Good News for Kids
Success of the Child Abuse Prevention Project (CAPP) Means Big Wins for Kids

In a time when both professionals and laypersons may have grown weary of socially-focused programs producing negligible results, the Child Abuse Prevention Project (CAPP) in UF’s Division of General Pediatrics is bucking that trend by making great strides in its efforts to curb child abuse in 15 Florida counties. With a multi-faceted approach to family intervention, their efforts have yielded extraordinary results: More than 90% of families helped by the program have successful outcomes, evidenced by their not ending up back in the Child Protection system.

“A lot of it has to do with the home visitors and the relationships they have with the moms,” said Annie McPherson, Program Director. “Our mission is to keep kids out of foster care and keep the abuse from happening. If you can improve the home life, you’re going to improve the health of the child for the rest of their life.”

CAPP’s Nurturing Program matches parent educators to at-risk families whose mother and/or father receive individualized attention to their family’s needs. “The educators go into at-risk homes and improve the living conditions for the child,” said McPherson. “Families tell us this program has been very important in keeping their family together.”

(See CAPP, continued on page 7)
New directions, new voices

Thank you for perusing this second issue of ON PAR magazine. The goal of ON PAR is to encourage and empower the division’s pediatricians as they care for children and contribute to the university’s mission. With this issue comes a new direction for the publication and a set of new parameters by which its goals might be pursued.

Specifically, we are becoming as much of a community forum as a PR news source for those with interests in pediatrics research. While we originally began with a focus on providing quick bits of timely information for researchers, it became evident through our discussions and collaborations that there is great strength in gathering new voices and a potential for prosperity in covering certain topics more thoroughly.

It is in this spirit that ON PAR steps away from its original position as an at-a-glance guide to its new orientation with reaching out, reeling in and sharing communication amongst those whose professional interests affect children. Each issue will have a research focus and a community focus; in this issue we address the construction of chart review projects and current issues in child advocacy. The February edition will focus on conducting surveys and exploring the state of civil rights affairs as pertaining to health care for children. This is your news magazine and public relations outlet. Please send your suggestions, ideas, opinions and article submissions to make your voice heard as we work toward the common goal of improving the lives of the children we serve.

For the benefit of children,
Heidi Saliba
Editor, ON PAR news magazine

Meet the new Board of Directors of ON PAR

ON PAR now has a board of directors to contribute to and oversee the editorial decisions, depth and direction of each issue. Please welcome Dr. Lindsay Thompson, Dr. Kathleen Ryan and Dr. Marilyn Dumont-Driscoll as our first board members. Dr. John Nackashi, Chief of the Division of General Pediatrics, will lead the board and support its purpose.

ON PAR topics include:
- Good News for Kids
- IRB Notes and Reminders
- Statistical Considerations
- Research and Funding Opportunities
- Journal Information and Calls for Papers
- Details on Upcoming Conferences
- Child Advocacy Tips and Connections
- Sources of Support for Physicians
- Sources of Support for Patients and Parents
- Division Research Project Updates
- Calendar Notes for Research Projects
- Spotlights on Individual Researchers

Your submissions are welcome
Do you have research news or tips to share with the Division? Would you like to nominate a colleague to be featured in an upcoming newsletter? Send your suggestions to Heidi Saliba at hsaliba@peds.ufl.edu.
FYIs re the IRB

1. Exempt studies do NOT need annual continuing reviews.

2. You can now track the status of your IRB submissions online. Log on to: http://irb.ufl.edu/webtrack.html.

3. Retrospective Record/Data Review Studies (chart reviews) have their own new forms. You can find them in the alphabetical listing at: http://irb.ufl.edu/irb01/forms1.htm.

4. When filing any paperwork with the IRB, make sure you’re using the most recent version of the form. The IRB frequently updates their forms and may reject your submission if an old form is used.

Tell Your Patients’ Parents!
Free nutrition booklets are available from The Cancer Project!


Publishing Opportunity
Did you know the Journal of Adolescent Health is always in search of commentaries and clinical observations, in addition to scholarly research papers? The observations should be less than 1,000 words and briefly introduce then discuss the nature of your topic.

Visit the website: http://journals.elsevierhealth.com/periodicals/jah/authorinfo for more information.

Journal Focus
The new School Mental Health: A Multidisciplinary Research and Practice Journal is a forum for the latest research related to prevention, education, and treatment practices that target the emotional and behavioral health of children in our education system. The journal has announced a 2009 invitation for submissions on a variety of topics including evaluation of outcomes of school mental health prevention, interventions, and treatment and development and early evaluation of educational interventions and school-based prevention and treatment strategies among other topics. Visit their page within the www.springer.com site for information and instructions for authors.

Notes on using the university seal, logo, and mark
When putting together posters, brochures, PowerPoint presentations or other publishable materials, be sure to review the university’s policy on the use of its logo and seal. This policy can be found at http://identity.ufl.edu/signatureSystem/. In essence, we are not supposed to use the round seal without official permission, as it is reserved for diplomas and legal documents.

The vertical and horizontal signatures, however, may be downloaded from this site and used in accordance with established guidelines. Be sure to include enough blank space around the logo and place it in a prominent position within your document. The university asks that we do not alter the colors or artistic elements of any part of the logo design.
How to contact your newly-elected representatives

President-Elect of the United States
(D) Barack Obama
1600 Pennsylvania Avenue NW
Washington, DC 20500

Comments: 202-456-1111
Switchboard: 202-456-1414
Email: comments@whitehouse.gov
(text email only – no graphics or attachments)

(R) Cliff Stearns, Congress Dist. 6
US House Of Representatives
2370 Rayburn House Office Building
Washington, D.C. 20515
Phone (202) 225-5744
Fax (202) 225-3973
Email: follow contact path in
www.house.gov/stearns/

(R) Charlie Dean,
Florida State Senate, Dist. 3
311 Senate Office Building
404 South Monroe Street
Tallahassee, FL 32399-1100

P O Box 1076
Inverness, Florida 34451

(850) 487-5017
352-344-2249
Senate VOIP: 5017
Email: dean.charles.web@flsenate.gov

Each member of the Florida House of Representatives may be contacted at the address below, in addition to any additional address listed for each.

Florida House of Representatives
513 The Capitol
402 South Monroe Street
Tallahassee, FL 32399-1300
General Inquiries: (850) 488-1157

(D) Leonard Bembry, State Rep. Dist. 10
2510 SW Pettis Springs Circle
Greenville, FL 32331
Phone (850) 948-3921 or (850) 766-2159
leonard.bembry@myfloridahouse.gov

(D) Debbie Boyd, State Rep. Dist. 11
PO Box 95
Newberry, FL 32669
Phone (352) 472-2779 or (352) 472-3539
debbie.boyd@myfloridahouse.gov

(D) Charles Chestnut IV, State Rep. Dist. 23
3141 NW 13th St
Gainesville, Fl 32609
(352) 955-3083
charles.chestnut@myfloridahouse.gov

A comprehensive listing of state representatives may be found at www.myfloridahouse.gov.

For information on contacting locally elected officials visit www.alachuacounty.us.

Make your voice heard!
With the importance of this election and the various factors affecting health care decisions on state and national levels, challenge yourself to get involved. Write a letter to your representative in Congress; send a letter to the editor of the local newspaper. Start a blog or a group on Facebook™ to promote child advocacy efforts.

Have something to say about civil rights? What about children’s access to health care? The February 18th, 2009 edition of ON PAR will focus on health care issues relevant to these discussions. Share your experiences, send in a letter to the editor of this publication, suggest a column or offer a voice to contribute to this important topic.

Our research topic is the design and implementation of survey studies. What are your good and not-so-good experiences? What tips could you share with our audience? Together we can promote well-constructed research studies to advance our knowledge of pediatrics issues.
Residents’ Input: Update on the Fluoride Varnish Application Project
By Dr. Valerie Ritter

The Fluoride Varnish Application Project in continuity clinic was begun by Michele Lossius and Kristen Eisenman in 2003 and funded by a CATCH grant. I took over the project in 2007 and restarted the varnish applications in February 2008, when it was again funded by the AAP through CATCH. All residents across the three continuity sites (CMS, Eastside and Haile) participated in online tutorials to prepare for the project.

The fluoride varnish was applied at the 12-, 18- and 24-month well-child visits. Parents received information on oral health and hygiene as well as determining when their child needs to see a dentist. The project continued through the end of June when Medicaid began reimbursing for fluoride varnish applications and dental exams by pediatricians. Since the project ended we have begun applying the fluoride varnish at well visits starting at 12 months through 36 months of age. The varnish can be applied as often as every 6 months. Parents have been very excited about the fluoride varnish applications and the dental education we provide.

As part of my advocacy project I wrote a letter to the state Medicaid office, Governor Crist, the Department of Health, HRSA and others and had it signed by many residents, fellows and attendings at UF. The letter stated the need for early intervention in dental care to prevent caries and other dental pathology in our youngest patients. It also petitioned Medicaid to provide reimbursement for applying the fluoride varnish in clinic.

Saying goodbye to a colleague

Dr. Diokno holds a gift that was presented to her at her farewell luncheon October 23. She is now at the University of Arkansas.

Sources of Support
Physician Resources
Looking for a local expert to help with designing a new study? Need advice from someone at UF? Check out the university’s new ‘experts listing’ at http://experts.ufl.edu/expertisesearch.asp?flag=1. Here, you can choose from hundreds of fields of study and find one of our own who might be willing to help.

Patient Resources
Need a general resource to share with your patients’ caregivers? Consider http://patiented.aap.org/, the AAP’s Patient Education Online website. You’ll find an index of handouts with information on all types of diseases and conditions, as well as Vaccine Information Sheets and ‘A Minute for Kids’ audio files. It’s worth checking out!
Speaking of Statistics:

How to Construct Your Chart Reviews Study

Interview with June Nogle, Associate Research Scientist with the Institute for Child Health Policy

Seasoned statistician June Nogle sat down with Heidi Saliba this month to discuss the statistical construction of chart review studies, and how one can be sure their planned n is sufficient.

“In my experience there isn’t a super-easy way to calculate statistical significance,” Nogle said. “It’s a good idea to pull together as many known study factors as possible and call a biostatistician or statistician to review them.”

Important considerations in designing your study:

1) Know the size of your universe. For example, if you know you have 3,000 cases from which to extract samples, you’re in a different position than if you only have 30. With 3,000 you can let some of the other parameters decide the sample size.

2) Understand what is known about the population, or the average for the indicator you’re examining.

3) Gather power and size calculations about the outcome you’re studying. Knowing something about the baseline in that population helps to power that calculation.

4) Remember that it’s the sample in relation to the universe, relative to the universe size, that determines statistical significance. Make sure that whatever you’re predicting is larger than your confidence interval (CI). The CI places uncertainty on your findings, and a large universe will drive it down to acceptable levels.

5) For a quick, unofficial check of your sample size and statistical significance estimates, visit: http://www.dimensionresearch.com/resources/calculators/sample_size.html.

“This gives you an idea of whether you’re in the right ballpark with the n you are planning and helps frame the pieces that are needed to collect and think about your overall design,” Nogle said. “However, nailing down the sample size is the bulk of your research design challenge. Missing information is the only real variable.”

Nogle stresses that the website listed above should only be used for referential and contextual purposes, not for making the final analyses of your study.

Remember: PAS Abstracts are due Dec. 3! This year’s conference is scheduled for May 2-5 in Baltimore, Maryland.

Do you have something to add to our next issue? ON PAR will address the design and implementation of survey studies for the February issue. For the community focus, we will address civil rights issues relevant to children’s health and health initiatives. Please send your ideas or articles for consideration to hsaliba@peds.ufl.edu.
Mission: To meet the needs of abused children in our community

Slogan: Together, breaking the cycle of child abuse

Vision: A community-based, child-focused center that facilitates a compassionate multidisciplinary approach to the prevention, identification, investigation, prosecution and treatment of child abuse.

What it offers: Forensic interviews in a safe, child-friendly setting as well as case management and children’s therapy

Website: www.gainesvillechildadvocacycenter.org

Contact: PO Box 1128
Gainesville, FL 32602-1128
(352) 376-9161 Fax (352)376-9165

“Every day that a child is served is considered a win.” said Denise Ferrero, Board Chair and recently elected Alachua County Judge.

Pulse of the Patient
If you Google the term ‘medical information,’ you might come across the revolutionhealth.com website. At this site, users may browse a number of topics with information on various diseases and conditions and tips on healthy living. Additionally, the site offers an easy-to-use resources and search tools to help patients find doctors, understand their drugs they’ve been described, calculate daily caloric needs, predict ovulation, and navigate the insurance industry.

Why is this important? Your patients’ families may be using this or other sites to make decisions on whether and how often to schedule their children for visits, and how to speak to you about their concerns. Keeping pulse with the patient and their networks of support may prove to be useful in understanding the entire health care environment in which he or she operates every day.

CAPP, continued from page 1
Components of the Nurturing Program include discussions about getting children to sleep at night, how to potty-train a child, dealing with anger in a healthy way, and addressing issues related to the home’s structure and support systems. The Kids Central, Inc. organization (http://www.kidcentralinc.org/) was so impressed with CAPP’s results they increased their funding to the program this year.

Partnership for Strong Families and the United Way/Success by 6 organizations also help fund CAPP. “Last year United Way tracked our results and found that we were very successful,” McPherson said. For more information on the CAPP program visit http://capp.peds.ufl.edu.
Please join us for a screening of the award-winning drama, “Darius Goes West,” which has won an unprecedented 28 film festival awards!

**Darius Goes West** is a charitable subsidiary of Charley’s Fund, a nonprofit foundation that funds medical research with the goals of developing a treatment or cure for Duchenne’s Muscular Dystrophy (DMD). DMD is the most common and aggressive form of muscular dystrophy. Charley’s Fund has spent more than $12 million on medical research. For the first time in the history of the disease, human clinical trials have begun.

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**Tickets Available for These Showings:**

- **December 8, 2008**
  - 8:00 PM (doors open at 7:00 PM)
  - The Priest Theater in High Springs
  - Tickets: $5
  - **Contact** Bill or Kim at pbprocko@aol.com
  - for more details

- **December 9, 2008**
  - 7:00 PM (doors open at 6:00 PM)
  - P.K. Yonge Performing Arts Center
  - 1080 S.W. 11th Avenue
  - (On University of Florida campus)
  - Tickets: $15
  - **Contact** Lelia or Rick at Ginderlr@yahoo.com
  - for more details

Join us after the film as Darius and the cast host a questions and answers period! Your support and participation are invited and appreciated in making strides toward ending this disease.

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**Ped-I-Care Corner** [http://pedicare.peds.ufl.edu](http://pedicare.peds.ufl.edu)

In addition to continuing to provide excellent coverage to children with special health care needs in Title XIX or Title XXI programs, the Ped-I-Care program is moving forward with a number of proactive initiatives to ensure its continued success. One of those initiatives is the release of its new brochure, available in hard copy through various offices of the Division of General Pediatrics.

The purpose of the brochure is to inform pediatricians, legislators, and business professionals about the program and its purposes. It also provides specific information on the program’s functioning and how to contact Ped-I-Care administration staff.

Below is an excerpt from an inside panel of the brochure:

- **What is Ped-I-Care?**
  - Ped-I-Care is a managed care program that provides medical benefits for Florida’s children with special health care needs, whose families receive Title XIX (Medicaid) or XXI (SCHIP) benefits.

- **Who is eligible for Ped-I-Care?**
  - If a child is enrolled in Florida KidCare, identified as having a special health care need, and approved for benefits by Children’s Medical Services, he or she is eligible for participation in the program.

- **How much does it cost?**
  - Title XXI participants pay $20 per month or less per family; Title XIX (Medicaid) participants do not pay a premium.

- **How do families apply?**
  - Families may call Florida KidCare at (888) 540-5437 or visit their website at [www.doh.state.fl.us/AlternateSites/KidCare/](http://www.doh.state.fl.us/AlternateSites/KidCare/) for information on getting started with Ped-I-Care.
The Sebastian Ferrero Foundation was formed in memory of Sebastian Ferrero, a happy, healthy boy who died from a series of medical mistakes. In only its first year, the Foundation has achieved a number of milestones, including:

- **Becoming established as a 501(C)(3) not-for-profit organization**
- **Forming its first Board of Directors**
- **Creating the Sebastian Ferrero Office of Clinical Quality and Safety at Shands UF**
- **Assisting in the development of Condition H, a patient safety program at Shands UF**
- **Holding its first annual fundraiser, Noche de Gala, raising more than $700,000 in cash, $200,000 in pledges and $100,000 in kind (these amounts include Horst and Luisa Ferrero’s dollar-for-dollar match)**
- **Hosting several patient safety education programs in the community**
- **Signing a pledge with the UF College of Medicine and Shands HealthCare to work together to improve patient safety and pediatric care**
- **Garnering the support of 150 local pediatricians and pediatric specialists**

We are committed to fulfilling our mission of promoting excellence in patient safety and fundraising for a state-of-the-art, full-service children’s hospital in Gainesville. The year 2009 will be an exciting year, and we hope you will continue to support our efforts.

**Looking Back on a Successful Year**

**A Glimpse of What’s to Come**

Web: www.SebastianFerrero.org
Email: info@sebastianferrero.org
Phone: (352) 333-2579
Growing up in the small town of Indialantic I was exposed to recreational sports and mom’s healthy dinners. Pizza was for Friday night sleepovers, and big hearty breakfasts were for Sunday mornings. Everyone was health- and exercise-conscious.

A local family medical practice on beachy Fourth Avenue had a role in the “healthercise” of Indialantic. It was a fad for parents to sign up their kids each season for soccer or Little League, encouraged by the doctors who would put up the team photo in the office. The waiting room was a social scene among parents and the kids. Never once did I go to the doctor’s office when I didn’t see someone I knew. A typical conversation would include, “Hey, you going to the game Saturday?” Even at the local soccer fields you could expect to see moms sitting in their chairs with the younger children around them, and the dads standing on the sideline cheering on the team.

I’ve always felt the pressures of staying active and involved in some sport every season. My dad was a high school softball coach and was always in demand to coach for the Little League teams, too. I still get asked about my dad and how his team is doing.

When I graduated high school and started my freshman year at UF, I was not aware of how much of an influence playing sports during my pre-college years had on my mood and weight. For so many years I had a set schedule: school, practice, dinner, homework, bed. That was every day for years. I had no idea the practices and games I used to dread and complain about actually had a huge impact on my pants size.

During my first year of college, I slowly slipped into a pattern of getting no exercise and eating pizza at 1:00am. Then, big surprise, I gained the Freshman 15. I am a sophomore now, and I am still battling to find a balance between school, extracurricular activities, my social life, and exercise.

I believe that knowledge is power, and if I had been made aware of ways to stay active and eat healthy in college, I think I wouldn’t be battling my weight today.

I wish my doctor had given me a healthy eating and exercise plan before I moved to Gainesville. I would have liked to have been informed of how quickly my lifelong exercise and eating habits could change once I was away from home.

I believe that knowledge is power, and if I had been made aware of ways to stay active and eat healthy in college, I think I wouldn’t be battling my weight today.

My suggestion to all pediatricians: during the 18-year-old’s well-child check, catch your soon-to-be-college-student and give them the power. Inform them that the lack of daily activities will definitely affect their bodies. Give them ideas of fun ways to stay active, and healthy alternatives to those 1:00a.m. pizza cravings. Trust me, they will come back and thank you for it.

Editor’s Note: Catherine Sinclair is studying Psychology at UF and is active in a number of campus activities, including the Kappa Alpha Theta sorority. She is considering a career in either family law or child advocacy.
Focus on the Infant Sleep Study
Led by Principal Investigator Dr. Siraj Siddiqi, the longitudinal Infant Sleep Study has seen great successes this semester in terms of patient recruitment.

Lead Research Assistant Robert Hasbrouck, a senior in Psychology, has been named Co-Principal Investigator on the study for his ongoing commitment to the project’s success. The various aspects of the study, including its logistics, organization, patient recruitment procedures, IRB details, and RA selection and training are the topic of his senior thesis.

“Working with Robert is rewarding,” said Co-PI Lindsay Thompson, “as he is learning, teaching and helping all at the same time. While this study will continue for the next few years, likely beyond his college experience, having him serve as a continuous presence is invaluable. And who knows, perhaps he will stay on to continue to help us!”

Research Progress
Spotlight on Sanjeev Tuli, MD FAAP Projects
As a leader in both practice and research, Dr. Sanjeev Tuli pursues dual missions in his career. Here, he talks with ON PAR about the challenges, successes, and his areas of interest in the field.

“The division benefits from Sanjeev's analytical approach, which is woven through his research, teaching, clinical and educational missions,” said Dr. John Nackashi, Chief of the Division of General Pediatrics. “He is able to effectively complete his clinical, research and administrative responsibilities and still be an active researcher.”

With which projects are you currently involved?
• Teaching Development Screening in continuity clinic
• Learning styles and personalities of pediatric residents and relationship to board scores
• Infant sleep patterns, maternal mood, and their relationships to behavior
• Using Item Response Theory to Improve Children’s Quality of Life Assessments

What are your research areas of interest?
Resident education, health care delivery, and quality improvement

What challenges do you commonly face with research?
Finding funding for research time, improving collaboration, addressing the need for the services of a statistician

Next edition: Spotlight on Dr. Carter and Dr. Dumont-Driscoll
Everyone needs a best friend!
Kids and K-9s for Healthy Choices works with families for lifestyle improvements

“It’s the total package,” said Debra Grant, chapter director of the Ocala Kids and K-9s for Healthy Choices. “We want them to develop healthy habits for the rest of their lives.” Grant’s reference to the Kids and K-9s program reflects the goals and mission upon which it was formed.

Begun in March by CMS Nursing Supervisor Kathy Wright, the program matches families with dogs from a local animal shelter as a way to serve the community and build the self-esteem that is vital to making positive self-care choices. Saturday meetings are held in which education, guidance and encouragement are provided in the areas of diet, exercise, personal relationships and community involvement.

“We focus more on BMI than on weight,” Grant said. The children are not offered a specific diet but rather given information on making good food choices. They keep a food journal and document everything that is eaten during the day. Additionally, each child is given a pedometer which tracks the number of steps taken during a day. They are introduced to a variety of fun activities such as Chinese jump rope, Zumba, and Jazzercize, and also participate in field trips to dog training facilities and dog shows. Sometimes they get to interact with local veterinarians and youth dog trainers.

Children are required to walk their dogs two times a day for 30 minutes each time, and a family member must accompany the child for at least one walk. This part of the program is designed to promote family unity and get everyone involved in taking care of the dog and enjoying exercise together. The result? “It’s very nice to see them enjoying each other,” Grant said. One child has begun talking to his mom about the choices he made in the lunch line at school; others volunteer to walk dogs who are still at the local shelter. Many have seen BMI reductions and consequent improvements in their self concept.

“They’re at such an impressionable age,” Grant said. “They’re really starting to feel empowered with the knowledge they have.” For more information on the Kids and K-9s program visit www.kidsandk9s.org.