Healthy Steps for Young Children—a program designed to foster closer relationships between health care professionals and parents in addressing the physical, emotional, and intellectual development of young children—significantly improves continuity of care practices among pediatricians in training, say researchers at the University of Illinois at Chicago.

The study, “Healthy Steps for Young Children Program in Pediatric Residency Training: Impact on Primary Care Outcomes” (Pediatrics, Sept. 2007), also found that the program increases pediatric residents’ documentation of important psychosocial issues in children. “Multiple indices suggest important benefits of incorporating a Healthy Steps curriculum into pediatric residency training,” concluded the research team, which was led by Leo G. Niederman, M.D., M.P.H.

Healthy Steps, a national initiative launched with support from The Commonwealth Fund and others, seeks to improve the quality of preventive health care for infants and toddlers. A key program element is the introduction of the Healthy Steps Specialist—a co-practitioner with training in early childhood development—into the pediatric practice setting to focus on behavioral, developmental, and psychosocial issues. Incorporating Healthy Steps into practices has been shown in several previous studies to have positive effects for children and families. This is the first study to report on primary care outcomes following the introduction of Healthy Steps into pediatric residency training.

Healthy Steps Boosts Continuity of Care

The researchers tracked three groups of children, from birth to 36 months of age. These included children enrolled in Healthy Steps and two groups of unenrolled children, one of which was seen at the same site as the Healthy Steps children, with the other seen at a separate site.

In terms of total visits and health maintenance visits, continuity of care was “significantly better” for Healthy Steps–enrolled children compared with children seen at the same site and not enrolled in the program. While the difference in developmental, behavioral, and psychosocial diagnoses was not statistically significant, there were significantly fewer diagnoses in these domains at the non-Healthy Steps site, where no residents were exposed to the program.

According to the researchers, this finding “suggests that residents’ experiences with the Healthy Steps Specialist, when providing care for the Healthy Steps cohort of children, had a substantial impact on their ability to uncover and document such issues regardless of whether the Healthy Steps Specialist was present.”

Further studies—specifically prospective studies that randomly assign residents to a Healthy Steps or non–Healthy Steps curriculum—are needed to assess whether the program influences postgraduates’ everyday pediatric practice, the authors say.