

UNIVERSITY OF MICHIGAN HEALTH SYSTEM · DEPARTMENT OF EMERGENCY MEDICINE
PEDIATRIC EMERGENCY MEDICINE FELLOWSHIP PROGRAM

Rotation: Child Abuse and Legal Advocacy
Institution: University of Michigan Health System
Duration: Two (2) to Four (4) Weeks
Fellow Training Year: EM trained or PD trained fellows (Year 2)

Supervising Faculty: Bethany Mohr, MD

ROTATION AVAILABILITY

One house officer/fellow per month. Rotations are offered during the months of October, November, December, February, March, and April.

1,300 U.S. children experience severe or fatal head trauma from child abuse every year and approximately 30 per 100,000 children under age 1 suffer abusive head injuries. In the first year of life, homicide is second only to unintentional suffocation as the cause of death in injury-related deaths.

Sexual abuse affects as many as 25% of children according to some studies. Anyone practicing pediatric emergency medicine will be caring for abused patients. Neglect must also always be considered in trauma patients presenting to the emergency department as more children die due to neglect than any other form for child maltreatment.

EDUCATIONAL GOALS:

1. This rotation will familiarize fellows with the warning signs of child abuse and how to approach the issue with patients and their families. Fellows will become knowledgeable about how emergency department, inpatient, & outpatient evaluations are conducted and understand the process of investigating these cases in a multidisciplinary manner. **Competencies: MK, PC, IC, P, SBP**
2. Fellows will learn the details of the legal process in child abuse investigations including medical record documentation, chain of evidence collection, interacting with the Children's Protective Services, law enforcement, attorneys and courts, and testifying in court on matters related to child abuse and neglect. **Competencies: MK, PC, IC, P, SBP**

EDUCATIONAL OBJECTIVES:

1. Refine skills in obtaining histories and performing developmentally-appropriate exams of pediatric patients (inpatient/outpatient) who are suspected victims of child abuse/neglect. **Competencies: MK, PC, IC, P, SBP**
2. Become familiar with the contents of the Michigan Sexual Assault Forensic Examination (SAFE) Kit and learn how to collect evidence; including required chain of evidence procedures. **Competencies: MK, PC, SBP**
3. Understand the indications for and specific diagnostic evaluation options for children with suspected abuse/neglect. **Competencies: MK, PC, SBP**
4. Understand the role of medical documentation (including photography) of children who are suspected victims of abuse/neglect. **Competencies: PC, IC, SBP**
5. Understand Michigan Law (Child Protection Law) and Children's Protective Services Policy as it pertains to medical providers' responsibilities in the care of abused/neglected children and suspected victims of abuse/neglect. **Competencies: PC, SBP**
6. Read/Review selected CPT educational modules addressing components of assessment and care of children with suspected abuse and/or neglect. **Competencies: MK, PC, IC, P, SBP**
7. Learn to be an effective team member of the UMHS Child Protection Team as it investigates and

Accreditation Council for Graduate Medical Education (ACGME) Core Competency Key:

PC = Patient Care; MK = Medical Knowledge; PBLI = Practice-Based Learning and Improvement; IC = Interpersonal and Communication Skills; P = Professionalism; SBP = Systems-Based Practice

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- follows children presenting with suspected abuse and/or neglect. *Competencies: PC, IC, P, SBP*
8. Understand the nuances of communication between CPT, families, and children involved in CPT cases. *Competencies: PC, IC*
 9. Learn the practice of the Child Protection Team as it investigates and manages cases and works closely with other health system components, local/regional law enforcement and social work systems (Children's Protective Services), and the court system. *Competencies: PC, IC, P, SBP*
 10. Understand the role of the medical provider in the larger scheme of overall care of children with suspected abuse/neglect. *Competencies: PC, SBP*
 11. Learn and demonstrate compassion and sensitivity in the medical care of children / families involved in suspected child abuse and or neglect as well as maintain confidentiality in concordance with the MI Child Protection Law and HIPAA. *Competencies: PC, P, SBP*

DESCRIPTION OF THE CLINICAL EXPERIENCE:

Specific components of the elective will be tailored for each fellow's needs and availability, but would include 2-4 half-day clinics each week in which children who are suspected victims of abuse and/or neglect are evaluated (including a physical examination) under the direct supervision of one of the child abuse pediatricians (attendings). Colposcopy is often utilized during the physical examination. The fellow will attend the monthly Child Abuse Review Committee Meetings and Pediatric Trauma M&M, and weekly CPT Meeting and will sit in on county, regional, and state committee meetings related to child death/child abuse. He or she will participate in inpatient and ED consults.

The fellows may attend a law school class on child abuse that the Child Advocacy Law clinic faculty teaches. This will expose the fellows to the legal and system aspects of the investigation and processing of child abuse cases. The fellows will also spend time in the Family Assessment Clinic (FAC) in the School of Social Work where they will observe professionals conducting interviews and evaluations of families with allegations of sexual abuse and other forms of abuse. There may be opportunities for observing court testimony or participating in a moot court child abuse case at the UM Law School. The fellows will observe the child abuse specialists in court if such cases arise during the course of the elective. The fellows may participate in community outreach child abuse prevention programs and conferences.

DESCRIPTION OF THE DIDACTIC EXPERIENCE:

Fellows have access to selected readings and imaging materials related to child abuse and neglect through the CPT offices. Fellows may be asked to present cases for the CPT team at multidisciplinary conferences and/or Pediatric morning report as directed by CPT faculty.

EVALUATION PROCESS:

Fellows are evaluated using tools based on the six core competencies completed in writing by child abuse faculty after rotation via the UMHS MedHub online evaluation system. Fellows, likewise, evaluate their experiences after this rotation. Evaluations are forwarded to the Program Director and made available to individual fellows via the MedHub system at all times. Formal reviews of fellow's evaluations occur at

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quarterly PD/Fellow meetings.

FEEDBACK MECHANISMS:

Specific problems or notations of excellence identified through verbal or written communication to the Program Director regarding the fellow are immediately brought to the attention of the involved fellow. Fellows receiving an overall poor performance grade (less than satisfactory evaluation for rotation) are notified immediately and meet with the PD. Fellows who receive notation for improvement in some areas (but pass the overall rotation) are given a work plan for educational intervention with specific timeline for completion and reevaluation. Fellows who do not pass an overall rotation will meet with the PD for remediation work plan, including timetable for reevaluation and UMHS notifications as required by GME. Monthly evaluations are placed in the fellow's file and are available for review at any time by the fellow, but are also reviewed during quarterly meetings with the PD. Fellows are encouraged to review MedHub regularly and, at least, monthly.

Reviewed		11/2006	06/2008		06/2009	4/2011	05/2011	
Revised	06/2005			11/2008			05/2011	07/05/2011
Initial(s)	MN	MN	MN	MN	MN	MN	MN	sb