



# *In the Literature*

Highlights from Commonwealth Fund-Supported Studies in Professional Journals

---

## Well-Child Care as Viewed by Families and Clinicians: A Discussion in the Journal *Pediatrics*

---

**September 21, 2009**

**Authors:** J. Lane Tanner, M.D., F.A.A.P., Martin T. Stein, M.D., F.A.A.P., Lynn M. Olson, Ph.D. et al.; and Linda Radecki, M.S., Lynn M. Olson, Ph.D., Mary Pat Frintner, M.S.P.H. et al.

**Journal:** *Pediatrics*, September 2009 124(3):849–57 and 858–65

**Contact:** J. Lane Tanner, Oakland Children’s Hospital, [JTanner@mail.cho.org](mailto:JTanner@mail.cho.org); Martin T. Stein, University of California, San Diego, Rady Children’s Hospital, [mstein@ucsd.edu](mailto:mstein@ucsd.edu); Linda Radecki, American Academy of Pediatrics, [lradecki@aap.org](mailto:lradecki@aap.org); or Mary Mahon, Senior Public Information Officer, The Commonwealth Fund, [mm@cmwf.org](mailto:mm@cmwf.org).

**Access to the full articles is available at:** <http://pediatrics.aappublications.org/cgi/content/abstract/124/3/849> and <http://pediatrics.aappublications.org/cgi/content/abstract/124/3/858>

---

### Synopsis

Commonwealth Fund–supported articles published in the September issue of *Pediatrics* examine well-child care visits from two perspectives: those of pediatric clinicians and parents. Both groups recognize the need for a greater emphasis on developmental and behavioral issues, as well as the challenge of balancing families’ individual needs with the need to cover the topics recommended in pediatric guidelines.

---

### The Issue

Well-child care—the cornerstone of preventive pediatrics—has received increasing attention in recent years. While well-child visits have traditionally been associated with activities like immunizations and school physicals, professionals in the field recognize the visits can be a critical vehicle in addressing other important topics, such as developmental and psychosocial issues. As the pediatric community continues to “rethink” well-child care, it is important to consider both parents’ and pediatricians’ expectations and experiences. Two focus group–based studies—one of pediatric clinicians and pediatric nurse practitioners and the other of parents—highlight some common ground.

---

### Key Findings

#### *Pediatric Provider Focus Groups*

- Clinicians stressed the importance of continuity in relationships between families and their providers, as well as the ability of providers to tailor care to the particular needs of both child and family.
- Some clinicians noted a tension between soliciting parents’ concerns and addressing the recommended content outlined in professional guidelines for well-child care. Many expressed frustration with the “overwhelming” number of recommended health care directives. The solution to this dilemma, recommended by many of the clinicians, is to give the parents’ concerns first priority during the visit.
- To address needs that fall outside their expertise, pediatricians require better coordination between their practices and community resources.

- Providers recognized the importance of developmental screening in early childhood visits, and most embraced the use of standardized parent questionnaires to screen for developmental delays and behavioral problems.
- To improve the quality of well-child care, participants suggested stronger curricula in developmental and behavioral pediatrics during residency; practical tools for surveillance and screening; improvements in practice infrastructure, like information technology; and practical referral links to community resources.

#### *Parent Focus Groups*

- Parents want assurance from their pediatrician that their child’s growth and development is normal and that they are doing a good job at parenting.
- Most parents want to see a doctor they know and who knows their child. A pediatrician who talks directly to the child, feeling respected as a parent, and making eye contact during the visit—these things matter to parents.
- Although parents want more information about child development and behavior, they are not always sure which questions are okay to ask the doctor—for example, questions about toilet training or thumb sucking.
- Parents reported they were in favor of improvements to pediatric preventive care such as pre-visit checklists to help them prepare for the visit, workshops to learn about children’s health and development, and increased e-mail availability with doctors.

---

### **Addressing the Problem**

Parents and practitioners alike want a greater emphasis placed on behavioral and developmental issues, and both groups recognize the challenge of balancing families’ specific needs with the topics pediatricians are expected to cover in a typical visit—a major challenge for physicians. “The number of recommended health directives for well-child care has far outstripped the time available,” the authors state. Participants in the clinician study endorsed the idea of reorganizing visits according to health and developmental risk and providing longer and more frequent visits for those with greater needs.

---

### **About the Study**

The study of pediatric clinicians involved 31 focus groups with 282 pediatricians and 41 pediatric nurse practitioners, conducted between December 2005 and May 2007. The parent study involved 20 focus groups with 101 parents, conducted from September 2005 to July 2006.

---

### **The Bottom Line**

Both parents and pediatric clinicians believe well-child care visits should emphasize developmental and behavioral issues, with families playing a key role in setting priorities.

---

### **Citation**

J. L. Tanner, M. T. Stein, L. M. Olson et al., “Reflections on Well-Child Care Practice: A National Study of Pediatric Clinicians,” *Pediatrics*, Sept. 2009 124(3):849–57.

L. Radecki, L. M. Olson, M. P. Frintner et al., “What Do Families Want from Well-Child Care? Including Parents in the Rethinking Discussion,” *Pediatrics*, Sept. 2009 124(3):858–65.