

**FELLOWSHIP PROGRAM  
IN  
CHILD ABUSE PEDIATRICS**

The Lawrence A. Aubin Sr. Child Protection Center  
“The Aubin Center”  
**Warren Alpert Medical School of Brown University**

**AND**

**HASBRO CHILDREN’S HOSPITAL  
PROVIDENCE, RHODE ISLAND**

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## **Introduction**

The Warren Alpert Medical School at Brown University announces the availability of a three-year academic Fellowship Program in Child Abuse Pediatrics. The fellowship is offered in partnership with Hasbro Children's Hospital in Providence, Rhode Island. The program aims to train pediatricians to become medical experts, knowledgeable and competent in all areas of child abuse and neglect, including physical abuse, sexual abuse, neglect (supervisional, medical, and physical), psychological abuse and neglect, and medical child abuse (factitious illness by proxy). The fellowship is directed at training physicians who will pursue careers as clinicians, researchers, and teachers.

## **History of Fellowships in Child Abuse and Neglect**

Fellowships in this field have been offered since the late nineteen eighties. Dr. Carole Jenny, founder of Brown University's program, started one of the first such fellowships in Seattle, Washington in 1987. The demand for physicians trained in Child Abuse Pediatrics is great.

In 1996, Brown and Hasbro committed to the development of this fellowship program in conjunction with the establishment of the Hospital's Child Protection Program. The program was renamed The Lawrence A. Aubin Sr. Child Protection Center "The Aubin Center in 2012.

The American Board of Pediatrics has established a sub-board specialty certification in Child Abuse Pediatrics. The first Child Abuse Pediatrics Board Examination was held in November 2009. This fellowship program obtained ACGME accreditation in July 2010. Therefore, graduates of Brown's Fellowship Program in Child Abuse Pediatrics are eligible to take the Child Abuse Pediatrics Subspecialty Board examination. The web site of the American Board of Pediatrics outlines the eligibility criteria for certification in Child Abuse Pediatrics. (See <https://www.abp.org>).

## **Fellowship Faculty**

Dr. Christine Barron is a board-certified Child Abuse Pediatrician and the Director of the fellowship program. She is an Associate Professor of Pediatrics at Brown University. She was founder and Director of the Child Protection Program at University of Massachusetts Medical Center in Worcester, Massachusetts prior to joining the Brown faculty. Her research interests are in child neglect, medical neglect, and child abuse prevention. She has practiced in the field of Child Abuse Pediatrics since 1998. She has served as the Co-Chair for the Helfer Society Child Abuse Pediatric Program Director Committee, and the Child Abuse Pediatric representative on Council of Pediatric Subspecialties (CoPS). In the fellowship program, her primary role as the Fellowship Director is the supervision and mentoring of clinical activities and all fellowship requirements.

Dr. Amy P. Goldberg is a board-certified Child Abuse Pediatrician and the director of the program's PANDA (Physical Abuse and Neglect Diagnosis and Assessment) Clinic. She is an Associate Professor of Pediatrics at Brown University. She is actively engaged in fellowship education and will supervise fellows in all of their clinical activities. Her research interests include acute sexual assault, physical abuse diagnosis within the disabled population. She is active in Rhode Island's Child Death Review process and she has practiced in the field of Child Abuse Pediatrics since 2000. Dr. Goldberg is also leading the program's quality improvement projects.

Dr. Brett Slingsby is a board-certified Child Abuse Pediatrician, Associate Fellowship Program Director and an Assistant Professor of Pediatrics at the Warren Alpert Medical School of Brown University. He completed his fellowship at the Warren Alpert Medical School of Brown University in 2013. He initially practiced as a Child Abuse Pediatrician at a hospital based Children's Advocacy Center in South Dakota, and was Assistant Professor of Pediatrics at the University of South Dakota. He was recruited back to The Aubin Center in 2016. He has demonstrated excellent leadership skills and is directing the program's prevention programs in addition to his responsibility for fellow education and patient care. .

## **Components of Brown's Fellowship in Child Abuse and Neglect**

A description of the components of the program follows.

### *1. Clinical care of abused/neglected children and clinical teaching*

Through direct patient care and supervision, fellows will acquire expert clinical skills and knowledge in the field of child abuse pediatrics.

The Aubin Center at Hasbro Children's Hospital is an active clinical program providing services to approximately 1,200 children each year. The clinical activities of the program include the following:

*ChildSafe clinic:* The *ChildSafe* clinic is held weekly. During clinic hours, the majority of outpatients are seen for comprehensive evaluations of sexual abuse (acute and chronic). The clinical evaluation includes a medical and social history, a complete physical examination, review of relevant records; consultation with available social service or law enforcement personnel, and, in sexual abuse cases, a colposcopic documented anogenital examination will be completed. When indicated, a forensic interview is completed. When clinically indicated forensic evidence kits and specimens for sexually transmitted pathogens are collected. After the evaluation, a comprehensive report including recommendations for treatment is completed. In addition, patients with physical abuse or neglect where Rhode Island Department of Children, Youth and Families (RI DCYF) is not involved are also examined in this clinic.

In addition, our center is the medical provider for the Rhode Island Human Trafficking Task Force, and as such we provide acute and follow-up medical care for victims of domestic minor sex trafficking (DMST).

*Pediatric Abuse and Neglect Diagnostic and Assessment (PANDA) Clinic:* PANDA clinic is also held four days a week. . In this setting, RI DCYF refers children for evaluation who have been placed into Rhode Island's child protection system and/or for children with physical injuries suspected to be secondary to inflicted trauma, or allegations of neglect. The evaluation includes medical and social histories, physical examination, developmental, and behavioral/emotional screening. After the evaluation, a comprehensive report including a complete inventory of the children's physical and mental health needs is completed.

*Inpatient consultation service:* Patients are evaluated for concerns of child physical abuse, neglect, medical child abuse or child sexual abuse. The program's physicians provide inpatient consultations to the hospital's medical, surgical services and child psychiatric services in cases of suspected abuse or neglect. Many of these consultations are provided for seriously injured children with head injuries, burns, fractures, abdominal injuries, or severe malnutrition. Fellows will develop a thorough differential diagnosis to exclude alternative diagnoses for all evaluations. The Aubin Center is frequently asked to consult on children who sustain injuries from an accidental mechanism or where a dangerous circumstance may have resulted in serious injury. Injury prevention is discussed as part of the consult. After the evaluation, a comprehensive report including recommendations for treatment is dictated.

Inpatient consultations and continuing care gives fellows the opportunity to manage the medical-legal work-up of complex physical abuse, sexual abuse and neglect cases.

Fellows work with the hospital social services and external child protection agencies to arrange medical follow-up after discharge. Fellows also consult with social service agencies about post-hospital placement decisions, and they consult with police agencies about forensic aspects of serious child abuse cases.

Another important experience with inpatients is the diagnosis and management of serious cases of failure-to-thrive. They include children who are not being fed as well as medically ill children who are growing suboptimally within complex psychosocial situations. After discharge from the hospital, fellows will follow these patients through their nutritional rehabilitation as outpatients.

In serious physical abuse cases, fellows are encouraged to go to the operating room with their patients and observe their surgeries.

*Emergency Department consultations and services:* Fellows also will evaluate patients in the hospital's Emergency Department and provide consultation on emergent cases. Acute sexual assault cases with injuries are usually seen in this setting. Fellows will

learn how to conduct forensic examinations including the collection of forensic evidence. Within this context, fellows do a risk assessment for HIV exposure and make appropriate recommendations for post exposure prophylaxis. Fellows will gain first-hand experience in managing the emotional and family crises that occur within this setting.

CAP Rounds: Fellows will review colposcopy images and photodocumentation of physical injuries with Aubin Center Attendings every week. Fellows will learn examination techniques, interpretation of exam findings and clinical management during this weekly review process.

Radiology rounds: The Aubin Center has consistent consultations with pediatric radiologists and neuroradiologists who are experts in child abuse injuries. Scheduled teaching conferences and specific case reviews are an important clinical and didactic experience for fellows.

Multidisciplinary team meetings: Each week, a meeting is held to discuss new cases of abuse and/or neglect seen by the Aubin Center. The meeting is attended by representatives of Rhode Island's Department of Children, Youth, and Families (the state child welfare agency), representatives of the Rhode Island Attorney General's office (prosecuting attorneys), by law enforcement personnel, by relevant community social service agencies, and by hospital personnel involved in the cases. Participation in the meeting allows the fellows to experience working in a multi-disciplinary setting. After the first year of fellowship, fellows often chair these meetings. This gives the fellows experience in managing information exchange among people with diverse professional interests, managing conflicts or disagreements, and keeping meetings flowing and interesting.

Community Advocacy Rotation: The program values a "hands on" approach to education that allows fellows to understand the realities and constraints experienced by other members of the multidisciplinary team. These experiences help fellows to better understand the social ecology in which abuse and neglect of children occur.

As part of their community experience, fellows attend case review meetings at the local Child Advocacy Center, and observe forensic interviews done there. Fellows are encouraged to accompany child protection workers during investigations.

The Aubin Center refers patients to several community agencies that are open to have fellows observe the treatment process. For example, fellows attend case reviews at a multi service community agency for high-risk families. Fellows may also visit the state crime lab to observe the analysis of a forensic evidence kit.

Forensic Pathology Rotation: Fellows spend two weeks at the office of the Medical Examiner of Rhode Island reviewing death cases and observing forensic autopsies. During this time, fellows will learn about the components of a thorough death investigation and forensic autopsy, about forensic laboratory procedures, and about

normal post-mortem changes. Topics such as toxicology and insect and environmental damage will be covered.

Clinical services at Hasbro Children's Hospital: Fellows can opt to complete additional elective time on another clinical service at the hospital, such as neurology, neurosurgery, pediatric surgery, or orthopedics. In addition, a rotation at the Partial Hospitalization Program can be arranged. This program treats factitious illness and chronic pain syndrome cases, as well as cases of severe medical neglect. This program is family therapy-based, treating the children in the context of their families.

Case review in medical child abuse (factitious illness) cases: Experts in Child Abuse Pediatrics are often called upon to review cases of medical child abuse, also called Munchausen Syndrome by Proxy, and other factitious disorders. The diagnosis in these cases usually is made by the careful and meticulous review of extensive medical records. During fellowship training, fellows will learn how to review and document cases to rule in or rule out medical child abuse inflicted by caretakers.

Court testimony: An important part of becoming an expert in Child Abuse Pediatrics is to be comfortable and effective as an expert witness. During the fellowship training, fellows will learn how to prepare for court testimony and will meet with attorneys under the supervision and guidance of attendings. By integrating the legal aspects of child abuse pediatrics into clinical practice, direct observation and didactics, fellows will learn how to testify in child abuse cases. Fellows will have the opportunity to testify on cases.

Development of expertise in teaching and lecturing: Fellowship is a time for future leaders in the field to become excellent teachers and lecturers. Fellows will be expected to teach medical students and residents both in formal and informal settings. Over the 3 years of fellowship fellows are expected to develop a detailed teaching file.

Weekly formal didactics including journal club and clinical case conferences are lead by supervising attendings or fellows, which allow fellows to gain experience in leading formal teaching sessions. At the end of fellowship training, each fellow will have a comprehensive set of teaching slides, formal lectures and other didactic material. Fellows will be observed in the teaching setting and mentored on their lecturing and clinical supervision skills.

Participation in Rhode Island State Child Fatality and Injury Review: Fellows will learn how to organize and manage a state-wide child death review activity by taking part in Rhode Island's team.

Opportunities for child advocacy: Depending on their individual interests, fellows will have opportunities to participate in public advocacy activities such as testifying before legislative committees, lecturing to lay audiences about abuse, or participating in particular interest groups centered on child protection. Learning to influence public policy on behalf of children is part of the child abuse expert's job in many communities. The fellowship will offer opportunities to hone these skills.

## 2. *Formal training and course work*

Formal course work and organized didactic learning are an important part of the fellowship experience. Several courses will be made available to fellows:

Pediatric Fellows Core Curriculum (PFCC): All Pediatric Fellows complete this six-day scholarly activity core curriculum course, usually in their first year of fellowship. Faculty presenters are scheduled in advance and CAP Fellows have protected time to attend all of these sessions. Topics include: Goals for Fellowship, Career Goals, Quality Improvements, Research Ethics, Scholarship Oversight, Faculty Promotions, the art of teaching, Statistics, Research Design, Mentors, Grant Writing, IRB, Resources, Cultural Competency and Bioethics.

Biostatistics and Applied Data Analysis I PHP 2507 :Biostatistics and Applied Data Analysis I is the first course in a year long, two-course sequence designed to develop in students the skills, knowledge and perspective to use data to address public health questions

Attendance at local and national child abuse meetings: An important component of fellowship training is exposing fellows to national standards for research and practice. To this end, fellows will be encouraged to attend at least one national meeting on child abuse during their training. In addition, several local groups hold didactic child abuse meetings yearly featuring nationally recognized faculty. Participation in these meetings will be part of fellowship training.

Every week the program has dedicated time for organized didactics, which includes one or more of the following depending on the week:

- *Clinical Case Presentation (CCP)*- The goal of CCP is to present cases where there are questions regarding mechanism, medical etiology, or general management in order to receive input from the group or to review 'interesting' cases that the presenter considers to have a clear teaching point.
- *Journal Club*- Fellows will participate and lead journal club for the Aubin Center staff or combined with other divisions such as Developmental and Behavioral Pediatrics or Radiology.
- *Patient Rounds*- Fellows present cases and calls about cases received over the weekend to review case management and protocols.
- *Program lectures*- Attendings from the program provide fellowship lectures on both basic topics (skeletal trauma) and advanced topics (medical child abuse).

- *Visiting subspecialty lectures-* Every year several subspecialists lecture to the Aubin Center on related medical and psychosocial topics. Some recent examples include Endocrine (Vitamin D deficiency and calcium, metabolism in the context of multiple fractures), Hematology (coagulopathies and the work up for patient with extensive bruising), and Psychiatry (outcomes of child maltreatment and the diagnosis of post traumatic stress disorder in children).
- *Regional Radiology Review-* Dr. Paul Kleinman, Boston Children's Hospital Radiology Staff, and Boston Area Child Protection Physicians meet monthly for radiology case review of skeletal and head trauma cases. Fellows may attend these monthly meetings to present cases for review and for learning.
- *Neuroradiology review*—Biannually program attendings and fellows meet with hospital based radiologists to discuss topics such as the physics of MRI and the clinical relevance of MRI sequences in their application to child abuse case and research collaboration.
- *Participation in monthly New England WebEx Child Maltreatment Case Review-* Fellows will participate through presentation of cases and discussions of cases presented by other participating members facilitated by Dr. Larry Ricci (Spurwink Child Abuse Program, Maine).

### 3. *Research*

Research is an important component of fellowship training. During the first year of training, fellows will meet with an assigned mentor to help determine his or her interests and priorities for research. With guidance, fellows will design a research project or collaborate on an existing project. Fellows will have a Scholarship Oversight Committee appointed to monitor the progress of their research project. Clinical or epidemiological research is the most common types of research pursued by fellows in the program. However, there are additional resources and mentors for fellows who have other research interests. At the end of the three-year period, fellows will complete a project that is compliant with the American Board of Pediatrics scholarly activity requirement.

### **Salary and Benefits**

Salary and benefits for fellowships are determined by the Graduate Medical Education department. Benefits include medical, dental and disability insurance, with optional family coverage. Malpractice insurance is provided.

### **Application and Interview for Fellowship**

The fellowship has guaranteed funding for three fellow positions. Our website is located at this link: <http://www.hasbrochildrenshospital.org/child-protection-program.html>

To apply for fellowship to our program, please use the Electronic Residency Application Services (ERAS) and there you will access an application at this link: [https://www.aamc.org/students/medstudents/eras/fellowship\\_applicants/375008/resources-info2015.html](https://www.aamc.org/students/medstudents/eras/fellowship_applicants/375008/resources-info2015.html)

Our fellowship is on a July cycle so you can locate any open positions and apply for our fellowship on July 1 of the prior year of which you are applying.

We also participate in the match through National Residency Match Program (NRMP) and their website is [www.nrmp.org](http://www.nrmp.org).

You will also need our program code if you are to rank our program and that is: **1677339F0**.

If you need more information, please contact Dr. Christine Barron, Fellowship Director, Dr. Brett Slingsby, Associate Fellowship Director or Jillian Pine, Fellowship Coordinator, The Aubin Center.

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