

**American Academy of Pediatric Dentistry
After-Action Minutes
2012 Winter Board Meeting
January 20, 2012**

Meeting: Regular Meeting of the American Academy of Pediatric Dentistry Board of Trustees

Date: January 20, 2012

Place: Grand Hyatt Tampa Bay, Snowy Egret meeting room

Presiding Officer: AAPD President, Rhea M. Haugseth

Minute Taker: Ms. Margaret A. Bjerklie, AAPD Executive Assistant and Office Manager

Members Present: Drs. Joel H. Berg, Warren A. Brill, Edward H. Moody, Jr., Scott W. Cashion, John R. Liu, Man Wai Ng, Shari C. Kohn, K. Jean Beauchamp, James D. Nickman, Robert L. Delarosa, Jade A. Miller, Kevin Donly, Mario E. Ramos, John A. Hendry, Jane Gillette, N. Sue Seale, James J. Crall, Heber Simmons, Jr., John S. Rutkauskas

Staff Present: C. Scott Litch, Chief Operating Officer and General Counsel; Paul W. Amundsen, Development Director; Jan Silverman, Health Policy Center Assistant Director

Guest Present: Drs. Joseph B. Castellano, District 5 Trustee-elect; Santos Cortez Jr., District 6 Trustee-elect; Jessica Y. Lee, Parliamentarian-elect; Paul S. Casamassimo, Director, AAPD Pediatric Oral Health Research and Policy Center; Jeffrey A. Dean, Executive Director, American Board of Pediatric Dentistry; Rebecca L. Slayton, American Academy of Pediatrics, Section on Oral Health

President Haugseth called the meeting to order at 9:09 a.m. She reminded the attendees that board discussions are confidential.

An action item from the Constitution and Bylaws Committee and information reports from the Pediatric Oral Health Policy and Research Center (POHRPC) were added to the agenda.

Following are the actions taken by the Board at this meeting.

No.	Motion	Action	Responsible Party*	Relevant Council/Committee
1	To reaffirm the October 2011 electronic vote of the Board of Trustees, approving the actions of the October 9, 2011, meeting of the Board of Trustees.	Carried	Bjerklie	AAPD HQ
2	To approve the agenda as amended.	Carried	Bjerklie	AAPD HQ
3	To approve the consent calendar as presented.	Carried	Bjerklie	AAPD HQ
4	To request additional information Medicaid Health Plans of America (MHPA) and their planned compendium on pediatric oral health to assist the board in making a decision.	Carried	Silverman	AAPD HQ POHRPC

* Responsible party – Board member, Council chair, Staff liaison, other staff as appropriate

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	<p><u>Discussion points:</u></p> <ul style="list-style-type: none"> • Full support of \$25,000 was requested • What kind of control over content would AAPD have? • Who are their dental partners? Where would they be getting “best practices”? 			
5	To initiate a search for an associate editor for the <i>Journal of Dentistry for Children</i> .	Carried	Rutkauskas	AAPD HQ, ExCom
6	To approve the expenditure of up to \$5,000 to begin the process of scanning back issues of <i>JDC</i>	Carried	Rutkauskas	AAPD HQ
7	To approve the appointments of the editorial boards and abstract editors recommended by the Editor in Chief.	Carried	Berg, Rutkauskas	President-Elect, AAPD HQ
8	To approve the changes to the AAPD <i>Administrative Policy and Procedure Manual</i> to update Section 8 (Councils and Committee).O.11 to conform with most recent ADA CERP requirements that CE courses be of sound scientific basis and evidence-based dentistry, and have periodic content review of courses offered on a repeating basis.	Carried	Liu, Litch	P&P, AAPD HQ
9	<p>To approve the changes to the AAPD <i>Administrative Policy and Procedure Manual</i> to revise Section 8 (Councils and Committee).O, create a new Consumer Review Committee to address situations when the AAPD reviews and/or develops accurate scientific information for dissemination with commercial consumer products or publications, and allows use of the AAPD logo with appropriate disclaimer.</p> <p><u>Discussion points:</u></p> <ul style="list-style-type: none"> • Formalizes the process now done on an ad hoc basis • Request to revise arose because AAPD has recently received a few requests to review content and provide input • Offers AAPD an opportunity to shape the messages 	Carried	Liu, Litch	P&P, AAPD HQ

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10	To approve the documents presented by the Council on Clinical Affairs, and move them forward to the General Assembly for approval.	Carried	Castellano, Delarosa	CCA
11	To direct the CCE to prepare a symposium on behavior guidance in 2013, and restorative dentistry in 2014. <u>Discussion points:</u> <ul style="list-style-type: none"> • Last behavioral guidance symposium was in 2003 • Look specifically at non-pharmacological behavior management, because of recent studies on effects of toxic, chronic stress on the brain activity of children 	Carried	Ignelzi, Miller, Turcheck, Dalhouse	CCE, AAPD HQ
12	To approve the appointment of James Nickman to the American Dental Associations Code Advisory Committee (CAC). <u>Discussion points:</u> <ul style="list-style-type: none"> • Term of service to coincide with CDT cycle • CAC representative will serve as a consultant to the Council on Dental Benefit Programs • As the ADA finalizes its structure for the CAC, the board may wish to formalize the process for appointing the CAC representative 	Carried	Rutkauskas	AAPD HQ
13	To approve the 2012 Legislative and Regulatory Priorities as presented.	Carried	Litch	AAPD HQ
14	To approve an expenditure of up to \$10,000 to purchase pins for current life members. <u>Discussion points:</u> <ul style="list-style-type: none"> • Life members are those who have been Active members in good standing for 30 years and have reached the age of 65 • Purpose is to show appreciation to these members for their loyalty 	Carried	Wester	AAPD HQ
15	To accept the Council on Membership and Membership Services' Fellow plan and move forward to implementation. <u>Discussion points:</u> <ul style="list-style-type: none"> • Following the model of other health care 	Carried (2 opposed)	Kennedy, Ramos, Wester	CMMS, AAPD HQ

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	<p>and professional organizations, where board certification, being a given, is not cited, but being a fellow is</p> <ul style="list-style-type: none"> • Voluntary program • Current “fellows” will be grandfathered into the program, but will have to renew their fellow status in 5 years 			
16	To approve the 2012 Career Opportunity Fair Vendor Survey created by the Council on Membership and Membership Services, Pediatric Dental Resident Committee, to be sent to the vendors after the annual session.	Carried	Forsyth, Ng, Wester	CMMS Pediatric Dental Resident Committee, AAPD HQ
17	To approve the 2012 Research Agenda, as modified (see attached).	Carried	Lee, Kohn, Dalhouse, Silverman	Council on Scientific Affairs
18	<p>To approve the half-day course on transitioning special health care needs patients at the ADA annual session.</p> <p><u>Discussion points:</u></p> <ul style="list-style-type: none"> • ADA annually requests \$5,000 for their annual meeting programming, in return AAPD can present a half-day course • Funds are already budgeted • Course director will be pediatric dentist, but panel will comprise general dentists and hygienists, to better frame the message for the general practitioner audience 	Carried	Rick, Hendry, Rutkauskas	CCA Committee on Special Health Care Needs, AAPD HQ
19	To accept the recommendations for 2012-2013 council and committee appointments.	Carried	Berg, Bjerklie	President-Elect, AAPD HQ
20	<p>To deny the request of the United States Breastfeeding Committee to endorse the <i>Core Competencies in Breastfeeding Care and Services for All Health Professionals</i></p> <p><u>Discussion points:</u></p> <ul style="list-style-type: none"> • Concern was over some items, particularly the endorsement of on-demand breastfeeding, which are contrary to AAPD’s policies and guidelines 	Carried	Rutkauskas	AAPD HQ
21	To enter into an agreement with the Motion Picture Licensing Corporation (MPLC).	Carried	Litch	AAPD HQ

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	<p><u>Discussion points:</u></p> <ul style="list-style-type: none"> • MPLC is aggressively pursuing health care professionals, schools, nursing homes, etc. to enforce licensing laws • Agreement will provide members with a discount for the licensing fee, may provide royalty income to AAPD • Agreement will give AAPD some control over the message being delivered to members 			
22	To send the request of the National Partnership for Action to End Health Disparities Initiative (NPA) to POHRPC for review. The POHRPC should have recommendations for the board by its May meeting.	Carried	Casamassimo, Silverman	POHRPC
23	<p>To support ADA Resolution 48H. 2011, recommending revision to Requirement 1(a) in the <i>Requirements for Recognition of Dental Specialties and National Certifying Boards for Dental Specialists</i> which states that a recognized specialty sponsoring organization's membership should be reflective of the special area of dental practice.</p> <p><u>Discussion points:</u></p> <ul style="list-style-type: none"> • Resolution recommends that CDEL consider interpreting "reflective" to mean that only specialist dentist members are able to vote and to hold office • Letter due to ADA February 10th 	Carried	Haugseth, Rutkauskas	President, AAPD HQ
24	To approve the change to lines 848-855 of the AAPD Constitution and Bylaws, regarding the composition of the nomination committee based on a request from the American Board of Pediatric Dentistry, concerning their representative to the AAPD Nominations Committee	Carried	Litch	AAPD HQ

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Summary of adjustments to the 2011-2012 budget approved by the Board of Trustees:

Expenses, original:	\$ 9,150,949	Expense adjustments detail:	
Adjustments (see detail):	<u>15,000</u>	\$5,000	Scan <i>JDC</i> back issues (motion 6)
Total expenses:	\$9,165,949	\$10,000	Life Member pins (motion 14)
 Income:	 \$ 7,375,819		
 Balance:	 -\$ 1,790,130		

Informational Items

The POHRPC will be creating a group of fellows. Fellows will:

1. Constitute a queue of researchers prepared to respond to research opportunities presented by/to the POHRPC,
2. Assist POHRPC in monitoring the quality of current research activities,
3. Identify funding and research opportunities that are consistent with POHRPC goals
4. Advise the POHRPC as requested by the steering committee and AAPD leadership

The Strategic Planning Committee, at its meeting on January 19, added a goal specific to research. The final goal, with objectives and strategies, will be presented to the Board for its approval, either electronically or at the May meeting. A fifth strategy was added under Goal 1, Objective 1.2, to facilitate the transition of children beyond adolescence, including those with special health care needs, to a general dental home.

The Board discussed the application of the American Society of Dental Anesthesiologists for specialty status. Dr. Haugseth reminded the board and guests that the AAPD is taking no action until the ADA's Council on Dental Education and Licensure has made a decision.

The meeting was adjourned at 1:54 p.m.

Minutes approved by electronic vote February 22, 2012.

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American Academy of Pediatric Dentistry Research Agenda

Revised Annually

The American Academy of Pediatric Dentistry (AAPD) recognizes that the clinical practice of pediatric dentistry has to be driven by science and evidence-based dentistry. Where possible, our clinical practice guidelines in pediatric dentistry should be supported by the best available evidence. No longer is it acceptable for our clinical practice guidelines to be based on expert opinions. Where the evidence or science is lacking, research needs to be conducted to answer the relevant questions that arise in our clinical practice.

The AAPD Research Agenda is a strategic list of scientific and clinical questions and topics that are specific to the clinical practice of pediatric dentistry. These questions will benefit from scientific review and set the agenda for Healthy Smile, Health Children, the AAPD Foundation, research grants. The AAPD Council on Scientific Affairs (CSA) is charged with proposing a mechanism by which the AAPD Research Agenda is to be developed and maintained.

Other dental organizations have embraced evidence based research. The National Institute of Dental and Craniofacial Research has a Strategic Plan that outlines research opportunities to support its mission to improve oral, dental and craniofacial health through research, research training, and the dissemination of health information by performing and supporting basic and clinical research. While interested in supporting clinical research, the NIDCR supports research that offers the most significant scientific promise. The American Dental Association (ADA) is committed to bringing evidenced-based dentistry (EBD) concepts and practices to the dental profession. The ADA Research Agenda was developed to promote research in areas of dental practice and to designate priorities for conducting and funding evidence-based studies. The ADA Research Agenda reflects important clinical questions that are relevant to the entire profession of dentistry.

These topics are listed below in descending order of priority:

1. Transmission, etiology, risk assessment, early detection, prevention and management of caries using antimicrobials, fluorides, and remineralizing agents
2. Disparities and barriers to accessing dental care including evaluation of different oral health care delivery systems
3. Efficacy and effectiveness of infant oral health promotion (i.e. first dental visit by 12 months).
4. Examine the interface between dentistry and medicine
5. Salivary diagnostics, genetics and proteomics
6. Examination of pulp treatment and restorative materials including: pulp biology, efficacy and biocompatibility of pulp treatment and restorative materials
7. Examine non-pharmacologic and pharmacologic behavior management approaches including safe and effective sedative and analgesic agents for pain and anxiety control.
8. Specific (immunity, genetics) and non-specific host factors in the etiology and prevention of oral diseases
9. Prevention, diagnosis and management of dental trauma in children
10. Etiology, detection, prevention and management of localized or generalized aggressive periodontitis.