

# Family and Community Medicine



University of  
CINCINNATI

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## CHAIR'S MESSAGE

*"Kindness is not just the absence of being mean or hateful. Being kind entails actively resisting actions, ideas, and institutions that rob others of dignity." –Bruce Reyes-Chow*

*"For it isn't enough to talk about peace. One must believe in it. And it isn't enough to believe in it. One must work at it." –Eleanor Roosevelt*

Greetings from the Department of Family and Community Medicine. It has been a tumultuous year; the pandemic, the clearly visible social injustices towards African Americans, gun violence and mass shootings, violence towards Asian Americans, and the events of January 6th. I think each of us has been shaken to the core multiple times over this past year. Although a solution to the pandemic can be found in the incredible advances in science that produced a lifesaving vaccine, we know that a vaccine does not exist for racism, social injustice, and the continued violence in our society. These problems are also not solved through hope or good intentions, but through hard work that leads to action and change in how we function. In this Newsletter, you will see evidence of the hard work and efforts being taken by each of our divisions to address these crises in our society.

Several years ago, each division was challenged to develop anti-racism goals. Annually, we have created new goals to continue our progression to be a fully inclusive anti-racist organization. This initiative is bearing fruit, and although we have significant work ahead of us, I could not be prouder of the progress. We have implemented tangible changes in our hiring process, taking actions to mitigate implicit bias and intentionally developing recruitment practices that lead to the outcome we desire; a diverse residency and department that will lift the lives of our patients and communities. We have continued our work in addressing the significant health disparities in our society through tireless service to all people, especially those on the margins. The divisions again took on ambitious goals this past year. I encourage you to read about these goals in this newsletter. You will hear inspiring initiatives addressing COVID, inclusion and equity, and the health disparities. It is truly uplifting work!

I recently met with a mentor who shared that he starts each day with a prayer, praying that he can make an impact in the lives of others and help them achieve their goals. He further shared that he does not have a daily "To-Do" list, but instead a "To-Be" List intentionally committing to live out who he aspires to be. May each of you live the same, out of your values and purpose, inspiring others and contributing to the greater good. Best wishes to each of you! ■



**Christopher Bernheisel, MD**  
Interim Chair

## IN MEMORIAM: THOMAS TODD, MD

Thomas Todd, MD, Class of 1958, an emeritus professor in the Department of Family and Community Medicine, died on Jan. 29. He was 87.

A native Cincinnati, Todd completed an internship at the Medical College of Virginia and an internal medicine residency at Cincinnati General Hospital. In between, he served for two years in the U.S. Navy.

Todd maintained his family medicine practice in the Glendale community for more than 56 years. He also served as Glendale mayor for eight years and as Princeton High School football team physician for 40 years. In 1983, Todd was named Ohio's Outstanding Team Physician.

Todd joined the College of Medicine faculty in September 1967 and helped Robert Smith, MD, establish the Department of Family Medicine in 1974. He was named an emeritus in 2004.

Todd served as president of the Southwestern Ohio Society of Family Physicians (1975-1977), the Ohio



Academy of Family Physicians (1985) and the Academy of Medicine of Cincinnati (1990). Beginning in 1979, he served for four years as editor of the Ohio Family Physicians Magazine and finished each editorial with "Thank God I am a Family Physician."

"Dr. Todd was an enthusiastic and active teacher of medical students and regularly taught them in his practice," says Philip Diller, MD-PhD, senior associate dean for educational affairs and former chair of the Department of Family and Community Medicine.

The department recognized Todd with an award as a Teacher of Distinction in 1992. In 2018, the department created the Thomas U. Todd Alumni Award to recognize an alumnus whose career was committed to advancing the discipline of family medicine, including excellence in clinical practice, teaching students and residents, playing an active role in organized medicine and serving the community through public service. ■

[med.uc.edu/family](http://med.uc.edu/family)



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## DIVISION UPDATE:

## RESIDENCY PROGRAM

Megan Rich, MD, MEd, Director

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Each year the TCH/UC Family Medicine Residency sets goals related to Diversity, Equity and Inclusion. We believe these goals help us to meet our greater mission and vision: to train culturally humble, community physician advocates who can improve the health of our local and global community. Dr. Louito Edje recently wrote, “We know that Black patients are twice as likely to trust a messenger of their own racial/ethnic group as compared to a White counter-part.”<sup>1</sup> And so, the goal to train doctors who look like our patients – and thus have a leg up on effective patient care – became a part of our strategic plan. As the racial diversity among residents increased, we perceived a need to support residents inclusively during training and to ensure equitable experiences for residents across rotations. The goals for equity also became an avenue for us to lean into our ideals and help correct past and current wrongs of a system that often neglects and harms one group of people in order to ensure the flourishing of another. Our current goals in Diversity, Equity and Inclusion are shared in Table 1, and our initiatives to achieve our goals are shared in the following paragraphs.

**Table 1:**  
**Residency Diversity, Equity and Inclusion Goals for 2020-21**

<b>Diversity</b>	Expand diversity interview days to 3 per year
	Host at least 1 pre-interview recruitment event specifically for under-represented in medicine (URiM) applicants
	Commit to interviewing a diverse array of candidates for any new faculty hire
<b>Inclusion</b>	Create mentoring program for URiM residents
<b>Equity</b>	Create a racial justice/anti-racist curriculum, including 2 workshops to residents during the academic year
	Address health equity as a part of the Patient Safety Conference root-cause analysis
	Ask presenters to include health inequity data in any lecture covering a core medical knowledge topic



Thriving Residents (from left to right): Drs. LaToya Smith (R2), Julia Bedard-Thomas (graduate), Andrea Jaramillo (R3), and Xavier Douglas (R2)

## Diversity Initiatives

Over the past few years, we have altered our recruitment strategy to ensure we are recruiting residents committed to the lifelong mission of caring for vulnerable populations. This includes ensuring our review of applicants creates a fair application process since not everyone starts with the same support, resources, or set of advantages. Our approach has included a blinded review of applicants that prioritizes behaviors and activities over test scores, Diversity Interview Days, and pulling data to audit and track our progress. Initial conclusions are that

these efforts are working. Graph 1 depicts changes over time in interviewing residents who identify as a race that is Under-Represented in Medicine (URiM).

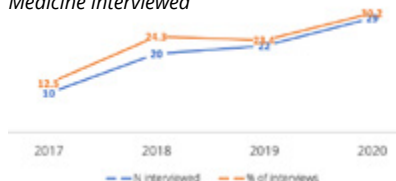
## Inclusion Initiatives

Dr. Anisa Shomo (pictured below) has been an important voice and advocate in the residency, both for teaching and supporting URiM and white residents and also speaking truth to residency leadership. In her role as a racial justice

faculty co-lead she has created a mentoring program for residents identifying as a minority. While residents are assigned a faculty advisor from the residency, this supplemental program takes into account the unique experiences of being under-represented in an entire profession. Although the program only started this past summer, Dr. Shomo has paired seven residents with faculty mentors from throughout our department, and even at times outside of it.

## Recruiting a More Diverse Class

Data of Applicants Under-Represented in Medicine Interviewed



Diversity Interview Day 2019; Drs. Robert Pulliam (far left), Alyssa Gerth Brogden (R1; center), and Anisa Shomo (far right)

<sup>1</sup> [https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370\(21\)00025-0/fulltext](https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370(21)00025-0/fulltext)

DIVISION UPDATE: **Residency****Equity Initiatives**

**Operation Vaccination:** The Family Medicine Center serves a patient population that reflects the demographics of the city, with roughly 50% of patients identifying as Black/African American. The COVID vaccine does not have equitable administration across populations with a myriad of causes perfectly designed to get this result. Residents, faculty and staff saw a tangible way to help their patients by offering the vaccine in the office that patients know and trust. While approved to be a vaccination site, our first doses of the vaccine are still pending. In the meantime, three teams of residents are focused on



*Vaccinated! (From left to right) Drs. Sara Maples (Chief, R3), Alyssa Gerth Brogden (R1) and Rynita Bohler (R1)*

communicating with patients, educating patients and the public and running our population health registries to identify patients eligible for the vaccine. When the vaccine hits our door, we will be ready to roll.

**Training Anti-Racist Physicians:**

Enduring micro- and macro-aggressions is part of the lived experience for trainees who in the minority, sometimes coming from friends and teachers within the program. And while the intent behind those micro-aggressive comments was not to harm, the impact remains hurtful. Residents of all races wanted to learn how to be allies for their peers. In October 2020, Drs. Alyssa Gerth Brogden, Sara Maples, Anisa Shomo and Anna Goroncy taught an Allyship and Upstander workshop open to residents and faculty. Evaluations of the event described it as a safe place for open and honest conversation. ■

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## DIVISION UPDATE:

**RESEARCH**

*Saundra Regan, PhD, Director*

**Research Division Joins Statewide Initiative To Reduce Cardiovascular Disparities**

Ohio is in the top quartile of U.S. states for high cardio-vascular disease (CVD) event rates (combined stroke and heart attack). The state has a high adult prevalence of two key modifiable CVD risk factors: hypertension (35%) and smoking (21%). A new collaborative project aims to improve blood pressure (BP) control and smoking cessation with the goal of mitigating CVD events in Ohio. This 3-year Heart Healthy Project, funded by the Agency for Healthcare Research and

Quality, will work with primary care providers across Ohio to design and test a Heart Healthy Quality Improvement (QI) project focused on cardiovascular health improvement and reducing disparities in CVD. Like the Cardi-OH MEDTAPP projects, primary care practices will work with regional health improvement collaboratives, health systems, payors, professional organizations and the Ohio Department of Health to focus on measures related to BP control, cholesterol

management and smoking cessation. Research partners include the UC College of Medicine and other Ohio medical schools, under the leadership of Case Western Reserve University. The project will feature Chris Bernheisel, MD and Michael Holliday, MD, who will be joined by Research Division team members Saundra (Soni) Regan, PhD, Jackie Knapke, PhD, and Mary Beth Vonder Meulen, RN. ■



**Regan**

**RESEARCH PROGRAM COORDINATOR**  
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**Medicaid Virtual Sim experience now online**

The University Cincinnati College of Nursing and the College of Medicine's Department of Family & Community Medicine worked with the UC Center for Simulations and Virtual Environments Research (UCSIM) to develop two patient care virtual reality simulations focusing on social determinants of health as part of the Medicaid Equity Simulation Project. Both simulations are from the perspective of the patient and intended to raise healthcare providers' awareness of barriers to care, which patients encounter on a daily basis. The Medicaid Equity Simulation Project is funded by the Ohio Department of Medicaid and administered by the Ohio Colleges of Medicine Resource Center.

We invite you to try one or both simulations which are available online at [nursing.uc.edu/mespsdoh](https://nursing.uc.edu/mespsdoh). ■

**Cardi-OH Collaborative releases 'Currents'**

The statewide Cardi-OH collaborative of Ohio's schools of medicine led by Case Western Reserve University continues to release monthly "Currents" that detail new evidence-based findings in diabetes and hypertension care, particularly for those primary care providers who care for patients eligible to receive Medicaid. Visit [www.cardi-oh.org](https://www.cardi-oh.org) for more Currents and other podcast, tools, and information about the collaborative. ■



## FACULTY SPOTLIGHT: Phil Diller, MD-PhD

*Senior Associate Dean for Educational Affairs  
Vice President of Education, UC Health  
Interim Chair, Department of Medical Education  
Chair, Winkler Center Advisory Board*

### **Please tell us about yourself:**

I came to Cincinnati for Family Medicine residency in 1988 and never left. My wife Linda and I met at the College of Wooster and married while I was in graduate/medical school at the University of Chicago. We have seven children (36 years down to 22 years), all of whom have graduated from UC undergraduate programs and in the last decade our family has expanded with weddings and five grandchildren. I grew up in rural NW Ohio in a town of 1100 people where my Dad was a family physician with an office in half of the downstairs of our house. My mother was a high school art teacher. My parents and extended family were the strongest influences in my life, modeling and instilling a strong work ethic, the value of education, service to others, and the importance of faith.



*Above: Phil Diller with his wife Linda at the UC Bicentennial Event in 2019.*

*Right: Diller with Dr. Michelle Groves (UC COM '09) at Residency graduation 2012.*



*In the Henry R. Winkler Center for the History of the Health Professions.*

### **Tell us about the training program when you were a resident:**

When I arrived in 1988, Robert Smith was nearing his final years as department chair and Andy Filak was the program director. Sharon Mullen was the program coordinator and Judy Flick was the assistant program coordinator. The program was then based at University Hospital with the family medicine center in the ambulatory building next to Mont Reid Pavilion, and our inpatient service was on the 6th floor of University Hospital with Tim Freeman as the inpatient director. The program was much larger with 12 residents per year. Ruth Kraus was the Nurse Manager for the FMC. A picture of benefactor Fred Lazarus Jr. was in the foyer and the conference room had pretty wild carpet that kept us all awake. Donald Ebersold and Ken Frederick who helped Dr. Smith launch the FMC in the 1970's were still on faculty. Dr. Frederick was transitioning leadership of Geriatrics to Gregg Warshaw, and we were doing our geriatrics work at Twin Towers. The oldest patient I have ever taken care of (106 years old) was a resident there and I had a chance to meet her thriving 86 year old daughter who would come to visit. Montiel Rosenthal, Joseph Pflum, and Anthony Chen were the chief residents that first year. Barb Tobias was a year ahead of me and was one of the chiefs in my second year. In my final year I was the first resident to go on an International Health trip to Honduras with Jeff Heck and two other medical students. Jeff told me that my job was to come back and tell Dr. Smith this was a great educational experience and he should support it.

### **What roles have you held in the Department of Family Medicine?**

After graduation I had a payback agreement with the federal government that had funded my PhD years so I knew I was going to stay in academics. I joined the faculty with my practice at the Wyoming office, did some inpatient teaching, and FMC precepting and was a staff physician in the UC Lipid Research Center—seeing patients with lipid problems. Eventually I stopped the Lipid Research Clinic and moved into Family Medicine full-time. Alan

David, who succeeded Dr. Smith as chair, allowed me to study a cohort of Heart Failure patients while increasing my involvement in residency education. While in the residency I served stints as inpatient director, director of the FMC, and assistant residency director when Jeff Heck was the program director. During those years we moved the program to Providence Hospital (eventually Mercy-Mt. Airy—since demolished) and started the Global Health track. Jeff Heck then stepped down and advocated for me to succeed him as program director. He said, “you don’t have to worry about the money, just tell Vern (Rolf) what you need and he will get it for you.” One year later it was all about the money, and we were told by the Hospital CEO on the first day of recruitment that they were getting out of GME, and we needed to find a new home for the program. I contacted the director of education in the Health Alliance who told me that the Health Alliance did not need a family medicine program and it should be closed down. We met with hospital administrators at four other local hospitals and The Christ Hospital with Vic DiPilla as interim CEO agreed to take us on a temporary basis. That is how the residency program ended up at The Christ Hospital in 2002. I was program director for 10 re-building years and during those last years, our Chair Jeff Susman appointed me as Department Vice-Chair. When he became Dean at NEOMED, I was appointed interim chair and then eventually was named chair in Spring of 2011. I served as chair through September 2018 when at that time I moved into my current position in the Dean’s office.

***What is included in the purview of the Senior Associate Dean for Educational Affairs?***

I oversee the educational programs in the College of Medicine:

- 1) the new baccalaureate programs,
- 2) medical school,
- 3) graduate medical education, and
- 4) continuing professional development.

I have great people who lead these areas and they make all the difference.

***What is your motto?***

Add value and build up others. As a personal measure: Am I adding value? Am I building up others?

**“What is my motto? Add value and build up others. As a personal measure: Am I adding value? Am I building up others?”**

***What are the Department highlights over the time you have been here?***

I have been here for 30+ years so there have been many, but will share the following selected:

1. Developing the International Health/Global Health Program and introducing the Determinants of Health Model very early in the beginning of that program
2. Rebuilding the residency program at Providence Hospital and then The Christ Hospital; creation of the rural program at Clinton Memorial in Wilmington led by Keith Holten—that program trained over 60 residents before it was closed by Regional Care.
3. Building the Department culture around core values and improving performance led by Bob Graham
4. Moving back to the MSB and creation of the Robert and Myfanwy Smith Conference Room
5. Expanding the scope of academic Family Medicine including expanding the care for vulnerable populations in the community through community partnerships, and creating the Center for Integrative Medicine, Palliative Care, and most recently Survivorship.
6. Additional Endowed Professorships and special awards & recognition events
7. Growth of the reputation in Geriatric education expertise led by Gregg Warshaw and now Jeff Schlaudecker and Irene Hamrick
8. Consistent success with HRSA grant funding with help from Marie Marley and members of the Research division.
9. Attracting outstanding residents and faculty (talent and character) to the Department. People are what has made this Department through the years.
10. Leadership and oversight of University Health Services initially led by Alice Mills and now Kim Miller.

***What where the biggest challenges you faced?***

Finding a home for the residency when the Mercy system decided to stop GME activity at Mt. Airy hospital and re-inventing a smaller residency program (10+2 to 4+1) at The Christ Hospital. Dr. Smith told me that relocating and rebuilding the program at The Christ Hospital was very critical for the Department.

***Biggest personal achievement:***

Diagnosing early stage melanoma in two of my patients. They are still alive, very active and enjoying their families.

***What is on your wish list for the next 5 years?***

- 1) Medical school: helping lead a revision of the curriculum and growing scholarships; addressing systemic racism in the learning environment.
- 2) Baccalaureate programs: help launch and grow the Public Health Major and for the Medical Sciences Major: succession planning.
- 3) Graduate Medical Education: begin programs for the West Chester Hospital campus.
- 4) Personal: Enjoy my growing family and publish another book. ■



*Diller visiting with Dr. Robert Smith while both were in London in 2015.*

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## DIVISION UPDATE:

## OFFICE OF GERIATRIC MEDICINE

Irene Hamrick, MD, Director



Hamrick

There will be a change in the Division of Geriatrics and providers at Maple Knoll Village this year. In July 2021, Dr. Kara Ciani will continue her outpatient family medicine and geriatrics practice at the Primary Care – Wyoming office and transition to a new role as Co-Director of the Longitudinal Primary Care Clerkship, a perfect fit for her dynamic personality and an honor for our division. Starting in May 2021, Dr. Rachel June will take on a new role closer to her family in Dayton, Ohio, as an outpatient geriatrician with the Kettering Health Network. In this new role, she will provide her geriatric expertise in the startup of a “Years Ahead” Clinic, focused on the care of those 65 years and greater. We will miss both Drs. June

and Ciani sorely, as they provided outstanding care and teaching to our division, and we hope to recruit them back someday.

We also want to welcome Dr. Amanda Arnold to the Division of Geriatrics this Spring. Dr. Arnold completed her residency in internal medicine at the University of Cincinnati and fellowship in geriatrics with The Christ Hospital – University of Cincinnati program in 2020. She was extremely popular as a geriatrics fellow by faculty, staff, and patients, and we are thrilled to welcome her back as faculty to our division and Maple Knoll Village ■

## Dedicated Efforts at Developing, Implementing Division's Anti-Racism Initiative

In light of everything that has happened in the past year with COVID-19 and the brutal display of racial injustice, the division is currently taking steps to update the division's mission and vision statement to better align with our goals and what we stand for. The Chief of Geriatrics, Dr. Irene Hamrick, has implemented an Anti-Racism Initiative for the geriatric medicine group. The group has collectively agreed the initiative should focus on education, advocacy, and how to navigate difficult conversations with peers, residents, and

medical learners.

Since July 2020, the division has been meeting monthly to discuss the fundamentals of racism, racial biases, inequities, and systematic injustices against people of color. Our goal is to first educate ourselves on the problem and work collectively to see how it impacts our profession in medicine. Dr. Anna Goroncy has played a great role in helping lead small group discussions and supplying the group with plenty of literature and resources. The division is dedicating time during and outside of

work hours to educate themselves. The division has started a book club reading, *Medical Apartheid: The Dark History of Medical Experimentation on Black Americans from Colonial Times to the Present*, by Harriet A. Washington. It is a highly recommended book across medical school admission offices and physicians.

The conversation does not end here; we are progressing and working hard to educate ourselves, become allies, and taking steps to implement change in our daily practices. ■

## Innovation and Recruitment in the Fellowship Program

The fellowship program is very proud to announce they had a fantastic and successful recruitment season this year. With COVID-19, interviews across all programs were conducted virtually. The fellowship program reviewed more applicants than ever before. The program has successfully matched with two family medicine residents. Dr. Melissa Saab and Dr. Amanda Jude will be joining us this fall for the 2021-2022 academic year. We are looking forward to working with them and watching them grow as geriatricians.

As a response to the COVID-19 pandemic's challenges to fellows' educational opportunities and wellbeing, geriatrics fellowship program directors from across the country partnered to develop a weekly virtual educational series for geriatrics fellows called GERI-A-FLOAT (GERIatric Fellows

Learning Online And Together). The Christ Hospital/University of Cincinnati was a founding member of Geri-A-Float, which launched March 2020. Our fellows and program director, Dr. Anna Goroncy, led a variety of sessions in the first series and are excited to continue learning together this year.

This year, Dr. Goroncy collaborated with current Johns Hopkins fellow, Dr. Mariah Robertson, recent BUMC fellowship graduate Dr. Nicole Mushero and BUMC fellowship program director Dr. Ryan Chippendale to develop a social determinant of health/health inequities curriculum for geriatric fellows through GERI-A-FLOAT. Based on results from a needs assessment survey, topics will include post-incarceration care for older adults, racism, ableism, poverty/food insecurity & LGBTQ health-related to older adults. ■

## The following were presented at the American Geriatric Society Annual Meeting, May 12-13, 2021.

Bedard Thomas, J.; Gausvik, C.; and June, R. Improved Discharge Communication with PCP after SNF Care. Peer-reviewed ePoster Session. May 12.

Jessica Lambert B.S.Ed., Sandra Regan, Ph.D., Sarah Feldkamp B.S., Aaron Grant M.A., Nina Creech B.A., Ron Henlein B.S.B.A., Irene Hamrick, M.D. Clinical Tool for Falls Prevention. Peer-reviewed Presidential ePoster Session. May 13.

Roberston, M.; Mushero, N.; Goroncy, A.; Chippendale, R. Inequities in the care of older adults: identifying gaps in the education of Geriatric Medicine fellows. Peer-reviewed Presidential ePoster Session. Presidential ePoster Session. May 13.

Hsiao, F.; Seto, J.; Alam, N.; Dion, S.; Saab, M.; Regan, S.; Goroncy, A. Developing a Community-Based Response to Food Insecurity in Older Adults in Walnut Hills. Peer-reviewed ePoster Session. May 14. ■



## DIVISION UPDATE:

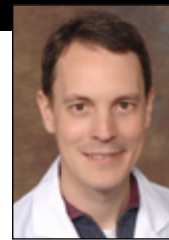
## MEDICAL STUDENT EDUCATION

Rocky Ellis, MD, Director

In keeping with this issue's theme of diversity, equity, and inclusion, I wanted to highlight some of the wonderful activities that are happening in the Division of Medical Student Education. As part of **our division-sponsored preceptor development curriculum, we have added content on microaggressions.** Completion of this curriculum allows preceptors to receive credit toward the ABFM Performance Improvement part of their Maintenance of Certification. Please contact Nancy Jamison at [Nancy.jamison@uc.edu](mailto:Nancy.jamison@uc.edu) if you are interested in completing this curriculum. In the past two years we have **added diversity, equity, inclusion, and cultural competency goals to each of our didactics on the Family Medicine Clerkship.** One example of this was the addition of more images of dermatological conditions in darker skinned

types in our Dermatology didactic. This past year, Dr. Wang lead an effort to create a **longitudinal disability curriculum which added content to the Physician and Society course in the M1 and M2 years.** Dr. Pickle and Dr. Ellis are in the process of completing **an added teaching endorsement in Inclusive Teaching in Higher Education through the Ohio Professional Development Consortium.** This will undoubtedly spur continued discussion and improvements in curriculum and assessment strategies in the coming years. These are just a few of the many projects taking place within the division.

Please feel free to contact me if you have further questions, ideas, or if you would like to get involved with medical student education. ■



Ellis

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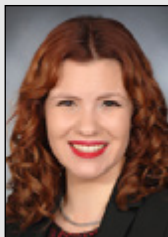
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*Match Day was celebrated in smaller groups of family and friends and online events.  
Congratulations to these students who matched into Family Medicine!*



**Krista Burridge**  
St. Vincent Health  
Erie, PA



**Keith Christian**  
Memorial Hospital  
South Bend, IN



**Lindsay Darkins**  
Bethesda Hospital  
Cincinnati, OH



**Adam Darwiche**  
U Mich - Ann Arbor  
Ann Arbor, MI



**Sarah Dion**  
UPMC St Margaret  
Pittsburgh, PA



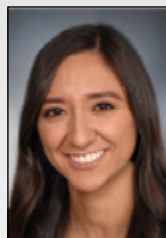
**Madeline Gates**  
U Colorado SOM  
Denver, CO



**Caitlin Moore**  
St. Elizabeth Med Ctr  
Edgewood, KY



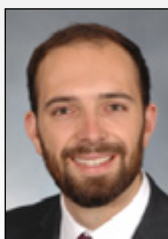
**Tabetha Ratliff**  
Samaritan Health  
Corvallis, OR



**Adriana Rivera**  
St. Elizabeth Med Ctr  
Edgewood, KY



**Diana Sarfo**  
St Josephs Reg Med  
Ctr  
South Bend, IN



**Ethan Schimmoeller**  
Memorial Hospital  
South Bend, IN



**Courtney-Lynn Stahl**  
Kettering Hlth-SOIN  
Kettering, OH



**Cody Van Linge**  
St. Elizabeth Med Ctr  
Edgewood, KY



**Tyler Waid**  
Advent Health  
Florida  
Orlando, FL



**Megan Wilson**  
U Arizona COM  
Tucson, AZ

## DIVISION UPDATE:

## INTEGRATIVE MEDICINE

*Sian Cotton, PhD, Director*



**Cotton**

### Cancer Clinic a Regional First Offering Evidence-based Wellness Services

UC Health Integrative Medicine and the University of Cincinnati (UC) Cancer Center's Survivorship Program have built a program with a multidisciplinary team to provide evidence-based wellness services to cancer patients at a new cancer wellness clinic.

This clinic is the first in our region to integrate a range of services for cancer patients, such as acupuncture, oncology massage therapy, cancer exercise, nutrition, oncology primary care, cancer survivorship and lifestyle medicine physician consultations. The clinic provides therapies focused on a healthy lifestyle, along with modalities to help manage effects patients may experience during and after cancer treatment.

Mladen Golubic, MD, PhD, will co-lead the clinic as medical director for UC Health Integrative Medicine alongside Melissa Erickson, MD, medical director of the UC Cancer Center Survivorship Program. Dr. Golubic joins the UC Center for Integrative Health and Wellness from the Cleveland Clinic, where he practiced and directed educational and research activities within integrative and lifestyle medicine.

"The Cancer Survivorship Clinic will



**Golubic**

offer a great opportunity to put into practice universally accepted recommendations to include the promotion of overall long-term health and wellness in comprehensive cancer treatment," said Dr. Golubic. "Diverse approaches are aimed at helping cancer survivors achieve optimal self-care and address symptoms via evidence-based integrative medicine approaches."

Physicians and providers can refer patients to the clinic, or a patient may self-refer by calling 513-584-3200 to schedule an appointment. The clinic is located within the UC Cancer Center, 234 Goodman St., Cincinnati. Visit [uchealth.com/integrative](https://www.med.uci.edu/integrative) to learn more. ■

### Mindfulness-Based Stress Reduction at the FreeStore Food Bank with Cincy COOKS

Mindfulness-based stress reduction (MBSR) with Cincy COOKS is coordinated by the UC Center for Integrative Health and Wellness (CIHW), led by MBSR-trained facilitator Dr. Meera Murthi and made possible with funds gifted by the Vijay R. Sanghvi Family Foundation to provide integrative medicine therapies to Greater Cincinnati's under-resourced communities. Cincy COOKS held a virtual MBSR cohort with 15 participants through April 2021.

CIHW published "Feasibility and Acceptability of a Community-Based Modified Mindfulness-Based Stress Reduction Program for the Under- and Unemployed" on a previously-completed in-person program with Cincy COOKS in *Global Advances in Health and Medicine*, <https://doi.org/10.1177/2164956120973636> ■

### Free Access to Symposium Recordings

In October 2020 and January 2021, the UC Center for Integrative Health and Wellness and UC Cancer Center Survivorship and Supportive Services Program partnered to present a virtual symposium series to support community wellness. Thanks to our generous sponsors and supporters, this event was free to all attendees and now access to recorded sessions is available online at <https://bit.ly/2020UCOptimize> and in the news & events section of [www.med.uci.edu/integrative](https://www.med.uci.edu/integrative). ■



**OPTIMIZE**  
Your Well-Being

### Pilot Underway for Mindfulness and Resiliency Training for Teachers within Cincinnati Public Schools

In September 2020, the UC Center for Integrative Health and Wellness, with support from the Martha Holding Jennings Foundation, began piloting an 8-week (1 hour/week) evidence-based, virtual mindfulness training program with teachers at Kilgour Elementary in the Cincinnati Public Schools (CPS). Primary outcomes assessed pre- and post-training include stress, mindfulness, resilience, empathy, and impact of the training on teaching ability. Experience from this pilot program will inform a potential district-wide training, accessible

for up to 65 schools across the CPS district. Findings will be shared for expanded reach and replicability of mindfulness and resilience training to support other Ohio teachers and students. We are continuing monthly drop-in sessions as well as monthly meetings with a group of 16 faculty and staff who have volunteered as "champions" to further implement the lessons and practices learned with their colleagues and students. Visit [www.med.uci.edu/integrative](https://www.med.uci.edu/integrative) to subscribe to our e-newsletter for program updates. ■

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## DIVISION UPDATE:

## URBAN, UNDERSERVED AND GLOBAL HEALTH

Charles Schubert, MD, Director



Schubert

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The Division of Urban, Underserved and Global Health has as its primary goal to improve health care for vulnerable populations locally and globally. Therefore, our clinical care and educational outreach almost always include efforts directed at

equity, inclusion and diversity with more focus recently on anti-racism. Following are some current touchpoints. It is truly wonderful to work with such great people. ■

**Readings and Discussions**

One of our more recent activities has been the recommendation and discussion of books which deal with diversity and anti-racism. The book club in the fall of 2020, led by Dr. Doug Collins, featured three books: *How to be an Anti-Racist* (Kendi); *White Fragility* (DiAngelo); and *Black Man in a White Coat* (Tweedy). The discussion was both inspiring and challenging. Because of COVID this was virtual instead of our more usual venue of a faculty home. And to follow on this work, Dr. Joe Kiesler is designing a book discussion focused on anti-racism and racial justice for first-year medical students. Dr. Megan Rich is also considering a provocative book reading (perhaps *Medical Apartheid*) for the residents.

**Addressing Barriers to Voting**

Because of an understanding that barriers to voter participation are real in underserved communities, Rich and many FMC staff and leadership worked really hard to increase access to voting by registering patients to vote. This is a work of equity.

**Engaged with Latino Community**

Dr. Christy O'Dea and Dr. Shanna Stryker have been engaged in the Latino community in Cincinnati. Stryker is doing research designed to identify stressors in this community during the pandemic while O'Dea has remained engaged and active in the Latino Health collaborative.

The Latino Health Collaborative, which is co-facilitated by Christy O'Dea, is a group of academic and community professionals all dedicated to improving the health of Latino immigrants in Cincinnati. The group has been a source of networking and information sharing for those who are working directly in the Latino community. In addition, the

group serves as a resource for those who are doing research in the Latino community.

Over the course of the pandemic, O'Dea and our Spanish speaking residents and faculty have been present in the Latino community providing frequent interviews regarding COVID on a local Facebook news channel. Appearing most weekends between March and December, they provided information about COVID, where to get tested, and the importance of masking and social distancing. In addition, residents Dr. Andrea Jaramillo and Dr. Andrea Rosado worked with O'Dea and medical students to provide information to the Latino community through delivery of health education to local Supermercado owners and staff.

**Division Spanning Activities**

Dr. Anna Goroncy worked on a number of activities which spanned numerous of departmental divisions including our division: She has developed and implemented an anti-racism discussion series for the geriatric division. She started with a brief needs assessment survey and has thus far covered an introduction to the levels of racism and allegories of race, inequities in COVID19 vaccination, and perspectives on the role of historical and current racism on COVID19 hesitancy.

**Community Advocacy**

Goroncy has also worked with the Walnut Hills community to address COVID19 vaccine access and education. She encouraged a virtual Q&A session on the vaccine for Frederick Douglass Elementary School families with Dr. LaToya Smith organizing this event. Christy O'Dea added to this advocacy work by encouraging COVID vaccine access at numerous health centers affiliated with the Department.

Goroncy also helped develop an

Allyship workshop with Dr. Anisa Shomo and family medicine residents, Alyssa Gerth and Sara Maples. And finally she is on the UCCOM Anti-Racism Taskforce and is co-leading the Community Engagement subcommittee with Dr. Rob Neel.

In the areas of research and outreach Goroncy worked with a URM summer research student, and that led to 2 national posters for him and also worked with Dr. Soni Regan on the CCTST Community Health grant on food insecurity in older adults in Walnut Hills. This work included residents: Flo Hsiao, Jordan Seto, Melissa Saab and Josh Cockcroft.

**Model the Right to Health Care**

Joe Kiesler and Megan Rich want everyone to know that the Student Run Free Clinic will be up and running again in Spring and needs preceptors. This is a wonderful outreach to folks without health insurance and a way to model that all people have the right to health care. ■

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## DIVISION UPDATE:

## UNIVERSITY HEALTH SERVICES

*Kim Miller, MD, Executive Director*

Things have been rocking and rolling this semester at University Health Services. We have continued our extensive testing, isolation, and quarantine programs, with over 20,000 tests administered since January 5, 2021. We have increased our weekly surveillance testing to 2,400 students per week, about 10% of all students on campus. Happily, the positivity rate in this group is now under 1%.

Our teams are looking forward to the summer break, when we can reflect on the year that has brought us all so much change personally and professionally, and plan for the fall semester. Hopefully, a robust and successful vaccination program will help us to put the pandemic behind us and return to a new state of normal for fall 2021. ■



Miller

**Robust Tracking System**

Our team of epidemiologists (our own Drs. Modupeoluwa Durojaiye and Vic Wulsin, and Dr. Michelle Chyatte of the HSA program in the College of Allied Health Sciences and College of Medicine) have created a robust and epidemiologically sound system for tracking positive cases and evaluating our data. Dr. Chyatte leads a team of over 100 contact tracers who respond to reports of symptoms, exposures, and diagnoses of COVID-19 within 24 hours.

**Colleague Support**

The Varsity Village clinic continues to provide superb care to students, with Dr. Mike Holliday, who brings a quality and systems improvement lens to our clinical work, Dr. Christine Muller-Held and the counseling team, who provide psychotherapy and individual counseling to students with moderate to severe chronic psychological needs, and our pharmacists, Melca Wallace and Troy Joecken, the dynamic duo of the UHS Pharmacy. Our nursing and administrative staff support all this work, along with additional programs such as immunization compliance and student health insurance customer service.

**Treating Symptomatic Students**

UHS staff, nurses, and providers offer care to symptomatic students at Varsity Village Clinic and the UHS Testing center, where we have ramped up capacity to test over 100 students per day. Thankfully, as our regional COVID numbers have come down, the number of students with symptoms has also dropped, so we have not exceeded our capacity so far (fingers crossed). In addition, we continue to provide comprehensive, multispecialty care to students.

**First Point of Contact**

As part of the University's COVID response team, our triage nurses are the first point of contact for all students with symptoms, and our COVIDWatch nurses manage the medical needs of those who test positive. They help them connect to care and monitor their status throughout their time in isolation.

**Vaccination On Campus**

The University COVID-19 Vaccination Committee, led by Vic Wulsin and Dustin Calhoun of Emergency Medicine, has begun looking at offering COVID vaccination on campus for faculty, staff, and students. We hope to be able to provide vaccination on campus for the University by early summer. ■

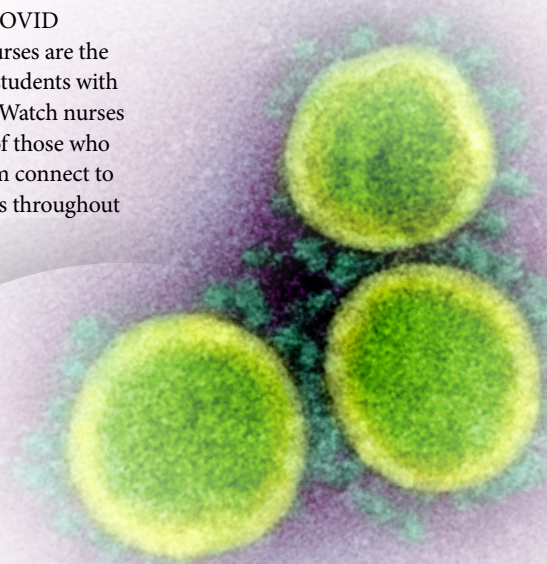


Photo: NIH/National Institute of Allergy and Infectious Diseases

## Remembering Vern Rolf

### *The Department's First Executive Director*

Vernon “Vern” J. Rolf was DFCM’s first Executive Director, who began working in 1977 with department founder Dr. Robert Smith and continued for 28 years, until 2005, also serving under department chairs Dr. Alan David (1991–1999) and Dr. Jeff Susman (2000–2010). Rolf passed away from complications related to COVID-19 on December 9, 2020 at University of Cincinnati Medical Center. He was 78 years old.

Rolf’s career with the University began in 1966 soon after he graduated from Thomas Moore College. From 1970–1977 he was Chief Financial Officer for the Management and Finance Office in the College of Medicine and reported to the Dean. When Smith arrived in 1975, he worked very closely with Rolf and Smith was able to attract him to join the DFCM. As Smith said, “Vern knew where the money was.” In 1985 Rolf received his Masters of Health Service Administration from Xavier University and his thesis was a study on the value of purchasing the Wyoming Family Practice Center for the department’s missions. (The thesis is housed in the Smith Conference room.) That was the first community practice purchased by the College of Medicine and began the increased community engagement by the DFCM. Over time, Rolf facilitated the purchase of additional practices including Dr. Harry Stagaman’s, and establishing the move of the residency to Providence Hospital and later to The Christ Hospital.

Rolf was active in state and national conversations on the administration of family medicine departments, giving presentations such as “How and Where to Obtain Research Funds for Family Medicine,” “Measuring and Rewarding Faculty Financial Productivity,” and Models for Effective Practice Management Teaching.” Rolf served on the boards of Shoulder-to-Shoulder, Health Care Connection and Tender Mercies and was a consultant to many departments of Family Medicine including Ponce School of Medicine in Puerto Rico.

Dr. Alan David appreciated Rolf’s

assistance in helping him understand the budget, department history and key institutional players when he arrived in 1991 to become Department Chair. He recalls, “We became not only trusted colleagues but friends and fishing buddies. Vern was a fierce advocate for the department and was an expert in managing two budgets—institutional and practice plan—with an uncanny ability to utilize funds when and where they would do the most good. He helped sequester a gift from a local hospital system into strategic department reserves that provided great flexibility and funding of new departmental initiatives. He supported the idea that the department invest in an electronic health record—a radical idea before it became expected and commonplace. I have fond memories of Vern—land owner, fisherman, turkey hunter, business administrator, dedicated father and damn good friend.”

Tom Aug, President of Development Partners in Health Care, and Rolf were initially colleagues and then close friends. Aug shared these memories. “The first thing that comes to mind when I think of Vern is his ever-ready smile and his hearty laugh. I was not the most popular person at the Medical Center and the College back in the early 1990s. I was assigned to lead the conversion of all the UC clinical departments to a centralized billing and information system. Many of the department chairs and administrators would rather give up their first born than control of their billing operations. Vern, while as skeptical as many about the project, saw the initiative as important to the Medical Center and supported me and my team throughout the process. I could always count on him to be a voice of reason, and I leaned on his kindness during a very difficult time in my career.

“Vern’s love for the Department of Family and Community Medicine was undeniable. He lobbied on behalf of the department tirelessly to the Medical Center to ensure its contributions were recognized and considered in all decisions. Not only did he demonstrate great loyalty to the Department, but sincere appreciation and affection to faculty and staff.



“In 1998 I left UC Physicians to start my own consulting business. Three weeks after starting my business, I facilitated a faculty retreat designed to improve their patient and staff satisfaction. It was the first of many engagements that Vern contracted with us. Collaboration and teamwork were most important to Vern, and at the heart of his focus for the Department. Through all our work together, he taught me to appreciate the importance of Family Medicine to not only the Medical Center, but to the broader Greater Cincinnati community where so many of its graduates had established their practices.

“Vern leaves behind a legacy of professionalism, integrity and commitment to quality in all that he did. He was a kind and loyal friend, and cared deeply about his work and colleagues. It was a privilege to know him.”

The last chair he served under was Dr. Jeff Susman. Susman spoke to Rolf’s character. “He was a real *mensh*. That’s Yiddish for a good man, a man who would give you the shirt off his back. I remember when I first met Vern he was so enthusiastic and wanting to share information that I almost missed my flight returning to Nebraska. Vern volunteered regularly and made it a point to give back to the community. And I always enjoyed his quips and observations about the characters inhabiting the medical center. In short, Vern was a nice guy who was a joy to work with.”

He loved working on his farm as well as spending time with family and friends, and hunting, fishing and gardening. His legacy for the department was to establish its solid financial foundation. The DFCM owes much to this generous man who touched many lives, and his impact will continue for future generations. ■

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## Thriving Residents

*TCH/UC Family Medicine Residency discusses goals and initiatives related to Diversity, Equity and Inclusion.*  
See full story, page 2.

