

# Study finds new model for pediatric appointments improves preventive care for low-income families

February 11 2016

---



UCLA researchers found the revamped well-child appointment improves care and reduces the number of visits families make to the emergency department. Credit: Sandy Garcia

Well-child care visits are the checkups that children receive to ensure optimal health and well-being. The appointments are intended to give pediatricians the opportunity to identify health, social, development and behavioral issues.

However, the checkups typically last just 15 minutes—often not enough time for parents and doctors to discuss parenting issues, child behavior and development, and sources of stress for the family. The lack of time can be especially challenging for low-income families who may require additional education for the parents or whose children may have greater psychosocial and developmental needs.

To address these issues, UCLA researchers partnered with community pediatric practices to systematically redesign the well-child checkup. The resulting program, described in a 2014 study, was Parent-focused Redesign for Encounters, Newborns to Toddlers, or PARENT, which was created to be family-centered and a more effective way to meet parents' needs in line with nationally recommended preventive care.

Now, in a clinical trial of PARENT, UCLA researchers have found that the new [model](#) significantly improved the delivery of well-child care and reduced the number of visits families make to the [emergency department](#). Their findings are reported online Feb. 10 in the journal *Pediatrics*.

One key piece of the new model is having a trained health educator—a "parent coach"—provide routine preventive care services during the check-ups, in place of a doctor or nurse.

"This was in contrast to the traditional check-up visit that relies on a physician or nurse practitioner to provide preventive health services," said Dr. Tumaini Coker, the study's lead author and an assistant professor of pediatrics at Mattel Children's Hospital UCLA. "Parents

had more time to receive customized preventive care services with the coach who could more readily connect them with community resources, conduct routine screenings and provide family-centered counseling."

The model also allows more time during the appointment for families to discuss their concerns, allows parents to use a web-based tool to select priorities for the visit and complete screening questions in advance so that the visit can be tailored to their families, and employs an automated text message service to send customized messages and appointment reminders.

For the study, 251 families from two Los Angeles-area pediatric practices were randomly divided into two groups. For one year, one group received the usual well-child checkups and the other received the new model of care.

At the end of the 12 months, families completed a survey about the care they received. Compared with families receiving the usual care, families in the new model rated their care significantly higher in several areas. Those in the new model were more likely to report that they:

- Received information on health education and guidance topics
- Were assessed for important family psychosocial concerns
- Had their concerns about their children's behavior and development addressed
- Had a developmental screening performed for their child
- Received care that was helpful and family-centered

The group receiving the new model of care also had 52 percent fewer families make two or more visits to the emergency department.

There were no significant differences between the two groups in the number of sick visits or use of urgent care.

"Our preliminary findings suggest that PARENT may be a more effective system for the delivery of [family](#)-centered, comprehensive [preventive care](#) for young children in low-income communities," said Coker, who is also associate director of health services research at the hospital's Children's Discovery and Innovation Institute. "The substantial reduction in visits to the emergency department in our findings could represent a cost savings."

Coker said the researchers' next step will be to evaluate the [new model](#) with a larger number of [pediatric practices](#).

Provided by University of California, Los Angeles

Citation: Study finds new model for pediatric appointments improves preventive care for low-income families (2016, February 11) retrieved 27 April 2024 from <https://medicalxpress.com/news/2016-02-pediatric-low-income-families.html>

<p>This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.</p>
--