

# Agenda

## Time & Room

### Wednesday November 11, 2015

3:00-5:00 Registration

Conf. Rm. 209

### Thursday November 12, 2015

Noon-5:00 PM

Conf. Rm. 209

### Friday November 13, 2015

7:00-8:30 Breakfast

Atrium

7:00-8:30 Registration

Conf. Rm. 209

8:30-8:40 Logistics: E. Lenita Johnson, MA

Salons A-D

8:40-8:50 Welcome: Michael Mello, MD, MPH Board President

Salons A-D

8:50-9:00 The Robert Wood Johnson Foundation Video

Salons A-D

9:00-9:10 Introduction of Keynote: Dawne Gardner, MPH

Salons A-D

9:10-10:10 **Keynote Speaker:** Carolyn Cumpsty-Fowler, PhD, MPH

Salons A-D "Forging Evaluation-Informed Collaborations and Collaborative Evaluation"

Evaluation is a powerful but under-utilized tool to bridge the gap between good ideas and good outcomes. It is the tool we use to assure we "do no harm". Evaluation should be used to inform every step of our program journey. Embracing evaluation demonstrates a commitment to excellence and continuous improvement. In this session we will introduce evaluative thinking and the benefits of using it throughout the whole program journey. Evaluative thinking helps us forge stronger and more strategic collaborations, build better programs, and develop the ability to do collaborative evaluations of our programs.

This session will enable participants to:

- 1) Describe the costs and dangers of inadequate evaluation.
- 2) Discuss how evaluation is used to provide valuable information during the life of a program.
- 3) Discuss how to incorporate evaluative thinking in program decision making.
- 4) Recognize that evaluative thinking is systematic and disciplined, but easier than you think.
- 5) Identify the benefits of collaborative evaluation strategies.

10:10-10:25 Break

10:25-11:45 **Panel Discussion:** Consumer Product Injuries

Salons A-D

Deaths, injuries, and property damage from consumer product incidents cost the nation more than \$1 trillion annually. According to the Consumer Product Safety Commission (CPSC), approximately 966,120 children from birth to 4 years of age were seen in US emergency departments for consumer product-related injuries in 2013. Consumer products used in and around the home remain an important cause of death and injury to children. The National Electronic Injury Surveillance System (NEISS), the Poison Control Center and other data sources are available to identify consumer products that result in injury. This session will explore four injuries involving products: cigarette lighters, swimming pools, microwave ovens, and liquid nicotine and will describe the injury profile of children related to these consumer products. Interventions to prevent such injuries will also be explored.

This session will enable participants to:

- 1) Describe the epidemiology of thermal burns from cigarette lighters, electrical burns from swimming pool lighting, scald burns associated with microwave ovens, and poisonings from liquid nicotine.
- 2) Discuss how surveillance systems were used to identify and define each of these pediatric injury problems.
- 3) Identify how education, engineering and enforcement strategies that could be used to prevent such injuries.

# Agenda, cont.

## Time & Room

- 4) Describe the need to comprehensively monitor all consumer products in an effort to identify injury risks to children.
- 5) Recognize the need to comprehensively monitor all consumer products in an effort to identify injury risks to children.

**Panel Discussion Moderator:** Eileen McDonald, MSPH (Baltimore)  
Associate Scientist & MSPH Program Director  
Director, Johns Hopkins Children's Safety Centers  
Johns Hopkins Bloomberg School of Public Health

### Presenters:

Christine Campbell RN, BSN, MS, SANE-A, SANE-P: Flame time of cigarette lighter necessary to achieve temperature capable of inflicting skin burn (Philadelphia)

Lynn Model, MD: Swimming pool electrical injuries: steps toward prevention (Miami)

Gina Lowell, MD, MPH: Not child's play: national estimates of microwave-related burn injuries among young children (Chicago)

John Stack, MS4: Frequency of caregiver calls to the State Poison Control Center for liquid nicotine exposure (Indianapolis)

11:45-1:15 Lunch

Atrium

1:15-1:25 Introduction of Keynote Speaker: Art Cooper, MD

Salons A-D

1:25-2:25 **Keynote Speaker:** David R. Fowler, MB, ChB, M. Med. Path (Forensic)

Salons A-D "The Biomechanics of Injury"

The Biomechanics of Injury has much to offer in the field of Injury Prevention. This presentation will cover basic biomechanics of injury, with pertinent examples from everyday life that can be translated into injury prevention. During his presentation Dr. Fowler will present topics that challenge some of the conventional wisdom about how injuries occur, and why some of these issues may not be quite as simple as presented within the current literature. In the past animal models were used; currently they are often replaced with mechanical simulation. However one of the methods often ignored is the painstaking anecdotal information gathered by the forensic pathologist as part of the routine death investigation process. These data are often ignored as they are difficult to collect and evaluate as they are not scientifically controlled studies, but collections of medical records that take considerable time and effort for appropriate data extraction and analysis. However, these data are often the rich and informative sources of information for understanding about how human beings are injured, and how we can appropriately protect them as they go about their daily lives. This presentation will highlight examples from this source of data and how these data can also be potentially misinterpreted.

This session will enable participants to:

- 1) Describe the biomechanics which underlie how injuries occur.
- 2) Discuss the relationship between injury and energy.
- 3) Recognize how biomechanics informs injury prevention.
- 4) Discuss how biomechanics informs medical treatment
- 5) Discuss the use of advanced imaging in death investigation and injury documentation.

2:25-2:40 Break

2:40-4:00 **Panel Discussion:** Self-inflicted Injuries

Salons A-D

Suicide is the fourth leading cause of death among children and the third leading cause of death among youth 10 to 19 years of age in the United States with approximately 4,400 lives lost each year (CDC, 2011; Hamilton et al., 2007; Martin, et al., 2008). This session will examine trends in suicide, the correlation between the availability of firearms and suicide, and the unique opportunity physicians have to address potential suicide victims.

This session will enable participants to:

- 1) Recognize how circumstantial factors associated with suicide for youth not in mental health treatment can help adults in the lives of these youth recognize signs of potential crises and provide opportunities to connect these youth to mental health resources.
- 2) Discuss how pediatricians are in a unique and important position to screen patients at risk for suicide.

## Time & Room

# Agenda, cont.

- 3) Recognize how there could be a correlation between gun laws, mortality rates and prolonged hospital stays in various states.
- 4) Discuss the trends in pediatric firearm injuries
- 5) Connect people at risk for suicide to mental health resources.

**Panel Discussion Moderator:** Henri Ford, MD, MPH  
Vice President and Chief of Surgery  
Children's Hospital Los Angeles  
Vice-Dean, Medical Education  
Professor and Vice Chair for Clinical Affairs  
Department of Surgery, Keck School of Medicine of USC

### Presenters

Suzanne McLone, MPH: Factors associated with suicide among those adolescents and young adults not in mental health treatment at the time of death (Chicago)

Steven Rogers, MD: Confidence as a factor in pediatrician screening and referral practices related to suicide (Hartford)

Jun Tashiro, MD, MPH: Higher rates of in-hospital mortality, self-inflicted injury, and prolonged hospitalization in states with lenient vs. strict gun control laws: a propensity score-matched analysis (Miami)

Lawrence William Blass, MD: Higher incidence and associated mortality with self-inflicted injury between 1997 and 2012: a trend analysis of pediatric firearms injuries (Miami)

- 4:00-5:30 PC Meeting  
Salons A-D
- 4:00-5:30 PI Meeting  
Gulfstream A & B
- 6:00-7:30 Welcome Reception  
Aqua Terra Ballroom  
(Dinner on your own)
- 7:30 Board Meeting

## Saturday November 14, 2015

- 7:00-8:00 Breakfast  
Atrium
- 8:00-8:05 Good Morning Michael Mello, MD, MPH  
Salons A-D
- 8:05-8:15 Pioneer Award Presentation and Introduction of Keynote Speaker: Barbara Barlow, MD  
Salons A-D
- 8:15-9:00 **Keynote Speaker:** Frederick Rivara, MD, MPH  
Salons A-D  
"Prevention of injuries to children and adolescents: where we've been and where we need to go."

Injury mortality has declined over the last 3 decades reflecting successes in injury prevention and treatment. However, injury remains the most important cause of acquired disability to children and adolescents, many old injury problems persist and new ones have joined them. Injury rates among adolescents have been the most difficult to change and will require new approaches and renewed efforts to result in long-term change. The injury control community should celebrate its success, but develop new strategies to make continued gains.

This session will enable participants to:

- 1) Discuss the changes in injury morbidity and mortality to children over last 30 years.
- 2) Describe the injury problems that persist today and new ones that have appeared.
- 3) Discuss approaches to address the aforementioned problems.
- 4) Identify the barriers to continued progress.
- 5) Recognize the importance of injuries in child global health.

- 9:00-9:15 Break

# Agenda, cont.

9:15-10:35 **Panel Discussion:** Injury Free Travel for the Next 20 Years- Evaluation and Community Outreach  
Salons A-D

Years of work on child passenger safety and teen driving have led to nationwide success in reducing the burden of motor vehicle crash-related injuries and deaths. Despite this improvement, motor vehicle crashes (MVC) remain the leading cause of death for children above age 4 everywhere, and above age one in many states. The traditional car seat check relies on families to come to professionals, leaving room for additional methods of reaching out to families, and evaluation of different child passenger safety strategies has been limited. Initiatives led by national leadership of children's hospitals have highlighted the absence of child passenger safety planning and programs for children within hospital walls, and suggested a general national framework to move such planning forward. This session features exciting and innovative research that moves child passenger safety work to include a much-needed new level of evaluation, augments our efforts to take child passenger safety into the community in new ways to improve our reach to families, and provides helpful specifics to guide design and evaluation of much needed comprehensive in-hospital child passenger safety programs.

This session will enable participants to:

- 1) Discuss methods for and challenges to evaluation of parent CPS knowledge and CPS programs in the hospital, ED and community settings.
- 2) Identify opportunities and obstacles to implementation of a car seat needs assessment for children/families in the inpatient, ED and outpatient setting.
- 3) Recognize how analysis of crash data is useful for detecting patterns of use and misuse of car seats and boosters in one type of sample.
- 4) Describe the limitations inherent in the use of any one type of data for child passenger safety program planning, and formulate a plan for the potential inclusion of other data sources.
- 5) Identify the behaviors of those who drive children in car seats and boosters, and recognize how behavior change for drivers is an important component of improving child passenger safety.

**Panel Discussion Moderator:** Susan Pollock, MD

Director, Pediatric and Adolescent Injury Prevention Program  
KY Injury Prevention and Research Center  
Coordinator, Kentucky State Safe Kids Coalition  
PI, Injury Free Coalition for Kids of Lexington at KCH  
Assistant Professor, University of Kentucky  
Department of Pediatrics, College of Medicine  
Department of Preventive Medicine, College of Public Health

**Presenters:**

Maria McMahan, RN, MSN, PNP-PC/AC, EMT: Evaluation of child passenger safety programs in the emergency department and inpatient units of a children's hospital (Boston)

Pina Violano, PhD, MSPH, RN-BC, CCRN, CPS-T: Determinants of usage of age-appropriate child safety seats in Connecticut (New Haven)

Stanley Bray, MBA, CPS: Adapting child passenger safety presentations for various community situations (St. Louis)

Kimberly L. Massey, MD: Evaluating distracted driving behaviors in parents of children in suburban and rural areas of Alabama (Birmingham)

10:35-10:50 Break

10:50-12:10 **Panel Discussion:** Teen Driving  
Salons A-D

Despite substantial improvements, motor vehicle crashes remain the leading cause of death for U.S. teens ages 14-19 years. This session features research that explores ongoing questions about how to reduce the burden of motor vehicle injury in this population. A wide range of studies including a review of behavioral factors influencing risks for teens in motor vehicles, improving methods to effectively convey prevention strategies to different populations, and clarifying how premorbid health factors influence risk for mortality will be presented.

The session will enable participants to:

- 1) Describe current teen adherence to recommendations about seat belt use, distracted driving, and impaired driving and potential strategies to improve safety.
- 2) Discuss how teen driver BMI influences risk of mortality in crashes.

# Agenda, cont.

- 3) Identify strategies to identify and deliver anticipatory guidance for teens that reflects topics with the highest risk and severity.
- 4) Identify and build on existing partnerships and community programs to increase youth exposure to teen driving safety information.
- 5) Discuss epidemiology of motor vehicle crashes for teenagers.

**Panel Discussion Moderator:** Mary Aitken, MD, MPH  
 Professor of Pediatrics, UAMS College of Medicine  
 Medical Director, Injury Prevention Center at Arkansas Children's Hospital  
 Injury Free Little Rock

## Presenters:

Kathy Monroe, MD: Risky teen driving behaviors and factors influencing teens (Birmingham)  
 Deena Liska, BA: Reaching the teen community through career and technical education (Milwaukee)  
 Victoria Wurster Ovalle, MD: Severe unintentional injuries to Ohio children: what should we really be addressing at well-child visits? (Cincinnati)  
 Priyanka Dhungana, MPH: The association of body mass index (BMI), mortality and restraint status for teen drivers involved in fatal motor vehicle crashes (New York)

12:10-1:30 Lunch

Atrium

1:30-2:40

Salons A-D

**Panel Discussion:** Injury Prevention Education for Trainees

Unintentional injuries continue to remain the leading cause of morbidity and death in children despite efforts to reduce the injury rate. The importance of injury prevention education as a means of decreasing this problem is beginning to gain momentum. This panel will address this issue by presenting some injury prevention educational methods. The first presentation will address the lack of residency training in Child Passenger Safety Training. The authors present a quick but effective means of improving pediatric intern knowledge and attitudes regarding CPS. The second presentation will discuss a program, which teaches pediatricians injury prevention principles, how to use tools in their office setting, and how to engage families to make changes in their behavior so their children are safer and injuries can be reduced. While performing this work, pediatricians can obtain maintenance of certification (MOC) credit. The next study evaluates educating medical students as a response to the 2005 AAMC report calling for improved focus on principles of injury prevention to ensure that medical professionals recognize their important role in this issue.

This session will enable participants to:

- 1) Discuss the need for increased educational tools or methods needed to improve injury prevention.
- 2) Describe a tool to increase knowledge and attitudes about child passenger safety.
- 3) Identify potential tools that can be utilized in an outpatient setting to educate families.
- 4) Discuss potential methods of engaging families in making changes in behavior to prevent injury.
- 5) Describe how to incorporate high fidelity simulation in the education of injury prevention.

**Panel Discussion Moderator:** David Juang, MD (KC)  
 Director, Trauma, Critical Care & Burns  
 Children's Mercy Hospital  
 Director, Surgical Critical Care Fellowship Program  
 Assistant Professor of Pediatric Surgery  
 University of Missouri-Kansas City School of Medicine

## Presenters:

Dina Morrissey, MD, MPH: Child passenger safety (CPS) training for pediatric interns: Does it work? (Providence)  
 Melissa Wervey Arnold: An educational program for physicians to teach the principles of injury anticipatory guidance and earn certification credits (Cincinnati)  
 S. Hope Mullins, MPH: Simulation education to promote injury prevention knowledge for medical students (Arkansas)

2:40-2:55 Break

# Agenda, cont.

2:55-4:10 **Panel Discussion:** Identifying Gaps in Injury Prevention  
Salons A-D

Injury is the leading cause of death in the United States. While momentum for injury prevention programs is on the rise, there are still many more questions than answers. This panel addresses four significant injury topics. The first will examine the difference in injury and trauma rates in urban and rural settings. The second presentation will discuss how children's hospitals provide support services to children evaluated in pediatric emergency departments for injuries from interpersonal violence. The third presentation describes an evaluation of safety environments for homeless shelters. The final presentation is the discussion of the validation of an injury prevention screening tool for families. All of these presentations attempt to reach some of the most difficult situations that keep injury prevention professionals awake at night! Please join us for a fascinating discussion.

This session will enable participants to:

- 1) Discuss the differences in injury patterns and severity in the urban and rural settings.
- 2) Examine how different children's hospitals handle victims of youth violence
- 3) Recognize homelessness as a risk factor for injury
- 4) Describe the environmental safety of family homeless shelters and discuss an intervention to improve homeless shelter safety.
- 5) Discuss how to develop and test reliability of an injury prevention screening tool.

**Panel Discussion Moderator:** Joe O'Neil, MD, MPH (Indianapolis)  
Associate Professor of Clinical Pediatrics  
Developmental Pediatrics  
Riley Hospital for Children  
Indiana University School of Medicine

## Presenters:

Wendy J Pomerantz, MD, MS: Serious unintentional injuries to Ohio children: Is there urban/rural variation? (Cincinnati)

Marlene Melzer-Lange, MD: Services to patients injured through interpersonal violence: A survey of children's hospitals (Milwaukee)

Rebekah Coelho, BS, EMT-B, CPST: Environmental safety assessments of family homeless shelters (Boston)

Michael Gittelman, MD: Testing the reliability of an injury prevention screening tool between individuals within a household (Cincinnati)

5:30-6:30 Reception

Atrium

6:30 Dinner

Salons A-D

Sunday November 15, 2015

7:00-8:00 Breakfast

Atrium

8:00-8:45 Business Meeting

Salons A-D

8:45-9:00 Break

9:00-9:10 Introduction of Keynote Speaker: Michael Mello, MD, MPH Board President

Salons A-D

9:10-10:00 **Keynote Speaker:** Grant T. Baldwin, PhD, MPH: It Takes a "Safe" Village: CDC Perspective on Child Injury Prevention

Salons A-D

Dr. Baldwin will provide an overview of the CDC perspective on child injury prevention. This will include documenting the significant causes of the burden in the United States and outlining the CDC National Action Plan for Child Injury Prevention. He will also showcase current CDC activities in the area and identify gaps in practice and research. Finally, Dr. Baldwin will discuss how greater implementation of known, effective intervention can further reduce child injury-related morbidity and mortality.

This session will enable participants to:

- 1) Describe the significant causes of the burden of childhood injuries in the United States.
- 2) Discuss several key elements of the CDC National Action Plan for Child Injury Prevention.

- 3) Describe two current CDC activities designed to reduce the burden of child injuries.
- 4) Identify one or more gaps in child injury prevention research and practice.
- 5) Discuss opportunities to improve implementation of known, effective interventions.

10:00-10:15 Break

10:15-11:35 **Panel Discussion:** Research and Programs Improving the Safety of Children Conducted by the CDC Injury Control  
Salons A-D Research Centers

This panel will provide an opportunity for the participant to learn about the cutting edge research and programs being conducted by our national Injury Control Research Centers funded by the Centers for Disease Control. ICRC representatives will provide an overview of the research and programs being conducted at their center and provide a detailed presentation on select programs/research.

This session will enable participants to:

- 1) Describe the research being conducted at our national Injury Control Research Centers (ICRC) funded by the Centers for Disease Control.
- 2) Recognize the importance of contributions and leadership provided by ICRCs.
- 3) Discuss child traffic fatalities and how the safe routes to school program is improving the health and safety of children.
- 4) Identify the challenges of conducting anti-bullying measures in schools and the legal implications of school compliance.
- 5) Describe effective hospital based injury prevention efforts including prescription drug misuse, abuse and overdose.

**Panel Discussion Moderator:** Steve Rogers, MD (Hartford)  
Attending Physician - Division of Emergency Medicine  
Coordinator - Emergency Mental Health Services  
Connecticut Childrens Medical Center  
Research Scientist  
Connecticut Childrens Injury Prevention Center  
Assistant Professor  
University of Connecticut School of Medicine

**Presenters:**

Guohua Li, MD, DrPH: Effectiveness of the safe routes to school program in reducing school-age pedestrian and bicyclist injury: A nationwide evaluation (New York)  
Marizen Ramirez, MPH, PhD: Implementation evaluation of Iowa's anti-bullying law (Iowa City)  
Andrea Gielen, ScD, ScM: The Johns Hopkins Center for Injury Research and Policy: Prescription medication dangers for children (Baltimore)

11:35-11:50 Break

11:50-1:10 **Panel Discussion:** Injury Prevention Programs in our Communities: How Do They Succeed?  
Salons A-D

Successful injury prevention programs rely on understanding communities' needs through data analysis, followed by careful implementation and longitudinal follow-up. Every community has different challenges, so the interventions reflect the local issues, but may be modified to fit other locales. The programs included in this panel represent four very different cities in this country, and how they made a significant impact on their communities.

This session will enable participants to:

- 1) Describe how injury prevention models are applied to pedestrian safety.
- 2) Evaluate barriers to implementation of injury prevention models and create new strategies to address these barriers.
- 3) Discuss the utility of Health Related Quality of Life as a marker for outcomes and describe how the intervention of Ujima Summer Camp improves participants' well-being.
- 4) Discuss the window fall prevention initiative in NYC as an example of a multipronged approach that can be used to address a variety of injury prevention initiatives.
- 5) Describe benefits of bedside consultation vs. post op follow up calls and explain the connection between individual bedside consult and community.

**Panel Discussion Moderator:** Vidya Chande, MD  
Medical Director  
Blank Children's Hospital Emergency Department  
Injury Free Des Moines, PI

**Presenters:**

Cheri Fidler, MEd: Creating safer routes to school; our 15 year journey in San Diego (San Diego)  
Maralene Melzer-Lange, MD: Improvement in quality of life for youth exposed to violence following summer camp intervention (Milwaukee)  
Joyce Pressley, PhD, MPH: The fifty year lifecycle of window falls and window fall prevention in New York City (New York)  
Alicia Hammonds-Reed, MPH: Limiting pediatric injury recurrence through bedside consult programs (Los Angeles)

1:30      Box Lunch  
Atrium      (Shuttles to Beach)

**Accreditation**

**CHES**

Sponsored by Cincinnati Children's, a designated provider of continuing education contact hours (CECH) in health education by the National Commission for Health Education Credentialing, Inc. This program is designated for Certified Health Education Specialists (CHES) and/or Master Certified Health Education Specialists (MCHES) to receive up to 15.5 total Category 1 contact education contact hours. Maximum advanced-level continuing education contact hours available are 0.

**Continuing Medical Education**

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Cincinnati Children's and the Injury Free Coalition for Kids at the Center for Injury Epidemiology and Prevention, Mailman School of Public Health, Columbia University. Cincinnati Children's is accredited by the ACCME to provide continuing medical education for physicians. Cincinnati Children's designates this live activity for a maximum of 15.0 *AMA PRA Category 1 Credit(s)*<sup>™</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

**Disclosure**

Cincinnati Children's requires all clinical recommendations to be based on evidence that is accepted within the profession of medicine and all scientific research referred to, reported or used in support of or justification of patient care recommendations conform to the generally accepted standards of experimental design, data collection and analysis. All faculty will be required to complete a financial disclosure statement prior to the conference and to disclose to the audience any significant financial interest and/or other relationship with the manufacturer(s) of any commercial product(s) and/or provider(s) of commercial services discussed in his/her presentation and/or commercial contributor(s) of this activity. All planning committee members and/or faculty members were determined to have no conflicts of interest pertaining to this activity.