

## **EPIC: Overcoming Barriers to Sustainable Practice Change**

In 2002, the [Child Health and Development Institute](#) (CHDI) piloted an innovative training initiative called [Educating Practices in the Community \(EPIC\)](#), which used onsite presentations at physicians' offices to provide educational messages. Described in the recent IMPACT, "[Using Academic Detailing to Change Child Health Service Delivery in Connecticut: CHDI's EPIC Program](#)", EPIC represents an important advance in creating sustainable improvements in Connecticut's child health delivery system.

### **Innovation But No Action**

Opportunities to improve the delivery of health and mental health care to Connecticut's children are abundant. Advances in technology, insights into the value of care coordination and innovations in screening protocols, among many others, highlight pediatric practice changes that have obvious benefits in terms of better clinical outcomes and more efficient delivery of needed services. However, child health providers are often slow to adopt and implement such practice changes. An overview of EPIC's ongoing experience and program assessments reveals several barriers to practice improvement including:

- **Lack of knowledge regarding improvement opportunities and/or the resources** available for supporting implementation of practice changes
- **Lack of time**
- **The need to coordinate activity and information** both within the office as well as with providers of complementary services
- **Absence of clear success measures as well as accountability** for making needed changes

Training would appear to be an obvious response to improving knowledge and implementing new practice systems. However, research clearly shows that traditional didactic, lecture-based education sessions are ineffective in changing behavior among health professionals. Other educational strategies, such as audit/feedback, incentives, and regulation have been found to vary in effectiveness and do not demonstrate predictable positive practice change results.

### **Academic Detailing: From Product Promotion to Education**

Academic detailing is one approach that has delivered consistently effective behavior change. Pharmaceutical companies have used office detailing, with a personal visit by a trained professional to a health provider and their staff, for years, as a means of promoting their products. Academic detailing adapts this model to promote sustained behavioral change using an educational outreach approach that includes an office-based presentation that takes the entire staff through a comprehensively designed educational process that includes positive reinforcement of improvements and periodic follow-up communications.

### **EPIC: Education to Action**

EPIC, piloted in 2002, and formally launched in 2005, operationalized these principles and has grown to include ten topical presentations. EPIC involves delivery of a one-hour presentation by a trained professional onsite at the practice over breakfast or lunch at no cost to the practice. Presentation content is relevant to all staff roles (e.g., front office, billing as well as providers). Presentations include practical information about supports for the practices in making the needed changes. Selected modules also carry

Continuing Medical Education or physician Maintenance of Certification credits. Between May 2006 and April 2011, EPIC has reached 141 pediatric and family medicine practices with one or more presentations for a total of 220 presentations.

More than 1,400 attendees across a range of practice personnel have provided feedback on the presentations in their offices. Feedback has been overwhelmingly positive with more than 90% of participants stating they plan to use the information provided and 95% reporting that the information was valuable.

More telling are the results of chart audits used to determine if practice changes were more likely in practices after an EPIC presentation than in practices not exposed to EPIC training. A 2010 audit to assess the impact of the Autism Spectrum Disorder (ASD) module demonstrated significant increases in ASD screening with an average of 70.8% of children screened for the EPIC group versus 46% for the control group of practices. An equally important result of EPIC's outreach has been the forging of personal contacts between practice staff and care coordinators for children with special needs.

EPIC responds to many of the barriers to change cited above by providing:

- **Up-to-date information** about Connecticut's policies and systems that support pediatric service delivery
- **Time-saving strategies**
- **Collaboration and commitment between community-based service providers**, such as mental health professionals, and child health providers
- **Data collection and analysis capabilities** to monitor service delivery and practice processes to ensure ongoing delivery of improved care

EPIC modules address a wide range of topics ranging from Autism Spectrum Disorder screening to care coordination in a medical home setting to hearing monitoring and even teen driver safety. A full list of EPIC modules is included in the [IMPACT](#). Practices can sign up for EPIC presentations here: [EPIC Modules](#) and click on the topic(s) of interest.

*For a printed copy of the IMPACT or for more information on this topic, please contact Lisa Honigfeld, Vice President for Health Initiatives at [honigfeld@uchc.edu](mailto:honigfeld@uchc.edu).*

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