

Why We Train at the Provider's Office

Traditional methods of education (conferences, grand rounds, etc.) are not sufficient to motivate child health providers to implement developmental surveillance and screening. The most effective programs are simple, brief, tailored to the learner, flexible, and on-site. “Academic detailing” is the formal term for this kind of program.

Office-based training also offers the opportunity to learn about local issues and specific needs. For example, in the eastern region of Connecticut, three practices reported the need for resources for translating and communicating with patients whose primary language is one of the many Chinese or Indian dialects. Providers reported difficulties in communicating with these parents about basic well-child care and immunizations, and even more difficulties in communicating about the more subtle developmental and behavioral issues.

Help Me Grow community liaisons then contacted local agencies to help identify helpful resources. In several of the practices, pediatricians, nurse practitioners, or physician assistants with skills and training in developmental and behavioral pediatrics were interested in offering developmental assessments to their patients. Several requested technical assistance on incorporating this service into their practice, including information on billing or coding for this type of visit.

Visits are useful in identifying best practices that support developmental monitoring. For example, one practice employs a developmental pediatrician and a psychologist on a part-time basis to evaluate patients. Another has designed paperless charts with a drop-down list of developmental concerns. One provider serving many poor and high-risk families asks his families to notify him personally when they have connected to a service or resource through the *Help Me Grow* system.