

eNewsBrief

A bi-monthly newsletter brought to you by the CL SIG

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MARCH 2017

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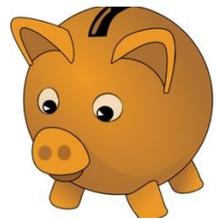
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Training Treats

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The CL SIG will offer the opportunity for training programs to provide information for our training database during the SPAAC **Internships on Parade**. This database will help to promote training opportunities for CL internships and fellowships. The goal is to share different CL training programs and opportunities with students so they can explore new training options. We **STRONGLY** encourage [internship program directors and fellowship directors](#) to complete the survey so we can have a rich database of training programs for students looking for internship and fellowship placements.

Co-chair Courtney Fleisher, Ph.D., ABPP and Student Rep Gillian Mayersohn, M.S. will be available with iPads to take information directly. Here is who to look for:



Courtney Fleisher



Gillian Mayersohn

[Bright IDEAS Problem Solving Skills Training \(PSST\)](#)

"The man who graduates today and stops learning tomorrow is uneducated the day after."
- Anonymous

Continued learning occurs following our formal training experiences in several ways. Conferences, one-time workshops, and training intensives are among the most common approaches to continuing education. However, the opportunity to acquire new skills, practice them, and have enduring discussions with peers and supervisors to modify our practice implementation that we experience in formal training is often missing from the ways in which we traditionally experience continuing education.

With the goal of closing the gap between usual practice and the best care for a specific topic, the Institute for Healthcare Improvement developed the Breakthrough Series Collaborative (BSC) model for use in health care organizations in the 1990s. More recently, the National Child Traumatic Stress Network (NCTSN) adapted the BSC Learning Collaboratives methodology in ways specific to mental health and child trauma in the service of raising the standard of care for traumatized children and their families. Learning Collaboratives provide opportunities to spread, adopt, and adapt best practices in diverse organizations to promote effectively delivered interventions and services. Multidisciplinary teams attend a series of in-person training sessions on a specific topic that emphasize adult learning principles, interactive training methods, and skill-focused learning in addition to methods for accelerating improvements in various settings. Over the course of several months, these teams engage in focused work to adapt effective practices to their settings while sharing learning and collaboration through regularly scheduled consultation activities. You can learn more about the NCTSN Learning Collaborative approach [here](#). It will be exciting to consider how the Learning Collaborative approach may be adapted for dissemination of models of care in pediatric psychology. Continued on pg 2.

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Bright IDEAS PSST Cont

Aspects of the NCTSN Learning Collaborative model are already making their way into the field of Pediatric Psychology, specifically in the area of pediatric psychosocial oncology practice. Notably, Robert Noll, Ph.D. at Children's Hospital of Pittsburgh and OJ Sahler, M.D. at the University of Rochester, have a dissemination science grant (R25e) from the National Cancer Institute (NCI), to provide 1.5 day workshops to train psychosocial professionals how to implement Bright IDEAS Problem-Solving Skills Training (PSST). Funding from the NCI supports attendee travel to the workshops and is being used to establish a dissemination science data base. Workshops are being conducted with a number of learning communities in conjunction with national conferences for relevant professionals. The Bright IDEAS paradigm of PSST is an evidence-based cognitive behavioral therapy shown to alleviate distress by helping caregivers of children recently diagnosed with cancer to develop constructive problem-solving skills that they can use and enhance over time. The strongest effects have been found with young, single, low SES, or minority caregivers. In addition to the face-to-face training, workshop leaders conduct consultation calls to collaboratively work toward achieving fidelity in addition to improving practice of this model with the pediatric oncology populations in various settings. Though the PSST training occurring just before SPPAC 2017 is full, additional opportunities for participation will occur in conjunction with upcoming meetings of the Children's Oncology Group in the fall of 2017, and in 2018 at SPPAC, the Association of Pediatric Oncology Social Workers, and the fall Children's Oncology Group meeting. Please contact [Dr. Noll](#) for additional information.

Conference Corner

SPPAC 2017 – March 30-April 1 in Portland, Oregon

CL SIG SPPAC 2017 Poster Awards

Thank you to all of you who submitted posters this year!! SIG poster award submissions are under review and the winner will be announced at the CL SIG meeting Thursday, March 30th at 11:30am. We are excited to recognize a hard working student, who will receive a free SPP membership for 2018. We will also acknowledge the best non-student poster.

Mentor-Mentee Social

We are excited to host our first Mentor-Mentee Social. This event will take place on **Saturday April 1, 12:45-2:00 pm**. Location is being finalized, and Gillian will be emailing those attending to confirm location. Lunch will be provided for mentees who RSVP to Gillian before the conference. Please contact [Gillian Mayersohn, M.S.](#) with any questions about this event.

SIG Business Meeting

The 2017 CL SIG meeting is scheduled to take place on **Thursday, March 30th from 11:30-1:00pm in Salon G & H**. Please look for details in the conference program (Thursday at-a-glance page.)

Last year, members mentioned an interest in more opportunities for networking. In an effort to provide CL SIG members with this opportunity, the meeting will start with our business meeting including the student poster award presentation, followed by facilitated round table discussions which will allow members to network and discuss common interests related to CL service. Topics will include billing and service delivery, clinical innovations, and collaborative research projects. We hope you will join us for the full 90 minutes as important information will be discussed throughout the meeting.

Questions about the SIG meeting may be directed to our CL SIG co-chairs, [Chrissy Cammarata, Ph.D., ABPP](#) or [Courtney Fleisher, Ph.D., ABPP](#).

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Announcements

Leadership Team Position Replacements

Terms of several members of the leadership team will end at the SPPAC 2017 business meeting. We are currently accepting nomination for 3 positions: Co-Chair, Secretary & Membership Coordinator, and Research, Intervention and Outcomes Committee Co-Chair. Please see position descriptions below:

Co-Chair: Co-chairs are responsible for providing leadership and guidance to executive board members of the CL SIG as well as welcoming new members by facilitating connections to the listserv and SIG resources. Additionally, chairs communicate with members of the SIG chairs leadership group and the DIV 54 board, e.g. organizing CL SIG bi-monthly leadership calls, preparing the twice yearly status report for the SPP Board, collaboration and participation in conference calls and projects with other SIG chairs, and responding to requests from the SPP Administrative Officer and SPP Member-at-Large. Finally, co-chairs support communication with the CL SIG as a whole, such as through the creation of content for bi-monthly and bi-annual publications.

Membership Coordinator & Secretary: The Membership Coordinator and Secretary is responsible for maintaining the SIG membership list, including verifying eligibility with Div 54 for new member requests and updating contact information for current members. In addition, the Membership Coordinator & Secretary is responsible for documenting minutes of bimonthly conference calls with the CL SIG executive board members and yearly business meetings at SPPAC. Finally, the Membership Coordinator & Secretary serves as the editor for the bi-annual CL SIG newsletter and the bi-monthly CL SIG eNewsBrief.

Research, Intervention, & Outcomes Committee Co-Chair: Co-lead project development efforts within the SIG, including supporting collaborative research across sites and generation of clinical tools for the benefit of the SIG. The committee co-chairs serve to support SIG member efforts in networking between CL providers, encouraging clinical innovation efforts and outcomes data in CL, and SIG support of ongoing research where able. Recent efforts have included evaluation of poster awards at SPPAC, providing consultation in multisite collaborations, and working with SIG leadership to develop CL-related clinical tools such as a brochure for somatic symptom and related disorders.

Please send nominations to [Courtney Fleisher, Ph.D., ABPP](#) and [Chrissy Cammarata, Ph.D., ABPP](#). Self-nominations are acceptable and encouraged. The SIG membership will vote the new leaders into office at the SIG business meeting in Portland.

Kaleb's Coping Tools Project

Kaleb, an 11-year-old with Burkitt's Lymphoma, would like to invite pediatric psychologists across the country (and beyond!) to have their patient's view his video (below) and consider adding their personal coping tools to help him reach his goal of "getting 100 different coping tools for kids who are sick and have to be in the hospital." You can record your videos on any device (smartphone, tablet, camera, etc.) as long as it can be converted to .m4v or .mov format, where it will be placed on the [Coping Club website](#). Submitted videos will get a "fancy edit," including inserting your hospital's logo, before being added to Kaleb's collection. For more information contact [Dr. Bryan Carter](#).

<https://vimeo.com/208602578>

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Resource Bank Highlights

The *Pediatric Psychology Resource Bank* website was created for pediatric psychologists to share and access various user-friendly resources that can be used in their day-to-day professional lives in conducting clinical and research activities in a variety of pediatric healthcare settings. While the *Pediatric Psychology Resource Bank* website was established and sponsored by the Society of Pediatric Psychology, **Pediatric Consultation/Liaison Special Interest Group** (Peds CL SIG), it is intended for use by all SPP members and the content is not restricted to applications in CL settings. Additionally, the website was established as a platform for sharing among professionals of materials that support the clinical, teaching, training, research, professional and business aspects of our specialization. To make a deposit or withdrawal if you are not currently a subscriber, please email [Bryan Carter, Ph.D.](mailto:ryan.carter@psychology.soc.org) to get your User ID and Password.

One concern that frequently arises in any CL service is managing children and adolescents with Medically Unexplained Physical Symptoms (MUPS). MUPS are characterized by any symptoms that may be experienced physically, but are not accounted for by a known medical cause. Deedee Caplan developed and shared her MUPS protocol to improve communication and service delivery for families struggling with these concerns. This protocol can help CL psychologists better communicate with families and treatment teams, as well as implement effective treatments and recommendations. Included on the resource bank are scripts and for talking about MUPS with families and medical teams, and handouts for the both parents and the medical team. This is a wonderful resource for standardizing care for these families. Please contact [Dr. Caplan](#) or [Alli Allmon](#) if you want to learn more.

