Community Collaboration Aids Well-Child Visits

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MIAMI — Enhance your practice and patient care through collaboration with community resources for children, said Dr. Francis E. Rushton Jr.

"The role of the pediatrician in the community requires use of community resources in collaboration with other professionals, agencies, and parents," he said. It "requires linkage of our services to other early childhood services in the community." For example, a partnership between his pediatric practice and a local elementary school in South Carolina improved well-child visits. A greater number of well-child visits were completed and vaccinations administered, and there was a trend toward lower use of other health care services, compared with traditional well-child care.

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>
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munity projects, you will learn a lot of what is out there. I [also] learned a lot about what was going on in the community by asking parents," Dr. Rushton said. He links his patients to publicly funded services including school programs, health department services, and home visitor programs in Beaufort, S.C., where he is in private practice.

Awareness of community resources might save lives as well. "One of my partners had a mother who broke out crying at 4 months when screened [for depression], and she admitted she was suicidal." Although not trained in suicide intervention, "as a community pediatrician, I have developed links outside my office that ultimately help my patients," said Dr. Rushton, who is also chair of the Council on Community Pediatrics of the American Academy of Pediatrics.

Screen for maternal depression at the 2-week new baby visit, Dr. Rushton suggested at a pediatric update sponsored by the Miami Children's Hospital.

Collaboration is simply defined as "sitting down with other providers of services and coming up with something different than what you were doing before," he said.

But collaboration is not always easy. For example, a local school system representative wanted to provide new parents with literature, which Dr. Rushton found redundant because he already gives a lot of material to parents. "So it got my bristles up. Then we realized neither one of us was meeting our goals—the school readiness scores were abysmal." Things improved when they worked together.

The Well-Baby Plus program at Beaufort Elementary's child development center is another successful collaboration. "We provide all the shots out of our office," Dr. Rushton said. "A public health service nurse helps my nurse give the shots."

Dr. Rushton devised the program along with nurse practitioner Westley Byrne. Families with infants about the same age attend 90-minute sessions at the center. Anticipatory guidance is done at each visit, with literacy addressed around 6 months, poisoning at 9 months, discipline at 12 months, and toilet training at 15 months. Nutrition is addressed at all visits.

While a pediatrician performs a checkup on the infant, the parents can participate in a support group and learn about community health and social agency services.

In a study, 51 families in the "high intensity" program completed more visits, received more vaccinations, and had a trend toward fewer emergency department visits—"which is the way you can sell this program," Dr. Rushton said.

A total of 94% of parents in the Well-Baby Plus program thought their well-child care helped them become better parents, as opposed to 76% of parents in a comparison group that received traditional preventive care. "Significantly more mothers remembered our advice about poisoning and discipline, with a trend toward more knowledge about nutrition and toilet training," when asked 2 months after the appropriate anticipatory guidance, he said.

The American Academy of Pediatrics Council on Community Pediatrics provides a test of community skills for pediatricians (www.aap.org/sections/socp/compedsselfassessment.html). ■

multiple serotypes

a pentavalent vaccine

Artist's rendering; actual rotavirus particles do not vary in appearance; for illustration purposes only