Chair’s Corner:
What Can You and I Do to Stop Community Violence?

Today is Friday, July 8, 2016. The headlines in the New York Times today include:

**AMBUSH IN DALLAS: 5 OFFICERS DIE IN SNIPER ATTACK AT PROTEST**

Details Emerge of Philando Castile Shooting, and Minnesota Protests Carry Into Morning

Baton Rouge Is Passionate, and Peaceful, After Shooting of Alton Sterling

This afternoon the American Academy of Pediatrics announced a new initiative to confront violence in children’s lives (see p. 3 for the AAP press release).

The Child Trends Data Bank May 2016 report entitled Children’s Exposure to Violence indicates that children are more likely to be exposed to violence and crime than adults. Over two thirds of children under 18 were exposed directly or indirectly to violence in 2014. (see Table below) These experiences can lead to lasting physical, mental and emotional consequences, including physiological and anatomical changes in the brain.

You can find the full Child Trends report [here](#).

In April, we heard from Timothy Shaw at Grand Rounds that children in Dayton are being recruited into gangs at 6 years of age.

In some quick research today, I learned of a number of ongoing initiatives to address violence in the Dayton Community. Among them are the Artemis Center, the Dayton International Peace Museum, the community Initiative to Reduce Gun Violence of the City of Dayton Human Relations Council, and the Community Police Council.

Dayton Children’s is piloting the Health Leads program to identify families who require supports to address the social determinants of health.

But what else can you and I do to stop community violence and assure that the children of our community grow up in safe, stable nurturing homes and neighborhoods?

Come to the Department of Pediatrics Faculty meeting on Friday, June 15, 2016 at 12:05 PM in OPC-C and share your ideas. I look forward to seeing you!

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*Includes indirect exposure to violence.

Dan Lacey to Showcase his Work in Scotland

Please join me in congratulating Dan Lacey MD on the acceptance of his abstract entitled The Efficacy of Occipital Nerve Blocks for the Prevention of Pediatric and Adolescent Headaches at the 5th European Headache and Migraine Trust International congress taking place in Glasgow, Scotland on September 15-18, 2016.

Dan is also leading efforts to open a Headache Clinic at Dayton Children’s Hospital on August 1, 2016.

Referral criteria include age greater than 10 years, headaches for more than a year, and a negative trial of 2 medications.

The Headache Clinic will initially limit referrals to internal referrals only, seeing three “new” patients on the first and third Monday afternoons. The hope is to open to the community after 2 months.

Team members will include Alison Ruffin (dietitian), Sarah McDonald, RN, BSN, CPNP, Cindy Brown, DNP and Dr Lacey. They will also refer patients to the 2 pain psychologists and have a Care Conference the 3rd Weds of the month from noon-1pm.

The Headache Clinic is targeted at identifying and managing more complex headache patients with the hope of improving outcomes and creating value. Data will be collected prospectively.

Dan is an Associate Professor of Pediatrics at Boonshoft School of Medicine.

Pediatrics Included in $2.5 Million HRSA ACT Wright Grant

Wright State University has been awarded a 5 year, $2.5 million grant from the Health Resources and Services Administration (HRSA).

The ACT Wright (Accelerating primary Care Transformation at Wright State) project is a collaboration between the Wright State University Boonshoft School of Medicine Departments of Pediatrics, Family Medicine, and Internal Medicine, in conjunction with the WSU College of Nursing and Health, School of Professional Psychology, and the Kettering College physician assistant studies program.

ACT-Wright) will lead to a major curricular enhancement. This project: 1) accelerates the transformation of the primary care curriculum across faculty and graduate/undergraduate programs for primary care: family medicine (FM), internal medicine (IM), pediatrics (Peds), nurse practitioners (NP) and physician assistants (PA); 2) the concurrent and reinforcing introduction of a transforming primary care fellowship; and 3) the enrichment of faculty development for community preceptors.

Erica Taylor is included in the grant.

The goals are:
1) Enrich the primary care transformation curricula for family medicine, internal medicine and pediatric residents, pediatric/family nurse practitioner, and physician assistant students during their main primary ambulatory experiences with both in-person and online modules.
2) Develop a one year Primary Care Transformation fellowship for FM, Peds, and IM residents to create a pipeline for academic faculty and primary care transformational leaders in the region.
3) Strengthen the FM and Pediatric ambulatory clerkship experiences* for all BSOM medical students with substantial expansion and greater intensity of current social determinants of health, population health management/quality improvement and patient-centered, interprofessional team activities.
4) Improve the quality and quantity of community preceptors at FM, Peds and NP clerkship sites by strengthening faculty development with a particular emphasis on new or underperforming preceptors.

The project objectives will be rigorously evaluated using quantitative and qualitative measures to assess faculty/preceptors, learners and patients as well as the overall program using electronic health records, cost data, surveys and interviews/focus groups. Project outcomes will be disseminated through national presentation and peer-reviewed publications.
ELK GROVE VILLAGE, ILL.— The American Academy of Pediatrics (AAP) today announces a new initiative in the wake of the recent killings of two black men in St. Paul, Minn., and Baton Rouge, La., and of five police officers in Dallas. The AAP will convene a group of pediatrician experts to identify new approaches to protect children, adolescents and young adults from the epidemic of violence occurring in their everyday lives. The initiative's members, agenda and goals will be shared in the coming days, and will address gun violence as well as the underlying contributors of racism, religious intolerance, homophobia, xenophobia, terrorism or any other form of intolerance.

AAP President Benard P. Dreyer, MD, FAAP, said the following:

"This week, a 4-year-old girl sat in the back seat of a car as her mother's fiancé was shot to death. Standing next to his mother at a press conference, a 15-year-old boy wept openly for his father, who was shot and killed while selling CDs. Five police officers protecting and supporting peaceful protestors were targeted and killed, and others were wounded. Today, it is not enough to issue another press statement expressing outrage and sadness, urging our national leaders to fix the broken systems that are failing our children and their families.

"The killings of Alton Sterling and Philando Castile reflect a disturbing and systemic trend of racial discrimination and disproportionate use of force against people of color, leaving far too many children without parents, and siblings, and friends. The killings of the five police officers in Dallas doing their job and protecting their community are also deplorable and cannot be tolerated. As pediatricians, we see firsthand the effects of violence in the lives of children and their families. Too often we are called upon to mend bodies punctured with bullets and heal hearts broken by loss.

"Today, we must act. As president of the American Academy of Pediatrics, I am eager to convene our experts and think boldly about the role pediatricians and the AAP must play to confront the twin epidemics of violence and intolerance in the lives of children, adolescents, young adults, and their families."

AAP Executive Director/CEO Karen Remley, MD, MBA, MPH, FAAP said the following:

"Since I took office as CEO one year ago, acts of terrible violence have taken place from Paris to Istanbul to Charleston to Dallas to San Bernardino to Orlando. But the pervasive acts of daily gun violence—which don't make media headlines—have also not abated. Every person involved was once a child. Children and members of their families and communities continue to be targeted for acts of discrimination and violence because of the color of their skin, the gender with which they identify, the people they love or the uniform they wear.

"Pediatricians may not be able to solve these problems—which leave in their wake fear and mistrust, confusion, anger, and deep sorrow—but pediatricians know children best. We care for children in the communities where violence erupts, and we talk to parents about how to keep their children healthy and safe. Pediatricians who work in urban and suburban pediatric practices, emergency rooms and rural clinics, can come together to understand what is happening and how to address it. Through this new effort, we will confront the violence in children's lives and its root causes. We don't yet know where this conversation will lead us, we just know we need to act. I look forward to beginning this work as soon as possible."
Welcome to the Pediatric Residency Class of 2019!

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<td>Lauren Coogle, MD</td>
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<td>Mariah Davis, MD</td>
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<td>Eric Engstrom, MD</td>
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<td>Katie Fuller, MD</td>
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<td>Amy Hameister, DO</td>
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<td>Jennifer Hilgeman, MD</td>
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<td>Kelsey Kapolka MD</td>
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Vision for Pediatric Research at Dayton Children’s Hospital

To be a model community of innovation in pediatric research and medical care.

Strategic Imperatives

- Establish research leadership for building capability, focus and access to support
- Transform culture to value research, embracing the spirit of innovation and discovery required
- Build infrastructure through collaborations and dedicated staff and resources required to support research endeavors.
- Develop a financial model that leverages multiple sources of funds to launch and sustain a center of research excellence
- Identify areas of focus that strengthen programs of distinction, enhance patient experience (safety and quality) and improve children’s health and wellbeing