRQ office in Rockville, MD on October 26, 2010. Over the course of the meetings we helped propose decision dilemmas and areas needing information and research; explored the current state of outcomes research and existing professional guidelines; clarified specific stakeholder interests and needs related to comparative effectiveness research; and discussed and prioritized potential topic nominations.

Participants included key staff from AHRQ to provide technical assistance and Agency guidance. They featured a team of investigators from the Vanderbilt Evidence-based Practice Center; staff from the EHC Program's Scientific Resource Center's (SRC) Stakeholder; representatives from the American Academy of Neurology, American Academy of Family Practice, National Institute of Neurological Disorders, National Institute of Health, Family Voices, Reaching for the Stars and others.

The **primary objective** of the AHRQ Issue Exploration Forum focused on Cerebral Palsy was to help identify and prioritize comparative effectiveness research topics for the purpose of conducting systematic reviews (evidence synthesis) in the clinical condition area of Cerebral Palsy, in accordance with AHRQ's mission, goals and objectives. From 3418 citations the Vanderbilt Evidence-Based Practice Center, using the search terms spastic diplegia, quadriplegia, and hemiplegia, static encephalopathy, choreoathetosis and congenital diplegia, quadriplegia and hemiplegia, identified 122 systematic reviews, 15 practice guidelines and consensus statements, and 14 meta-analyses pertaining to treatment. A second search

involved stakeholder calls and listed the following 7 areas of importance: Behavioral Health, Physical Fitness, Transitions, Quality of Life, Pain, Comorbidities, cultural diversity, follow-up studies, and technologies.

A **secondary objective** of the AHRQ Issue Exploration Forum focused on Cerebral Palsy was to help identify and prioritize comparative effectiveness research topics for the purpose of conducting systematic reviews in the AHRQ priority conditions of developmental disabilities and functional limitations in accordance with AHRQ's mission, goals and objectives.

With respect to Guidelines and Consensus statements themes were identified as follows: Spasticity, Gait and PT, Upper extremity and OT, Hip, Feeding and Nutrition, Pain, Quality of Life and functional independence, cognition, seizures, brain imaging, audiology, ophthalmology. Meta-analyses involved the following themes: Spasticity, Gait and PT, upper extremity and OT, Pain, QoL and Functional Independence.

A **third objective** of the AHRQ Issue Exploration Forum focused on Cerebral Palsy was to identify and help prioritize comparative effectiveness research topics in the AHRQ priority conditions of developmental disabilities and functional limitations to address currently unmet clinical outcomes research needs with a focus on: 1) evidence synthesis, 2) evidence generation, and 3) evidence translation and dissemination in accordance with AHRQ's mission, goals and objectives

There was extensive discussion based on the PICOTS framework (Population, Interventions, Comparators, Outcomes, Timing, and Setting), and the broad themes of those discussions will be listed on the website. Embedded in this strategy were the importance of using the ICF framework, describing relevant populations, describing multidisciplinary interventions, and focusing on outcomes related to health, well-being, functioning and participation. The top vote-getters were: Regional Centers of Excellence, establishing Registries across key developmental ages (preschool, middle childhood, adolescence, adulthood); creating methodologies so that outcome toolkits are available across centers and management modality, highlighting key clinical challenges such as hip management, spasticity, communication, feeding and nutrition, and systematic



Agency for Healthcare Research and Quality  
Advancing Excellence in Health Care • [www.ahrq.gov](http://www.ahrq.gov)

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# 2010-2011 Board of Directors

Continuing and new members of the AACPDM Board of Directors were sworn in on Saturday, September 25, 2010 during the Board Meeting at the 64th AACPDM Annual Meeting Washington, DC.

## Please welcome the 2010-2011 Board of Directors

### President

Scott Hoffinger, MD  
*Children's Hospital & Research Ctr.  
Oakland, California*

### First Vice President

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*Bassett Healthcare Network  
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Deborah Gaebler-Spira, MD  
*Rehabilitation Institute of Chicago  
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### Past President 2008-2009

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*The Hospital for Sick Children  
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Jilda Vargus-Adams, MD  
*Cincinnati Children's Hospital  
Medical Center  
Cincinnati, Ohio*

Sarah Winter, MD  
*University of Utah  
Salt Lake City, Utah*



Passing of the Gavel to the new President

### Ex-Officio Members

#### Editor, DMCN

Peter Baxter, MD  
*Sheffield, United Kingdom*

#### Historian

Alfred Scherzer, MD  
*Riverhead, NY*

#### Newsletter Editor

Lynne Romeiser Logan, PT PhD PCS  
*Syracuse, NY*

#### 2011 Scientific Program Chair

Susan Murr, DPT PCS  
*St. Paul, MN*

#### Webmaster

Susan Sienko Thomas, MA  
*Portland, OR*

## Health Care Research and Quality (AHRQ) Forum — continued from page 8

exploration of factors that maintain and promote functioning and individual participation and well-being.

The dissemination of knowledge and the translation of the current AHRQ/AACPDM guidelines continue to need improvement. We are encouraging parent and stakeholder involvement at every step and are also advocating for a 'ground up' approach to knowledge translation as well as the obvious presentation at meetings and website. We have been working hard to increase AACPDM partnering with stakeholders and organizations that support our mission. What was exciting in this entire venture was that this is one of the first times we have been invited to partner with a governmental agency!

We assure you, your Academy was heard, and respected, and importantly we all listened to the input so that we could constructively move towards a CP research agenda that addresses the issues that of such great importance to AACPDM, and of course to the fields in which we work. ■

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# 64th Annual Meeting Highlights



64th Annual Meeting Planning Team: Scott Hoffinger, MD (First VP); Maureen O'Donnell, MD (Instructional Course Chair) and Kristie Bjornson, PhD, PT (Scientific Program Committee Chair).

**AACPDM** hosted the 64th Annual meeting in Washington, DC, on September 22-25, 2010. There were 881 in attendance. This meeting included a wide-range of scientific topics, and was conducive to the many learning styles plus, there was networking opportunities and fun had by all!



Welcome Reception: Newseum

## Dinner Event: Smithsonian National Air & Space Museum



*Washington, DC  
September 22-25, 2010*

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**AACPDM**  
american academy for cerebral  
palsy and developmental medicine

**Shared Learning:  
Global Perspective**



**Exhibit Hall and Poster Displays**



## *Award* Winners



**Lifetime Achievement Award  
presented to Jacquelin Perry, MD**



**Duncan Wyeth Award  
presented to Thomas Moran**



**Corbett Ryan Pathways Pioneer Award  
presented to Gary Endacott**



**Mentorship Award presented to  
John McLaughlin, MD**

# Note From the Editor

—Lynne Romeiser Logan, PhD, PT

This newsletter showcases an exemplary program from Cincinnati, Ohio that integrates early childhood education, therapy and technology for children with cerebral palsy. If you have a local program you'd like to share, let me know.

We are proud to describe our initial efforts in advocacy at the federal level. We can use your help in continuing this part of our mission; join us on February 22 in Washington to meet with legislators to advocate for \$10 million in designated funds for research in cerebral palsy and contact your legislators at home to let them know about this mission. Contact the advocacy committee if you need materials or advice in this area.

We are also happy to spotlight the Cerebral Palsy International Research Foundation (CPIRF) and our continuing partnership with them to advance research and our shared mission.

The Annual Meeting takes place in Las Vegas this year. Please help make this year's conference a success by attending and networking with other medical professionals in the industry.

We'd like to continue to share the incredible good works our members do as volunteers. Please let me know if you participate in one of these missions, you may shamelessly promote your project!

We in Syracuse are happy to have the Grand Round Webinars back. We've organized to watch them as a group and also appreciate that they are now archived for watching at one's leisure.

Syracuse made the national news recently for our December snowfall record of 70 inches in 2 weeks. Of course my previously contracted shoveler has disappeared, so I've been getting my daily exercise in the driveway instead of the gym. I was very happy to enjoy Christmas with my parents in Florida where it seemed warm indeed. My hockey team is experiencing a concussion epidemic this year. New helmets for all and no fighting!

My best wishes for a healthy, happy new year to all. May all your resolutions be easily achieved. ■

Lynne

## You can help shape the future of the AACPDM

by volunteering for a committee.

There are openings for 2010-2013 appointments on a variety of committees to match your interests, and

preference is given to those who volunteer for positions.

Any AACPDM member in good standing is eligible to serve on a committee.

Please contact the AACPDM Office at [info@aacpdm.org](mailto:info@aacpdm.org) with your interest to serve.

