



# In the Literature

## ASSESSING HEALTH SYSTEM PROVISION OF WELL-CHILD CARE: THE PROMOTING HEALTHY DEVELOPMENT SURVEY

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<http://pediatrics.aappublications.org/cgi/content/abstract/107/5/1084>

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Preventive care for young children involves varying strategies: screening and assessing children at risk of developing problems, following up on potential issues, and providing guidance to parents. The Promoting Healthy Development Survey (PHDS)—developed by the Foundation for Accountability (FACCT)—can evaluate how well health care professionals provide such care, and ultimately help identify missed opportunities and determine how to better meet the needs of children and families.

In “[Assessing Health System Provision of Well-Child Care: The Promoting Healthy Development Survey](#)” (*Pediatrics*, May 2001), researchers Christina Bethell, Ph.D., Colleen Peck, M.S., and Edward Schor, M.D., tested the PHDS with a diverse group of families, determining that the survey provides a valid, comprehensive measure of preventive care, but there is also significant room for improvement in ensuring appropriate, family-centered care.

### About the Study

The PHDS was developed using guidelines from the American Academy of Pediatrics and the Maternal and Child Health Bureau’s Bright Futures initiatives. The 36-item survey seeks to discern whether health care providers offer the following: anticipatory guidance related to learning, nutrition, behavior, language development, and other child development issues; assessment of skills like mobility, hearing, seeing, communication, and social-emotional development; and an evaluation of family social and psychological health.

The survey was sent out by mail to 1,048 families with commercial insurance and 430 parents with children covered under Medicaid.

### Results

To test the usefulness of the PHDS, researchers tested three hypotheses—all of which proved true. First, parents who responded that their questions were answered during the doctor’s visit were significantly more likely to report increased confidence, compared with parents who responded that they did not receive guidance. Second, parents who responded affirmatively about receiving anticipatory guidance were more likely to report positive parenting behaviors like reading to their child. And third, fewer parents reported concerns about their children’s behavior if the providers had spoken with them about expected behaviors.

Variations were observed across medical plans, with parents of children covered under Medicaid reporting significantly lower scores on “anticipatory guidance by providers” and “follow-up for at-risk children.” The study results also implied that parents of children ages 3–18 months may be receiving more anticipatory guidance than parents of children ages 19–48 months. While most parents reported more satisfaction with information related to their child’s physical needs, they wanted greater guidance on psychosocial issues.

The PHDS, the study concludes, offers a useful way to assess developmental services, particularly preventive or anticipatory measures. In addition, the survey’s socioeconomic and demographic questions let medical providers, health plans, and legislators assess which patient populations are underserved and in need of health care interventions. Finally, the authors say, “PHDS may also be useful as a parent education and empowerment tool, helping parents to identify unmet needs and to act on their own behalf to obtain education, counseling, and assessment service.”