

AAHPM Quarterly Editorial Leadership Team

Mission Statement

The *AAHPM Quarterly* will be a source of timely, accurate, and practical information relevant to the field of hospice and palliative medicine, with the goal of promoting the art and science of high-quality palliative care and the professional development of AAHPM members.

Audience

AAHPM Quarterly is the official newsletter of AAHPM. Its audience primarily comprises physicians from all medical specialties who work in the field of hospice and palliative medicine, as well as nurses, social workers, spiritual advisors and other interdisciplinary team members.

Content

AAHPM Quarterly welcomes articles written by professionals involved in all areas of hospice and palliative care. Regular columns appearing in each issue include the feature, President's message, advocacy update, humanities and clinical pearls.

Editorial Team

The team includes an editor-in-chief, associate editor-in-chief and senior section editors. The managing editor (charged with managing the operations of the publication) is an Academy staff member. Roles and responsibilities of each member of the team are as follows:

Editor-in-Chief: Serves as the leader of *AAHPM Quarterly*, providing management and forward vision, scanning the horizon for what's coming up and ensuring that *AAHPM Quarterly's* mission is carried out; shapes and balances content of publication; is responsible to the readers and understands their needs and interests; must not have personal, financial, or other relationships linked in any way to his or her responsibilities as editor; annually discloses all potential conflicts of interest relative to AAHPM.

1. Provides final approval of each issue before press.
2. Corresponds with editorial board members with content ideas and suggestions.
3. Solicits articles, as necessary, to ensure relevant and timely content.
4. Identifies and participates in selection of Senior Section Editors; provides oversight and mentorship to them and can replace them if the job responsibilities have not been fulfilled; directly manages them; makes suggestions to them regarding articles.
5. Leads editorial board in regular conference calls and meetings.
6. Participates in regular calls and meetings of the Publications Committee.

The Editor-in-Chief will be recruited from a call to AAHPM members if the previous Associate Editor-in-Chief does not move directly into the position; the appointment will be approved by the Publications Committee and Board of Directors. The term will be 3 years, with no possibility of reappointment.

Associate Editor-in-Chief: Works alongside Editor-in-Chief, providing effective management and forward vision, scanning the horizon for what’s coming up, and ensuring that *AAHPM Quarterly’s* mission is carried out; shapes and balances content of publication; is responsible to the readers and understands their needs and interests; must not have personal, financial or other relationships linked in any way to his or her responsibilities as associate editor; annually discloses all potential conflicts of interest relative to AAHPM.

Works together with Editor-in-Chief to

1. Correspond with editorial board members with content ideas and suggestions.
2. Solicit articles, as necessary, to ensure content needs are met.
3. Interview subjects for and write the “Pathways to Palliative Care” article in each issue.
4. Identify and participate in selection of Senior Section Editors; provide oversight and mentorship to them; directly manage them; make suggestions to them regarding articles.
5. Participate in editorial board in regular conference calls and meetings.
6. Serve as Editor-in-Chief if the current Editor-in-Chief is unable to fulfill his or her duties.

The Associate Editor-in-Chief will automatically become Editor-in-Chief at the end of the Editor-in-Chief’s term. If the Associate Editor-in-Chief does not move directly into the Editor position, there will be a call to the senior section editors. If none of the senior section editors applies for the position, there will be a call to the AAHPM membership. The appointment will be approved by the Publications Committee. The term will be 3 years, with no possibility of reappointment.

Senior Section Editors: Work closely with the Editor-in-Chief and Associate Editor-in-Chief as part of the editorial leadership team; the Senior Section Editors have the primary responsibility to ensure the timely and thorough coverage of their assigned sections.

1. Review relevant literature and other sources of information to find relevant programs or topics that conform to the concept/intent of the section.
2. Solicit articles that provide current, practical practice information relevant to physicians in the hospice and palliative medicine field.
3. Review articles for appropriateness, “publishability,” relevance to the section’s concept, and clinical accuracy or acceptance by the field as a whole; completed articles are sent to the AAHPM office for copyediting and layout.
4. Participate in regular editorial board conference calls and meetings.
5. Respond to member emails related to the column.
6. Promote and serve as ambassadors for *AAHPM Quarterly*.

The Senior Section Editors will be recruited from a call to the AAHPM membership; the appointment will be made by the Editor-in-Chief and Associate Editor-in-Chief. The term will be 3 years. Senior Section Editors can apply to be reappointed to the editorial board from a general call to the membership. The term limit is 2 full terms (or 6 years).

Sections include the feature, advocacy, clinical pearls and humanities. Others can be added at the discretion of the Editor-in-Chief and Associate Editor-in-Chief. The focuses of the sections are as follows:

- **Feature:** Includes newsworthy topics of general interest to members. Topics range from clinical, to regulatory, to educational. Feature articles may discuss strategic Academy programs (eg, Measuring What Matters), innovative educational models, high-profile regulatory events (access to opioid vs. diversion and misuse) and other topics of broad interest to members.
- **Advocacy:** Focuses on issues related to the public policy priorities and advocacy initiatives of the Academy, federal and state-level policy developments with the potential to impact members and their patients, and AAHPM's partnerships with other organizations to advance its advocacy agenda. This editor works closely with the AAHPM's Director of Health Policy and Government Relations to determine content. In addition, this editor is expected to attend conference calls of the Public Policy Committee to remain current on the Academy's initiatives in this area.
- **Clinical Pearls:** Is intended to provide concise guidance on narrowly focused clinical issues members may face in their daily practice. General topic categories may include patient and family care and communication (delivering bad news); symptom management and disease trajectories; prognostication; hospice-related topics such as eligibility, certification and recertification, relatedness; care for special populations (geriatrics, pediatrics, cultural differences); and other areas of interest to clinicians in clinical practice. The column may be written in either article or case study formats, depending on the topic identified.
- **Humanities:** Includes articles related to humanities and spirituality in research or practice as well as creative works of prose, poetry, photography, or other media related to patient and family care or physician self-care. Topics may include spiritual care and religious rites and customs, life-review and narrative, meaning-making, coping with grief and bereavement (of all caregivers, including medical providers), strategies for provider self-care and preventing burnout, as well as other topics addressing the human side of the care our members provide, which is as much an art as it is a science.

Of particular value to the readers are practical articles that address issues that members face in their day-to-day work with patients and families, colleagues, administrators, and/or the community at large. Especially sought are timely, topical articles such as

- compelling and informative case studies that illustrate a specific clinical, administrative or regulatory issue.
- new and innovative programs and methods of delivering hospice and palliative care.
- discussion of how to handle a specific aspect of the patient care (communication, medication management).
- overview of issues encountered in particular area of care (pediatric, neurologic), including the perspectives of other medical specialists who may have specialty-specific experience and knowledge that can help hospice and palliative medicine care providers improve their work with patients and families.

- vignettes describing the author's personal experience, challenges, successes, or methods for providing care or otherwise doing the work they do

Managing Editor: Staff member whose responsibility is to manage the operations of *AAHPM Quarterly*, including editorial, design, and production.

1. Edits all manuscripts according to style and space requirements, to clarify content, and to make suggestions for rewriting by the author.
2. Sends out author guidelines and copyright transfer agreements to authors who have agreed to write.
3. Sends submitted articles to editorial board members for review; returns review comments and requests for revision to authors for their final draft.
4. Ensures that all copy is received by deadline and corresponds with authors and account team members about deadlines and content commitments.
5. Manages the production of each issue of the newsletter from planning to press.
6. Coordinates editorial board conference calls and meetings.
7. Sends out regular calls for submissions to editorial board members; gathers information about timely article ideas to editorial board members; generally serves as an additional editorial resource for editorial board members.
8. Manages submission of columns from section editors and staff.
9. Coordinates ad placement with the sales team.