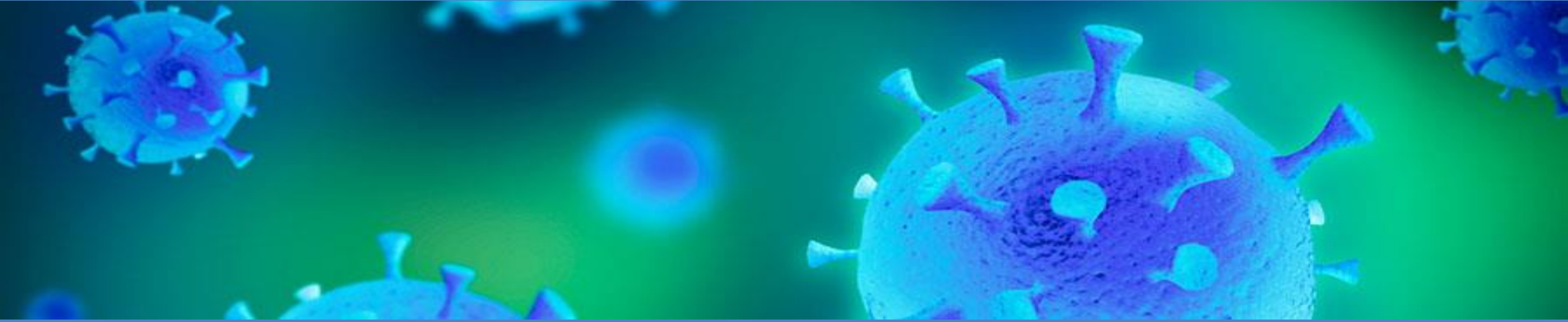


VCHIP / CHAMP / VDH COVID-19 UPDATES



Wendy Davis, MD FAAP - Senior Faculty, Vermont Child Health Improvement Program, UVM
Breena Holmes, MD FAAP – VCHIP Senior Faculty & Physician Advisor, MCH Division, VDH
January 18, 2021



Technology Notes

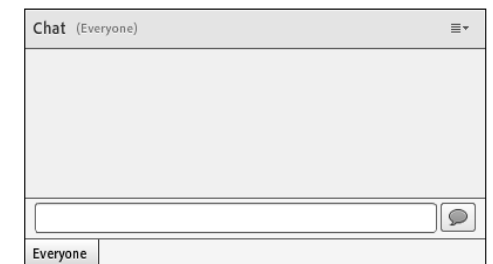
- 1) All participants will be muted upon joining the call.
- 2) If you dialed in or out, **unmute by pressing #6** to ask a question (and press *6 to mute).
If you are having audio difficulties and are using your computer speakers, you may wish to dial in:

Call in number – 1-866-814-9555

Participant Code – 6266787790

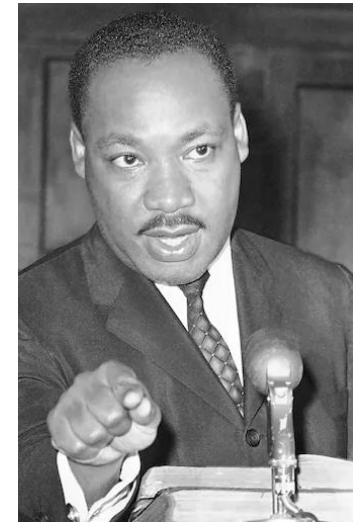
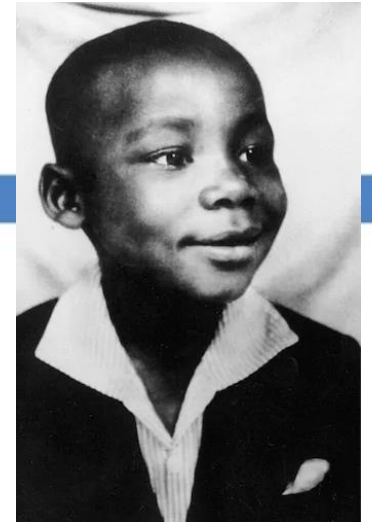
Presenters: Please avoid the use of speakerphone and make sure your computer speaker is muted if you dialed in via phone.

- 3) To ask or respond to a question using the **Chat** box, type your question and click the  icon or press Enter to send.



Overview

- ❑ **Celebrating Martin Luther King, Jr. Day**
- ❑ *Reminder* – weekly event schedule:
 - ❑ **VCHIP/CHAMP/VDH calls: M/W/F**; Gov. Media Briefings Tues/Fri; VMS call with VDH Commissioner Levine Thursday.
 - ❑ ***This week*: calls on Monday & Friday only; (NO call Wed., January 20 – Inauguration Day)**
- ❑ Situation, VDH, vaccine updates
- ❑ Practice Issues: **Update – AAP-VT Task Force on Race and Health Equity**
- ❑ Q & A/Discussion

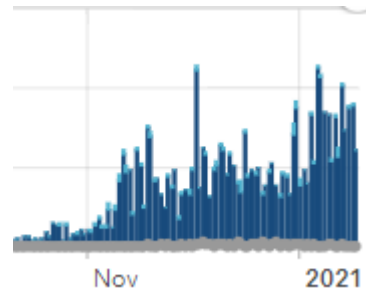


<https://www.washingtonpost.com/history/2019/01/15/story-how-michael-king-jr-became-martin-luther-king-jr/>

[Please note: the COVID-19 situation continues to evolve very rapidly – so the information we're providing today may change quickly]

Situation update

New Cases
123
10,220 Total
Currently Hospitalized
43
Hospitalized In ICU
7
Hospitalized Under Investigation
1
Percent Positive 7-day Avg.
2.7%
People Tested
289,315
Total Tests
809,158
Recovered
6,825
66.8% of Cases
Deaths
163
1.6% of Cases
Travelers Monitored
164
Contacts Monitored
217
People Completed Monitoring
12,351
Last Updated: 1/18/2021, 10:46:24 AM



VT New Cases, Probables, Deaths

- U.S. 23.9 million+ cases; **397,612 deaths**
 - <https://www.nytimes.com/interactive/2020/us/coronavirus-us-cases.html> (updated 1/18/21)
 - 1/17/21: **169,641 new cases; 1,730 d.; 124,387 hosp.**
 - Past week: average 218,971 cases/day (increase of 3% from average 2 weeks earlier)
 - **2 million+ deaths worldwide** (95.1 million+ cases)
- **VDH Weekly Data Summary(1/15/21)**
 - <https://www.healthvermont.gov/sites/default/files/documents/pdf/COVID19-Weekly-Data-Summary-1-15-2021.pdf>
 - **Weekly Spotlight Topic: How are people getting COVID-19?**
- Find previous summaries at:
 - <https://www.healthvermont.gov/covid-19/current-activity/weekly-data-summary>

Vermont Records 10,000th COVID-19 Case (1/17/21)

- NY – 19 days
- MA – 22 days
- CA – 30 days
- CT – 33 days
- RI – 65 days
- NH – 233 days
- ME – 254 days
- VT – 315 days



Mike Pieciak @MikePieciak · 21h

Today [#Vermont](#) recorded its 10,000th [#COVID19](#) case

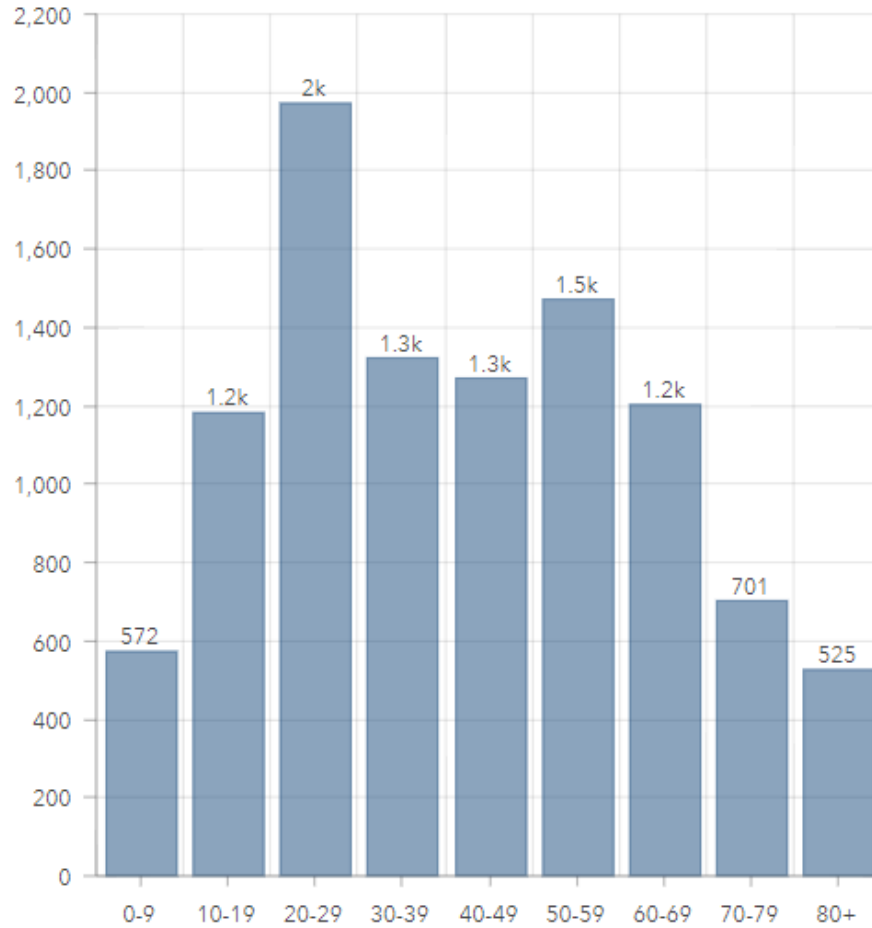
It is the last state to reach 10K - taking 315 days from its 1st case to today

Although cases remain high, per capita, VT has the fewest cases, lowest hospitalizations & 2nd fewest deaths. Your sacrifices continue to save lives

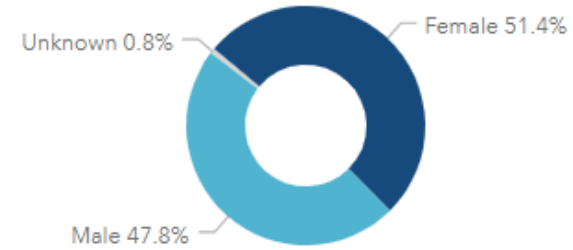


Situation update

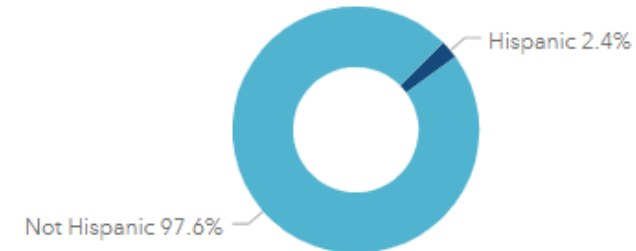
Vermont COVID-19 Cases by Age Group



Vermont COVID-19 Cases by Sex



Vermont COVID-19 Cases by Ethnicity if Known



Vermont COVID-19 Cases by Race if Known



Case Demographics

<https://www.healthvermont.gov/covid-19/current-activity/vermont-dashboard>

January 18, 2021

6

COVID-19 Cases in VT K-12 Learning Communities (While Infectious)

□ COVID-19 Cases in Vermont K-12 Learning Communities While Infectious

▣ <https://www.healthvermont.gov/sites/default/files/documents/pdf/COVID19-Transmission-Schools.pdf>

▣ Table updated **Tuesday & Friday** w/data through previous Sunday & Wednesday.

January 13, 2021

Cases in Vermont K-12 Learning Communities While Infectious

Learning Community	Cases Reported In the Past 7 Days	Total Cases
Schools with less than 25 students are reported in the "Total for all Suppressed Schools" row at the end of the table.		
TOTAL FOR ALL SCHOOLS	45	325

January 10, 2021

Cases in Vermont K-12 Learning Communities While Infectious

Learning Community	Cases Reported In the Past 7 Days	Total Cases
Schools with less than 25 students are reported in the "Total for all Suppressed Schools" row at the end of the table.		
TOTAL FOR ALL SCHOOLS	29	304

□ Rochester/Stockbridge outbreak (5 cases): ***thank you, Dr. Ashley Miller*** (So. Royalton Health Center) for meeting w/community members last night – rave reviews!

□ VT College & University dashboards:

▣ Returning to campus this week: <https://dfr.vermont.gov/about-us/covid-19/school-reopening>

VDH Updates: Testing

Testing capacity:

- ~267 sites (261 CIC on-demand; 6 pop-ups) posted 1/18/21 – 1/31/21
 - ▣ Same-day testing slots now posted all day; 28,068 slots currently open.
- **NOTE:** VDH posted testing sites are intended for **asymptomatic** pts.; prefer symptomatic pts. to seek connection to PCP/medical home.
- CIC locations include:
 - ▣ Bennington, Berlin, Brattleboro Mem. Hosp, Burlington, Fairlee, Hardwick, Island Pond, Middlebury, Morrisville, N. Country Hosp, Northfield, Springfield, RRMC, St. J, Stratton, Waitsfield, Waterbury, Williamstown, Williston, Winooski
 - ▣ Days of the week/hours vary by site
- Pop-up locations listed: Burlington, Colchester, St. Albans, Williston

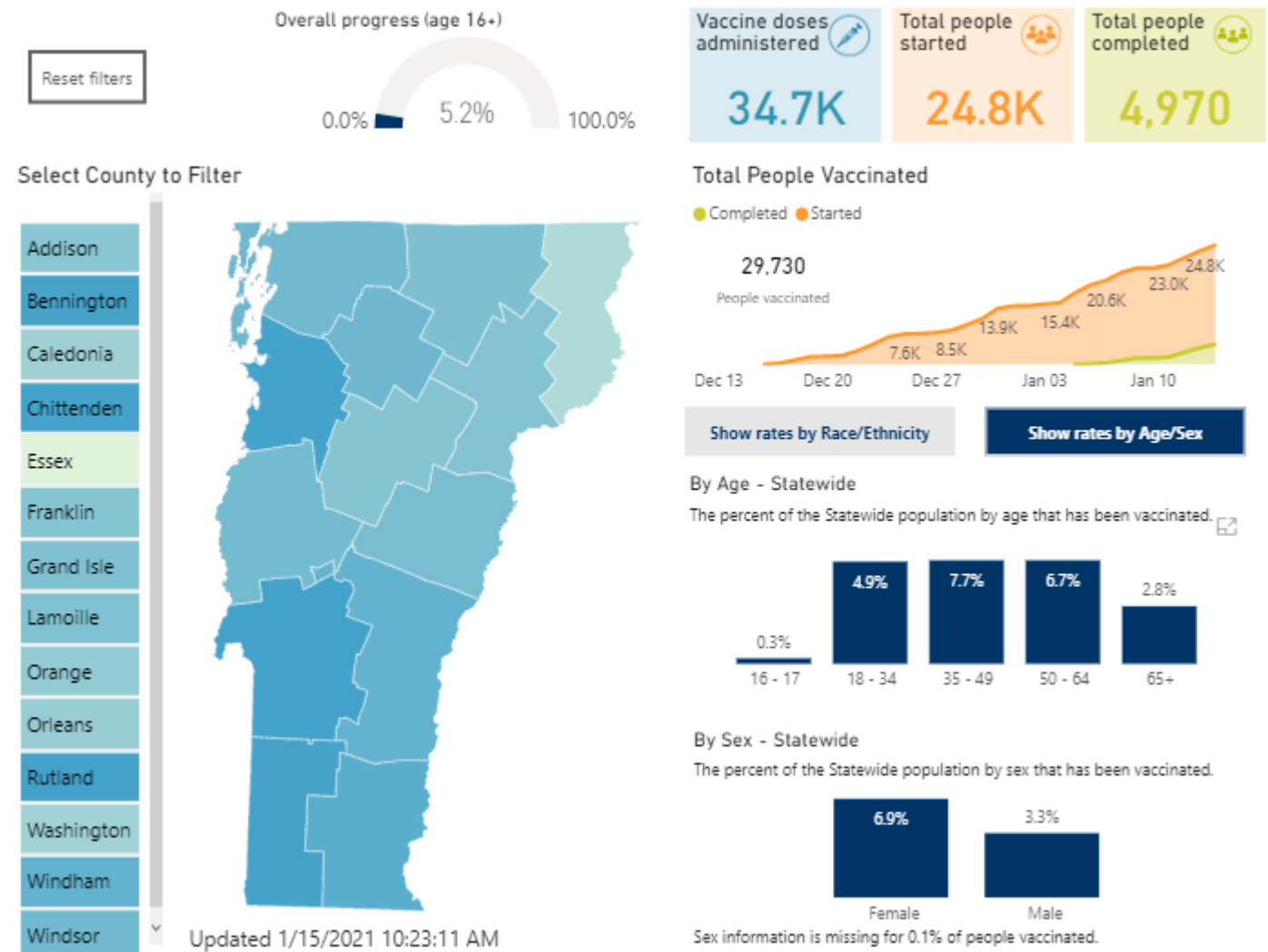
VDH Update: Testing (cont'd.)

VDH preferred protocol for obtaining COVID-19 results for patients tested at CIC on-demand or VDH pop-up sites:

- *Providers should first check VITL for any testing completed through Dr. Levine's orders – this will be the most expedient and immediate way to access results. If they do not have access to VITL, and cannot gain access to VITL, then the provider may contact:*
 - ahs.vdhoccovidresultsletters@vermont.gov – provide the name & DOB of their patient and the request for their results in order to help treat that patient.
- Many thanks to those who responded to our brief survey (1/15/21) which confirmed that many Vermont PCPs do not have access nor regularly use VITL, which adds a layer of complexity and administrative burden to office systems already stretched thin in the current context.

VDH COVID-19 Vaccine Dashboard

- Now updated Tues. thru Sat.
- Data = counts reported by end previous day; subject to change.
- Expect enhancements as more info available.
- <https://www.healthvermont.gov/covid-19/vaccine/covid-19-vaccine-dashboard>



For Your Enjoyment

- Video: COVID-19 lessons from our canine friends

Worth a listen:

- YouTube: “Have the New Jab” (Sung by England’s Marsh family to the tune of Leonard Cohen’s “Hallelujah”):
<https://www.youtube.com/watch?v=ZnbOKH9Oe9s>

“Tess has always loved this song since learning it at school a few years back - Leonard Cohen's incredible Hallelujah (1984) - and it's always fit beautifully with her range. So with the ongoing race between injections and infections which is particularly acute in the UK at the moment, we figured we'd chip in to try to encourage anyone who might be wavering or hesitant to go ahead and get vaccinated against COVID-19. We'll try to do a more energetic one next time round, but this was right for a Sunday night!”



Upcoming Events

Martin Luther King, Jr. Day Events

- Film & discussion w/Deborah Lisi-Baker about MLK legacy and disability rights.
 - ▣ **Today**, 4 – 5 pm; see CHAMP email link or <http://www.vcil.org/get-involved/community-calendar-list> (VT Ctr. for Indep. Living)
- From Tim Wise's talk: Derrick Bell, The Interest Convergence Principle (not one book, but discussed in several); Jonathan Metz'l's Dying of Whiteness: How the Politics of Racial Resentment is Killing America's Heartland
- UVM LCOM Story Slam (thank you Andrea Green)
 - ▣ Theme: Friends in Unexpected Places
 - ▣ **January 21, 2021: 7 – 9 pm; reg. required**

Thu., January 21, 2021
StorySlamRx
Voices in Medicine

Join us for an evening of true stories told by members of the UVM medical community.

The theme for this year's StorySlamRx is Friends in Unexpected Places.

A LIVE Zoom Virtual Event
7-9pm EST

All members of the LCOM & UVMMC Communities are welcome.

For more information or to register,
[visit go.uvm.edu/storyslamrx](http://go.uvm.edu/storyslamrx)

Contact Kiersten Hallquist with any questions:
Kiersten.Hallquist@med.uvm.edu



Upcoming Events (cont'd.)




Martin Luther King, Jr. Day Events

- ❑ UVM MLK Celebration, **Wednesday, Jan. 20, 5:30 – 6:45 pm**
- ❑ Offices of the Pres.; VP for Diversity, Equity & Inclusion; Dept. of Student Life
 - ❑ Topic – ***Health Deficit: The Journey to Health Parity***
 - ❑ **Keynote Speaker:** Leon McDougale, MD, MPH – 1st African American Professor w/tenure, OSU Dept. of Family Medicine & 1st Chief Diversity Officer for the OSU Wexner Medical Center. Installed on August 3, 2020, as the 121st President of the National Medical Association/NMA (oldest/largest collective voice for African American physicians in their effort to eliminate health inequalities).
 - ❑ Registration required
 - ❑ uvm.edu/diversity/signature-events/mlk


WEDNESDAY, JANUARY 20 | 5:30-6:45 PM
KEYNOTE: LEON MCDOUGLE, MD, MPH

SLAVE HEALTH DEFICIT: THE JOURNEY TO HEALTH PARITY

eTickets Required: go.uvm.edu/mlk2021


 The University of Vermont

REV. DR. MARTIN LUTHER KING JR.
CELEBRATION



Multilingual Resources

<https://www.youtube.com/channel/UC3zjPpeFnXqvESr1y3d4DvQ>




Vermont Multilingual Coronavirus Task Force
157 subscribers

SUBSCRIBE


HOME VIDEOS PLAYLISTS CHANNELS ABOUT

ARABIC ▶ PLAY ALL




ARABIC Facts about the Covid-19 Vaccine
Dr. Green MD UVM Medical Center. Mona Tolba
5:00

ARABIC: Facts about the Covid-19 vaccine.
Vermont Multilingual Coronavi...
205 views • 5 days ago




ARABIC: Self test for Covid-19. How to do it!
MONA TOLBA
1:51

ARABIC: Self test for Covid-19. How to do it!
Vermont Multilingual Coronavi...
53 views • 1 month ago




ARABIC Free testing for the coronavirus 7 days a week in Winooski and Burlington through December
Mona Tolba
1:19

ARABIC: Free coronavirus testing in Winooski and...
Vermont Multilingual Coronavi...
16 views • 1 month ago



ARABIC: An important message from Dr. Andrea Green
Dr. Andrea Green Mona Tolba
2:33

ARABIC: An important message from Dr. Andrea...
Vermont Multilingual Coronavi...
29 views • 1 month ago



ARABIC Governors Orders November 10th 2020 Quarantine, when traveling into Vermont from out of State
Mona Tolba
2:06

ARABIC: Governors orders re travel into Vermont from...
Vermont Multilingual Coronavi...
15 views • 2 months ago

BURMESE ▶ PLAY ALL

In Case You Missed It

- NYT THE CHECKUP – *An Appreciation for Vaccines, and How Far They Have Come* – Perri Klass, MD FAAP (1/11/21)
 - ▣ The DTP vaccine teaches us about how brilliant vaccine technology can be, but also how it can be studied and improved over time.
 - ▣ “Surely, as we live through this pandemic, we can take a moment to be grateful for the remarkable progress in vaccine technology that has given us vaccines that target Covid-19 so elegantly and specifically, and offers us ways to protect not only ourselves, but also those around us.”
 - ▣ <https://www.nytimes.com/2021/01/11/well/family/an-appreciation-for-vaccines-and-how-far-they-have-come.html>
- NYT – *One Year, 400,000 Coronavirus Deaths: How the U. S. Guaranteed Its Own Failure* (Mervosh, Baker, Mazzei, Walker – 1/17/21))

Practice Issues

AAP-VT Task Force on Race & Health Equity

Rebecca Bell, MD MPH FAAP & Stephanie Winters, Executive Director



Vermont Chapter

INCORPORATED IN VERMONT

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®

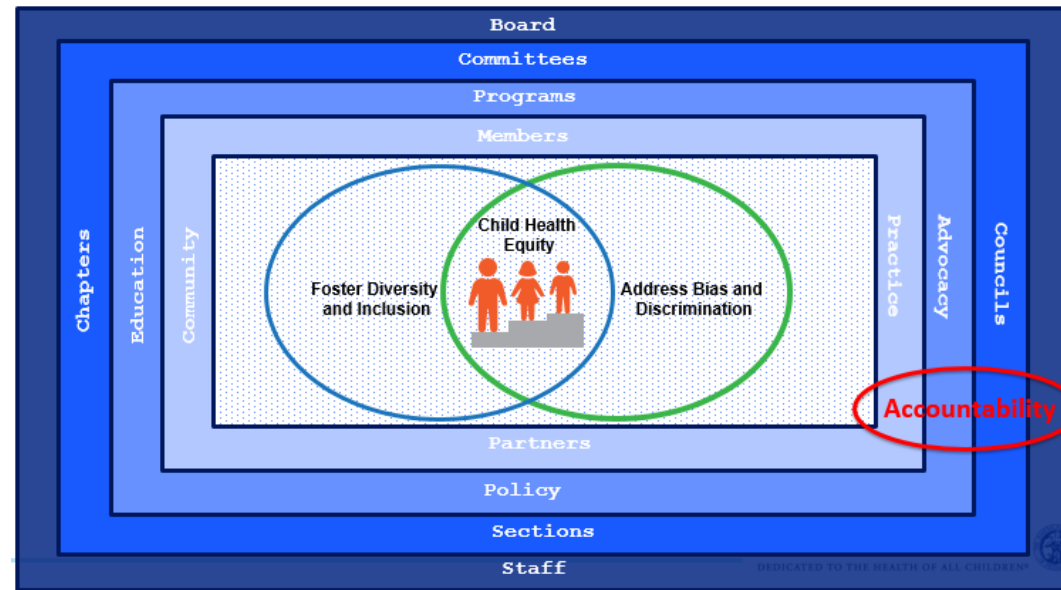


— THE —
University of Vermont
Children's Hospital



(NATIONAL) AAP APPROACH TO EQUITY

The AAP articulates as an ideal that all children and all systems of care maintain health equity. The AAP will equip pediatricians with the knowledge, skills, and resources needed to create equitable systems and ultimately optimal health for all children.



TIMELINE OF “RECENT” EVENTS

- 2017 – 2018: **TF on Diversity & Inclusion** Report/Implementation
- May 2019: Final Report **TF on Addressing Bias & Discrimination in HC**
- January 2020: inaugural mtg. **BOD Committee on Equity**
 - Presentation by Aletha Maybank, AMA Chief Health Equity Officer
- March – May 2020: intersection of racial justice and COVID-driven health disparities accelerates the **urgency** of our work
- July 29, 2020: “***Truth, Reconciliation & Transformation***” published
- July 31 – August 4, 2020: AAP leadership at NMA 2020 (Virtual) Convention: “Transcending COVID-19 to a Healthier Black America”
- August 2020: AAP ALF/District Meetings: Equity, Racism & Social Justice; Dist. disc.
 - Anti-disc./other resolutions; **Bylaws referendum** (Sept. 2020: vote to approve)
- October 2020 EDI Programming at the **NCE**



TRT BYLAWS REFERENDUM

RESOLUTION FOR AMENDMENT TO THE BYLAWS OF THE AMERICAN ACADEMY OF PEDIATRICS

RESOLVED, that the Bylaws of the American Academy of Pediatrics shall be hereby amended to include a first new article pertaining to anti-discrimination. The article in its entirety is as follows:

ARTICLE I

Anti-Discrimination: Embracing equity for all children and families as well as for the pediatricians who care for them is central to the mission of the Academy. The AAP is committed to achieving meaningful diversity and inclusion and to combat bias and discrimination in all its forms, including structural and systemic racism.

AAP does not discriminate on the basis of race, ethnicity, religion, sex, sexual orientation, gender identity, disability, and national origin.

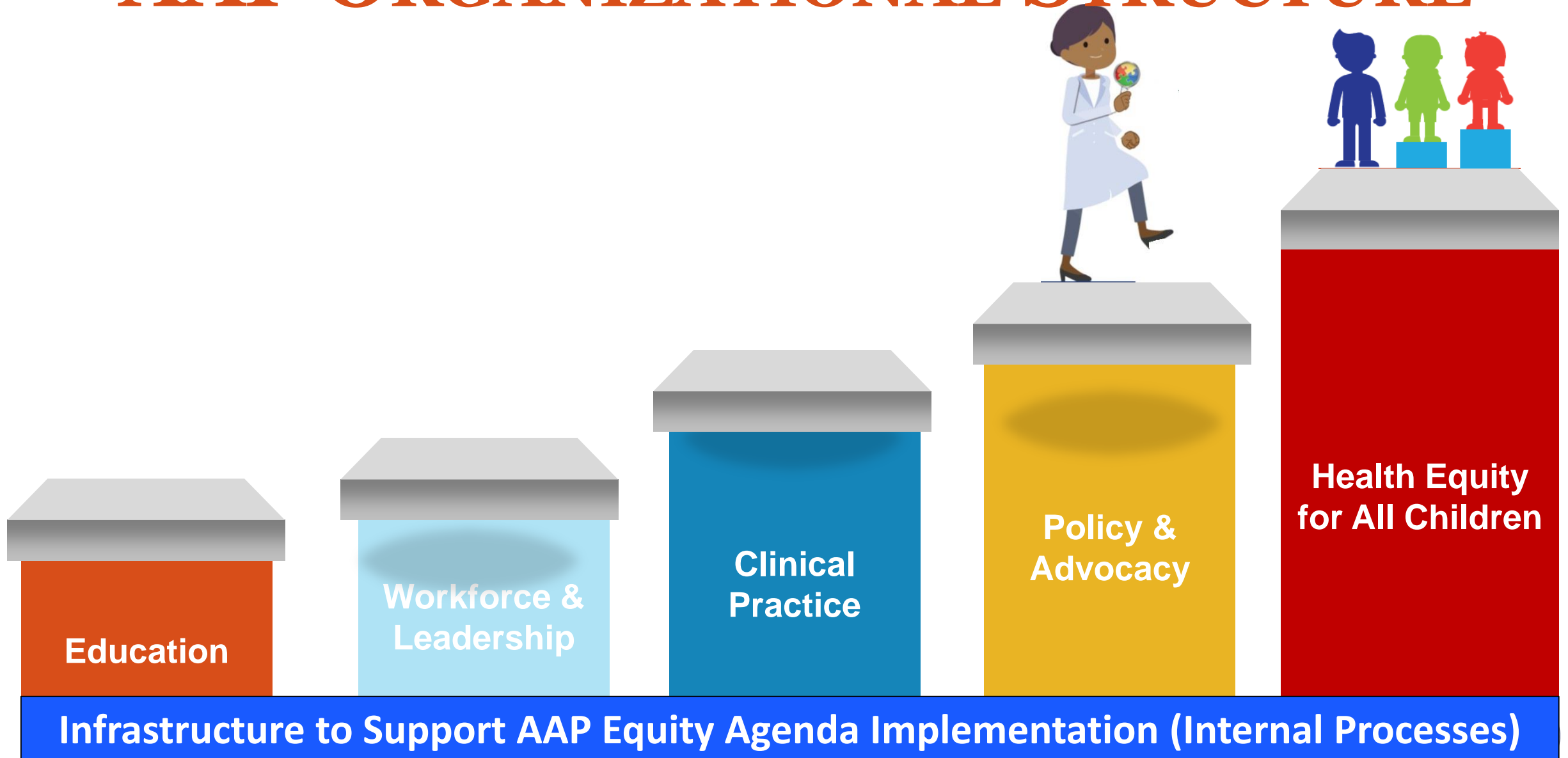


WORK PLAN: DOMAINS

- Built upon **recommendations** of the Task Forces on Diversity and Inclusion and Addressing Bias and Discrimination
- **Domains:**
 - Internal processes
 - Education
 - Leadership
 - Clinical Practice
 - Policy & Advocacy



AAP ORGANIZATIONAL STRUCTURE



AAP-VT TASK FORCE ON RACE & HEALTH EQUITY

Rebecca Bell, MD, MPH
AAP-VT Chapter
1.18.21



GUIDING PRINCIPLES

We are all learning

We have a lot of work to do

There are experts nationally and within our community – we should seek out and amplify their work

Acknowledge, Amplify, and Compensate our sources

VT VOICES, STORIES OF RACISM

Markers recognize people enslaved by Ethan Allen's daughter in Burlington

By **Ellie French**
Sep 14 2020



Paul Growald, left, and the Rev. Arnold Thomas install stopping stones honoring the memory of Lavinia and Francis Parker. Photo by Ellie French/VTDigger

From 1835 to 1841, Lucy Caroline Hitchcock, Ethan Allen's daughter, enslaved a woman named Lavinia Parker and her son Francis to do housework at her home at Main and Pine streets in Burlington.

Citing harassment

Rutland NAACP leader leaves home following harassment

By KEITH WHITCOMB JR. Staff Writer · Sep 11, 2020 · 5



Tabitha Moore of the Rutland Area NAACP gives a speech in June in Rutland's Main Street Park during the Black Lives Matter protest.

Photo by Jon Olender



WALLINGFORD — The leader of the Rutland County chapter of NAACP is leaving her home following months of racially motivated harassment targeting her and her young family members.

L2200 - Peds 21: Fighting Racism to Advance Child Health Equity: A Call to Action



Rhea Boyd, MD, MPH, FAAP

Pediatrician, Public Health Advocate, and Scholar
Palo Alto Medical Foundation , The California Children's Trust, COCM
San Francisco, California



Tiffani J. Johnson, MD

Assistant Professor of Emergency Medicine
UC Davis
Davis, California



Maria Trent, MD, MPH, FAAP

Chief, Division of Adolescent and Young Adult Medicine Bloomberg Professor of Pediatrics and American Health
Johns Hopkins Schools of Medicine and Public Health
Baltimore, Maryland



Jyothi Marbin, MD, FAAP

Associate Clinical Professor
Department of Pediatrics, UCSF
San Francisco, California

P3702 - Policing as a Pandemic of Trauma: Healing, Storytelling, and Justice Seeking

Plenary Speaker(s)



Cornell William Brooks, JD, MDiv

Professor
Harvard Kennedy School of Government
Cambridge, Massachusetts

Disclosure: No Financial Relationships
Disclosed

H3802 - Council on Communications and Media Program

Human Rights, Youth Policing, and Advocacy: Making the Message Resonate

Speaker(s)



Shaquita Bell, MD

Medical Director - Center for Diversity and Health
Equity
Seattle Children's Hospital
Seattle, Washington

Disclosure: No Financial Relationships
Disclosed



Janna R. Gewirtz O'Brien, MD, FAAP

Adolescent Medicine Fellow
University of Minnesota
Minneapolis, Minnesota

Disclosure: No Financial Relationships
Disclosed

L4104 - Communication Strategies to Advocate for Children in Immigrant Families

Faculty(s)



Olanrewaju (Lanre) Falusi, MD, FAAP

Medical Director of Advocacy Education;
Assistant Program Director
Children's National Hospital, District of Columbia

Disclosure: No Financial Relationships
Disclosed



Anisa M. Ibrahim, MD, FAAP

Pediatrician
University of Washington
Tukwila, Washington

Disclosure: No Financial Relationships
Disclosed

Dermatoses in Children of Color



Latanya T. Benjamin, MD, FAAP

Pediatric dermatologist / Medical Director
Young Skin, P.A.
Coral Springs, Florida

L3100 - Talking to Kids About Racism



Ashaunta T. Anderson, MD, MPH, FAAP

Assistant Professor of Pediatrics
University of Southern California
Altadena, California



Howard Stevenson

Constance Clayton Professor of Urban Education
Human Development and Quantitative Methods
Division, Professor of Africana Studies Director,
Racial Empowerment Collaborative Director,
Forward Promise
Philadelphia, Pennsylvania

L3400 - Protecting Children: Health Impact of Law Enforcement Violence



Rhea Boyd, MD, MPH, FAAP

Pediatrician, Public Health Advocate, and
Scholar
Palo Alto Medical Foundation , The California
Children's Trust, COCM
San Francisco, California

L3403 - Mitigating Implicit Biases in Child Abuse Reporting



Tiffani J. Johnson, MD

Assistant Professor of Emergency Medicine
UC Davis
Davis, California

L3500 - Bias Towards Indigenous Patients and Families in Healthcare Settings



Melissa Lewis, PhD, LMFT

Assistant Professor
University of Missouri School of Medicine

Disclosure: No Financial Relationships Disclosed

H3805 - Section on Minority Health, Equity, and Inclusion Program

Dissecting Health Disparities: Examining the Intersection of Policy, Law, and Racism



Alden M. Landry, MD

Assistant Dean, Office for Diversity Inclusion and
Community Partnership
Harvard Medical School
Boston, Massachusetts



Aswita Tan-McGrory, MBA, MSPH

Director
The Disparities Solutions Center at Mass
General Hospital
Boston, Massachusetts



Joel Teitelbaum, JD

Associate Professor of Public Health and Law
George Washington University

Disclosure: No Financial Relationships
Disclosed

P4300 - Practicing Socially-Responsive Pediatrics: Why Health Equity Begins in Communities Not Clinics



Omolara Thomas Uwemedimo, MD, MPH

CEO, Strong Children Wellness
Associate Professor of Pediatrics, Zucker School
of Medicine at Hofstra/Northwell
New Hyde Park, New York

P4302 - Anti-Racism in Health Care



Ibram X. Kendi

Andrew W. Mellon Professor in the Humanities at
Boston University

H4403 - Joint Program: Council on Child Abuse and Neglect and Section on Minority Health, Equity, and Inclusion

Taking a Time Out: Cultural Approaches to Discipline



Elizabeth T. Gershoff, PhD

Amy Johnson McLaughlin Centennial Professor
University of Texas at Austin
Austin, Texas

[Elizabeth T. Gershoff, PhD](#)



Allison M. Jackson, MD, MPH, FAAP

Associate Professor of Pediatrics
Children's National Hospital
Washington, District of Columbia

[Allison M. Jackson, MD, MPH, FAAP](#)

AP

Anu Partap, MD

Medical Director, Health Equity
Cook Children's Health Care System
Fort Worth, Texas

Racial Socialization



Commentary

Helping families navigate race issues should be ongoing conversation

by Roberto T. Anderson, M.D., M.P.H., M.S.H.S., FACP,
and Angela W. Ellison, M.D., M.Sc., FACP

As pediatricians, we have committed our lives to ensuring the well-being of all children. We have taken a stand against health disparities such as childhood poverty and gun violence. However, when it comes to racial-based violence, we have stood silent.

Although the Academy has provided resources on race issues on its website (<http://bit.ly/1K7Bd19>), additional advocacy, education and action need to be initiated, given the recent wave of race-based deaths. It is time for us, as pediatricians, to take a strong stand against the violence that is claiming the lives and sense of security of our young Black patients.

Pediatricians occupy a strategic position between families who face race-based victimization and the medical establishment charged with protecting all children. As providers within complex systems, we understand that broken systems often pose a greater threat than the ingroup people within those systems. A system-level problem must be addressed with system-level solutions. The current crisis has generated a moment in which the pediatrician's institution may leverage its critical position and cultural influence on the behalf of all racially and ethnically marginalized children.

One promising approach that pediatricians can explore is within those teams of professionals in child social socialization. Studied for decades by the social sciences, child socialization refers to the process by which children learn to navigate race issues. It has chiefly been explored in the work of minority parents who do not help their children adjust to a racially biased world.

However, there is much to be learned from play, minority and non-minority parents and non-parents alike. Children receive two likely messages, both verbal and nonverbal, from a variety of sources. The most common of violence against Black men, women and children has certainly communicated a negative and racially charged message. Unfortunately, silence and inaction communicate a message to walk, run or hide in fear or apathy at worst.

The good news is that negative messages about race can be addressed with healthy social socialization messages. These choices can be integrated into the usual anticipatory guidance that pediatricians provide for families. For instance, one well studied racial socialization strategy is called cultural pride socialization. This strategy helps children to know and value their cultural heritage. It has been associated with improved academic, behavioral and mental health outcomes for children of all ages. Discussions of race issues can engage parents help children understand the stereotypical images of people of color. Pediatricians may offer that parents introduce positive, cultural representations in the context they can in home, child school activities.

A second racial socialization strategy is called preparation for bias. In addition to warning children about the potential for race-based bias, this strategy requires the discussion of coping tactics. The research is mixed on outcomes for young children, but makes sense that children benefit academically and emotionally. Pediatricians can discuss this information with parents where children receive positive for race-based coping or differential treatment.

It is important to note that a different kind of racial socialization—promotion of violence—provides warnings of race-based interactions without coping strategies. This has been found to be detrimental for children of various ages. Parents should be guided away from promotion of violence, internalized or externalized.

Just as conventional anticipatory guidance opens racial socialization with proactive dialogues, helping parents and children navigate race issues should be an ongoing conversation. Pediatricians should strive to meet family needs in this area and provide resources. Some parents may prefer more structured approaches that provide individualized recommendations on cultural education as either the subject of race, but the evidence here is less clear for these topics.

Many groups offer assistance and support to parents and families who are either victims of racial violence or experience difficulty navigating racial issues, including the NAACP Children's Defense Fund and the National Urban League. Collaboration also is needed with other groups of child health professionals such as psychologists, nurse practitioners and family medicine physicians. Partnering with these groups can directly see outreach efforts and assist in building strategies and team-based communication. The formation of these partnerships represents a first step.

As pediatricians, we are often required to deliver difficult messages to our children. We should open the leadership of AAP members to examine the development of policies and anticipatory guidance that address issues of discrimination with all parents and families. When pediatricians engage these difficult topics with parents, we begin the important work of transforming a negative dialogue of racialized victimization into a collective education of this country's increasing diversity.



Dr. Anderson is an assistant professor at the University of California, Riverside School of Medicine, and a health policy associate at RAND Corporation. Dr. Ellison is an assistant professor at the Children's Hospital of Philadelphia, Perelman School of Medicine at the University of Pennsylvania. Dr. Anderson and Ellison are members of the Academic Pediatric Association's Race in Medicine Special Interest Group.

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- Cultural Pride Reinforcement
 - Improved academic, behavioral, and emotional outcomes
- Preparation for bias
 - Adolescents benefit academically & emotionally
- Promotion of mistrust
 - Negative impacts on children

Prepare to Talk About It: Raising Resister Strategy

- Read it
- Name it
- Oppose it
- Replace it



Maria Trent, MD, MPH
Bloomberg Professor of Pediatrics & American Health
Division of Adolescent/Young Adult Medicine
Johns Hopkins University

Janie Ward, the Skin We're In, 2002



WORKING GROUP #1: CLINICAL PRACTICE

Audience: pediatricians and other health care providers who care for children

Possible deliverables would include specific guidance for:

- addressing race as part of anticipatory guidance
- assessing patients for stressors associated with racism to connect families to resources
- assessing patients who report experiencing racism for mental health conditions ...to make referrals to mental health services
- identify strengths and assess for protective factors
- identify clinical resources to improve care of patients with black and brown skin

WORKING GROUP #2: CLINICAL ENVIRONMENT/CULTURE

Audience: pediatric and family medicine clinics, hospitals, residential facilities

Possible deliverables:

- glossary of terms/concepts for healthcare providers
- resources for providers for further self-directed learning (e.g. scaffolded anti-racism resources)
- Train clinical and office staff in culturally competent care according to national standards for culturally and linguistically appropriate services
- Tailored guidance on creating more inclusive space — visits to practices
- lots of input from family advisors and youth needed here
- Photovoice project — community-based participatory research to document and reflect reality

WORKING GROUP #2: RESOURCES FOR YOUTH AND FAMILIES

Audience: patients and caregivers

Possible deliverables:

- Resources for BIPOC patients and families with focus on local supports (community partners)
- Resources for white parents raising non-white children
- Resources geared towards white families to promote anti-racism





Vermont Chapter

INCORPORATED IN VERMONT

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN®



Diversity, Equity & Inclusion (DEI) Listening & Learning Sessions

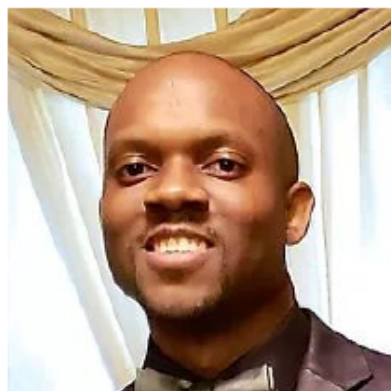
*Prepared for: American Academy of Pediatrics Vermont Chapter
Racial Equity Task Force*

*By: Stephen Graves, Senior DEI Consultant, All In Consulting
October 20, 2020*



Appendix: Biography

Stephen Graves, MHA



Stephen is a Diversity, Equity, & Inclusion Consultant, Facilitator, and Strategist. He is from Greenwood, South Carolina.

He has over a decade of experience working with communities across multiple dimensions of diversity in various capacities. He has previous healthcare experience, working at the Medical University of South Carolina (Charleston, SC), Novant Health (Charlotte, NC), and the University of Vermont Medical Center (Burlington, VT). He has led projects involving DEI strategic planning, cultural humility training, language access, employee resource groups, among others.

Throughout his career, Stephen has proven to be both a systems-thinker and tactical implementer. He has a warm presence and unique ability to create safe spaces where people feel open to be authentic. He gently guides clients to see opportunities in the midst of challenges and view problems as potential for growth. His philosophy is to lead and support clients with kindness, respect, and patience.

Stephen completed his Masters in Health Administration at the Medical University of South Carolina and holds an Executive Certificate in Strategic Diversity and Inclusion Management from Georgetown University.

LISTENING SESSIONS

Two listening session in December (12/8/20 and 12/14/20) with VT BIPOC youth

Facilitated by Stephen Graves

Dr. Maya Strange, Child and Adolescent Psychiatrist, also joined

Participants shared experiences with medical home/medical care

Themes:

- Language barrier especially with parents
- More anticipatory guidance/support around sexual health and mental health
- Lack of diversity of providers
- Micro-aggressions
- If asking about experiences of racism/discrimination will need training and context

NEXT STEPS

Review Listening Session findings with full Task Force

Working groups to review deliverables

Plan for additional Listening Sessions in the spring

Will need to focus on ongoing training, identifying chapter champion

Role of community consultant in voluntary tailored review for practices?

(National) AAP Updates

- **Next AAP COVID-19 Town Hall:** Thursday, 1/21/21
- Ask the Red Book About COVID-19
 - ▣ Opportunity to have questions answered re: virus variants, vaccine, & more by Red Book Committee leaders
 - ▣ Previous Town Hall (1/7/21) **COVID-19 and Safe Return to School Q & A**
 - ▣ Summary article in AAP News:
<https://www.aappublications.org/news/2021/01/08/covid19-schools-qa-010821>
- Revised COVID-19 interim guidance: **Safe Schools** – now posted on AAP COVID-19 page
 - ▣ <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/>

Social Media Update

- New VDH Campaign: **Simple Acts of Kindness** (FB, Twitter, Instagram)
 - ▣ In times like these, a little bit of kindness goes a long way. We're asking Vermonters to kick off the new year by engaging in simple acts of kindness. Try one of these options, or come up with your own, to help brighten spirits across our state!

Check them out!



Happening Soon



- Big Change Roundup: bigchangeroundup.org
 - ▣ Largest fundraiser for the UVMCH; funds raised support patients and families.
 - ▣ Examples: some child life services; new program startup (e.g., Transgender Program; safe sleep program on Mother Baby Unit); injury prevention initiatives; food insecurity initiative (CSC); support for inpatient families (ferry passes, gas cards, meal vouchers)
- Please help to promote personally as you are able and through your practices/organizations

In Case You Missed It/Coming Attractions

- UVM MC OB Grand Rounds (January): Tuesdays, 7:30 – 8:30 (*T-Y, M. Kaufold*)
 - ▣ Vermont Plan of Safe Care 2.0: Updates/Tools (Michelle Shepard, MD PhD; 1/12/21); Provider Bias & Cultural Humility (1/19/21); Patient & Family Centered Care (1/26/21)
 - ▣ COVID Vaccine in Prepregnancy, Pregnancy, & Lactation (Marj Meyer, MD; 12/22/20)
- UVM Children's Hospital/Pediatric Grand Rounds (January)
 - ▣ Take a Deep Breath: A New Population Health Outcome Measure for Pediatric Asthma (Keith Robinson, MD; 1/20/21); Contemplating the Use of Mindfulness in Pediatrics: A Call to Non-Doing (Andrew Rosenfeld, MD; 1/27/21)
- KidSafe Collaborative Legislative Forum (virtual): Mon., **1/25/21**, 9:30-11:00 a.m.
- DHMC Emergency Medicine Grand Rounds – Wed., **Jan. 20**, 2021 (12-1)
 - ▣ **Critical Child Abuse Literature: Seminal Articles on Sentinel Injuries**
 - ▣ Amy Doolan Roy, MD, Med. Director Ped ED, Elliot Hosp. (LCOM grad!)

Now Recruiting: Temporary Medical Record Chart Reviewers

- ❑ CHAMP needs temporary medical record chart reviewers from February through May or June 2021 for annual statewide chart review.
- ❑ Qualifications:
 - ❑ Bachelor's degree (or equivalent education/experience required).
 - ❑ We seek candidates who have worked in a healthcare setting, including experience reading medical records. Qualified candidates will have strong computer skills, attention to detail and accuracy, and can commit to working a minimum of three full days per week.
 - ❑ **Willing to consider current/former practice staff.**
- ❑ Details:
 - ❑ During the COVID-19 pandemic this position will be remote. Computer equipment will be provided, however internet access and a private space for chart review is required.
 - ❑ **Flexible work hours may be available**
 - ❑ Required trainings include: Data Security; Confidentiality; IRB and GCP.
 - ❑ The position pays \$20 per hour.
 - ❑ Submit cover letter and resume to VCHIP.CHAMP@med.uvm.edu

Questions/Discussion

- ❑ Q & A Goal: monitor/respond in real time; record/disseminate/revisit later as needed.
- ❑ **For additional questions, please e-mail:** vchip.champ@med.uvm.edu
 - ❑ **What do you need** – how can we be helpful (specific guidance)?
- ❑ **VCHIP CHAMP VDH COVID-19 website:**
https://www.med.uvm.edu/vchip/projects/vchip_champ_vdh_covid-19_updates
- ❑ Next CHAMP call: ***Friday, January 22, 2021 – 12:15-12:45 – NO CALL WED., 1/20!***
- ❑ Generally back to **Monday/Wednesday/Friday** schedule (exception this week: 1/18 & 1/22)
- ❑ Please tune in to VMS call with VDH Commissioner Levine:
Thursday, January 21, 2021 - 12:30-1:00 p.m. – Zoom platform & call information:
- ❑ **Join Zoom Meeting:**
<https://us02web.zoom.us/j/86726253105?pwd=VkVuNTJlZFQ2R3diSVdqdlJ2ZG4yQT09>
 - ❑ Meeting ID: 867 2625 3105 / Password: 540684
- ❑ One tap mobile - +1 646 876 9923,,86726253105#,,,0#,,540684#