



Town Hall February 2, 2021

Questions asked and topics covered during the session.

Certification

Q: APSA is interested in “Certification”. What would that be for and how would that look?

A: Under the discussions for Right Child/Right Surgeon the goal is to align the expertise, competency, and quality outcomes with the needs of the community. For example, in large blocks of rural American there is no access to expert pediatric surgical care. The same is true for the military deployed to remote sites. Committees along with a Task Force are working on the educational and experiential content that would be required for general surgeons to receive enhanced or advanced training that will be applied to the appropriate stabilization or intervention in infants and children. This will require very careful evaluation and examination of not only the problems but also the solutions. Certification would only be a well-defined endpoint to indicate that an individual surgeon received and successfully accomplished the learning objectives and competencies that would be essential.

Committee Work

Q: With the management transition and committee restructuring process were any committees lost? How would you describe the committee’s activity at this point?

A: The goal of the Board’s considerations for our committees was to be able to help them simplify and optimize their work. No committees or Task Forces were lost, and all remain highly engaged with new members bringing the number of APSA members in committee work to about 500. There is a new Council of Committee Chairs as one of the mechanisms and structures to enhance communication between the Board and leadership as well as communication and collaboration among committees.

Sustainability Fee

Q: Is the sustainability fee a one-time assessment or permanent? Should there be a dues increase?

A: The sustainability fee was a one-time fee for 2020 only however the finance committee has recommended a dues increase to the Board and this is considered to be likely. This spring, the board will review whether a dues increase is appropriate based on the expenditures of the Association in the coming months with the activities of the new association management company. The board wants to make sure that there is ever increasing value to its members to account for any dues increase. In this light the Board is examining ways to make PedsSurg Library a member benefit and is negotiating with Elsevier to eliminate the requirement for members to purchase JPS as many already have access to this through their institutional libraries. There will need to be a Bylaws change to accommodate the flexibility of the board to adjust dues rather than assess fees.

Implicit Bias and Equity

Q: Will implicit bias training be shared with the members in the future and will there be a session at the Annual Meeting?

A: The goal of the Diversity, Equity, and Inclusion (DEI) committee is to have implicit bias training not only at the meeting but to also roll out special modules of training throughout the year. One of the first modules is hopefully to take place prior to the annual meeting in a special training session that’s been designed by the APSA DEI committee. The Board and Veritas staff have already had an outstanding training session.

Both the Board members and committee chairs and vice chairs will be required to do such training at least annually.

The Journal of Pediatric Surgery

Q: What is the relationship of the JPS to APSA and what are the financial connections or implications?

A: APSA does not own JPS but has had a contractual relationship with Elsevier for decades. Financial responsibility is currently restricted to the requirement to purchase a subscription as a part of APSA membership. The JPS agreement is under negotiation currently to consider whether or not to remove the requirement for a subscription and get an even greater discount for our members. APSA currently receives an educational grant from Elsevier of \$50,000 per year. APSA passes along these savings to the members currently.

Annual Meeting

Q: What are some of the plans for this year's annual meeting?

A: There will be a truncated format for a 2 1/2-day annual meeting that will focus on the plenary sessions and 2 presidential speeches Dr Vacanti's for 2020 and Dr Waldhausen's for 2021. The remainder of the extensive committee-based work will be spread over the remainder of the calendar year in a group of "APSAodes" that will range from one hour to 90 minutes to present abstracts as well as in-depth panels and reviews. The Board's current philosophy is that our educational content and opportunities for professional development should be continuous, and we should take advantage of the technical and production opportunities afforded by the new Association management company (Veritas) in order to bring this content to our members routinely throughout the year.

Task Force for Rural Surgery

Q: Is there a task force and what is its current activity?

A: There is a very active current task force for rural surgery under the direction of Mary Fallat. The task force is currently looking at the important elements and needs of rural practice that would impact infants and children. It is collaborating with the education committee in order to determine the best components of training and supplemental funds of knowledge that would assist general surgeons in rural communities. It has also reached out to coordinate some of the similar needs and activities in the military along with Activities and concerns with the Rural Surgery Advisory Council of the ACS and the relevant sections of the AAP.

APSA Financial Status

Q: Considering the potential severity of the finances what analysis or actions has the Board taken? Can you comment on the use of APSA reserves?

A: The APSA reserve funds are held and invested to protect us from special and surprise events that can impact our operational costs or be required for important investments. To protect against these losses, Veritas has advised us we need to have at least two, to potentially three times our annual expenses in reserve to cover unanticipated losses. Our Finance Committee is looking at ways to help us rebuild those reserves and the board has instituted some considerable fiscal restraint for the next several years to try to build those back up. With current revenue projections the Board anticipates this will take approximately 5 years to accomplish. The board and the Finance Committee are also going to look at all of our investments to evaluate whether current ones, held in Wells Fargo are actually where we should be and what the appropriate rate of return is. Also, over the course of the next year we're going to be looking at what it actually costs to run this organization, now under a new management company. We anticipate much better numbers for you at the Town Hall in the spring and a year from now. Our accounting structures have changed to allow for greater clarity of expense and revenue. Through the Foundation we are looking at alternative funding mechanisms to fund initiatives that are key to our mission.

Membership

Q: What % of pediatric surgeons are in APSA and if we have saturated that, where do you see opportunities for membership growth?

A: When last surveyed, APSA had 97% of its potential members. When Diana Farmer was president it was apparent though at that time that not all graduates from fellowships were joining at and there was a concern that maybe our younger colleagues were not seeing APSA in a positive light. In terms of the immediate fellows coming out nearly 100% become candidate members over the last four classes. Criteria for candidate membership is about to change so that people can become regular members directly after completing their fellowship and applying to us. One of the bylaws changes we are proposing is that people finishing their fellowship will be required to become regular members on December 31st of the year in which they finish fellowship. With respect to international membership, the Board, the Membership and Global Committees are actively considering that and trying to figure out what the new requirements should be. One controversial area of membership is whether to extend membership to Advanced Practice Providers and this will continue to be examined with the Membership Committee and take into consideration associations such as APSNA and the analysis of the needs that come from the Right Child Right Surgeon initiative

Annual Meeting Venues

Q: With respect to budget neutral meetings in the future as part of the fiscal responsibility, what can you tell us about the contracts we've already signed for the future and will they be at resorts or will they be at other venues?

A: We have already signed contracts that we can't get out of and we are going to be going back to Orlando, San Diego and then we have to go to Phoenix as well. We were able to rearrange some of the time course of the meetings because of COVID but for the next three years we are locked in. After that, the Finance Committee and the board are going to be looking at what the costs are to run our annual meeting and the goal, and the policy now is that annual meeting has to be budget neutral and not run a deficit. It will take a few years to vet any new sites and costs.

APSA and Advocacy

Q: There is the opportunity for new national healthcare policies and plans. Will APSA be commenting on those?

A: APSA has a pillar to become increasingly involved in advocacy and should take a stand on many of these issues. We recognize that probably there will be controversy amongst the members of our organization for individual policies that will need to be recognized and understood by the board. However, APSA has already taken a stand on many things in its history. Statements on gun control, Right Child Right Surgeon, and the Diversity, Equity, and Inclusion white paper that Erica Newman and her committee recently published all represent a stand. As one of our pillars our goal is to become more involved in advocacy particularly as it pertains to the surgical care of children. We hope to accomplish this by formalizing the process in which we make advocacy statements so that we have a group that vets an idea or policy and that engages the membership so we can do our best to represent a predominant thought from the membership. Collaboration with the AAP and ACS for advocacy should be very strong and we should take advantage of our voice to influence policy through their resources which are greater than ours.

Long Term Financial Stability

Q: Apart from dues and increased membership what steps have you taken to assure stability and prevent a future unexpected financial demand?

A: It is important to recoup our financial reserves that were spent last year because the board felt it was necessary to change our management company for a multiplicity of reasons. Our contract with Veritas saves us over \$200,000 a year. We have put fiscal restraint by not allowing any new projects that would

spend more money or lose revenue. An example of that is if JPS suggested we take a revenue cut from \$50,000 to \$25,000, that is not on the table and would not be acceptable. We have curtailed travel for certain meetings and other funds have now been cut. So, we tried to go through everything with a fine-tooth comb, find out what expenses do we really have to spend and where can we legitimately cut and still maintain membership value for the dollar with our main goal to provide you the best value that we can.

APSA Foundation

Q: Could you outline the relationship between APSA and the Foundation. Are there any opportunities to fund any of the APSA mission through the Foundation?

A: APSA and the APSA Foundation are two separate entities. The Foundation is a 501-c-3 and APSA is a 501-c-6 so, if you give money to the Foundation you can count that as a tax benefit if you give money to APSA you cannot count it as a tax benefit. Veritas is the management company for both the Foundation and for APSA. APSA supports the Foundation in that regard by essentially paying the Foundation's overhead or management fees.

The initiatives that the Foundation has have worked on are in parallel with APSA because the Foundation is able to provide the money for support of some of those initiatives in our mission. We have been trying to determine ways that money could be donated to the Foundation to support the initiatives we have to do that in a way that is legal and doesn't jeopardize the Foundation's status. The Foundation will be electing its own Treasurer and Secretary so that will be apart from APSA and ensure that there is no overlap and conflict of interest.