



Entrustable Professional Activities

EPA 1 for Developmental-Behavioral Pediatrics

EPA 1: Effectively Advocate for Children and Families Affected by Developmental and Behavioral Disorders

Supervision Scale for This EPA

1. Trusted to observe only
2. Trusted to contribute to advocacy activities with direct supervision and coaching at the individual family and/or community level
3. Trusted to conduct advocacy activities with indirect supervision at the individual family and/or community level
4. Trusted to mentor others and effectively lead advocacy activities at the local and/or state level without supervision
5. Trusted to effectively lead advocacy activities at the regional and/or national level without supervision

Description of the Activity

Developmental-behavioral pediatricians (DBPs) should actively contribute to the design and implementation of programs to improve the functioning of their individual patients and should also advocate for policies that will positively impact others with developmental and/or behavioral disorders on a regional, state, or national level.

The specific functions which define this EPA include:

1. Demonstrating an understanding of needs assessments, program planning, maintenance, and quality assurance of services for individuals with developmental and behavioral disorders
2. Advocating for individuals with developmental and behavior disorders to receive appropriate habilitative, therapeutic, and accommodative services
3. Applying the principles of population based public health to advocate for public policy to meet the needs of individuals with developmental and behavioral disorders and their families
4. Applying strategies for communication and dissemination of information that will inform policy to public officials and engage other professionals and families

Judicious Mapping to Domains of Competence

- Patient Care
- Medical Knowledge
- Practice-Based Learning and Improvement
- Interpersonal and Communication Skills
- Professionalism
- Systems-Based Practice
- Personal and Professional Development



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Competencies Within Each Domain Critical to Entrustment Decisions

PC 4:	Interviewing patients
PLBI 4:	Analyzing practice
ICS 4:	Working as a member of a health care team
SBP 1:	Working in care delivery settings and systems
SBP 4:	Advocating for quality
SBP 5:	Working in interprofessional teams
SBP 7:	Advocating for the promotion of health
PPD 6:	Providing leadership to improve care

Context for the EPA

Rationale: DBPs are one of the very few medical specialists with the expertise to advocate specifically for individuals with developmental and behavioral disorders and their families. DBPs have a unique perspective on the services and corresponding rights that these individuals need and understand the complexity in fulfilling these requirements. DBPs understand the changing needs these individuals have as they grow and develop and how the support system surrounding them must adapt. In addition, the physicians' standing and reputation in their communities makes them potentially powerful advocates for all individuals with developmental and/or behavioral disorders and their families. Third-party payers for developmental and behavioral treatments operate within limited public policy and regulations, which allows for inconsistent availability of evidence-based treatments at different ages and in different geographic locations.

Scope of Practice: DBPs provide medically based services to patients with a broad spectrum of developmental and behavioral concerns from infancy through adulthood. They must be competent in working as a member of interprofessional teams that may include special educators, psychologists, occupational therapists, speech-language pathologists, physical therapists, teachers, and administrators. DBPs are uniquely qualified to understand the "whole child" with developmental and behavioral disorders and to specify these needs more completely. DBPs can also advocate for the needs of the population of individuals with developmental and behavioral disorders. DBPs understand the broad range of disabilities and have the knowledge and expertise to understand the current literature to determine which therapies and treatments are most effective and therefore which should be advocated for locally or nationally.

Curricular Components That Support the Functions of the EPA

1. Demonstrating an understanding of functional needs assessments, program planning, maintenance, and quality assurance of services for individuals with developmental and behavioral disorders
 - Conducts a functional needs assessment for individuals with developmental and behavioral concerns
 - Describes the assessment and treatment program planning (e.g., Individual Family Service Plan, Individualized Education Program) processes available to individuals with developmental and behavioral concerns
 - Utilizes quality assurance processes including defining the process, measuring the process, and implementing methods to improve the process of providing services for individuals with developmental and behavioral disorders



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2. Advocating for **individuals** with developmental and behavioral disorders to receive appropriate remedial, therapeutic, and accommodative service
 - Attends education or therapy planning meetings to advocate for appropriate services
 - Reviews progress toward therapeutic goals and advocates for adjustments as indicated
 - Identifies community resources that can serve individuals with developmental and behavioral disorders
 - Communicates with and provides consultation to advocacy and service organizations to identify issues and potential solutions relevant to individuals with developmental and behavioral disorders, including development and maintenance of appropriate community resources
3. Applying the principles of **population-based** public health to advocate for public policy to meet the needs of individuals with developmental and behavioral disorders and their families
 - Demonstrates the ability to apply principles of population-based public health
 - Communicates effectively with public health officials, service organizations, advocacy organizations, and legislators to advocate for:
 - Activities that will prevent developmental and behavioral disorders
 - Needed improvements or additional services when the needs of individuals with developmental and behavioral disorders and their families are not being met
 - Long-term funding for effective prevention and treatment programs
 - Identifies governmental officials at all levels who can be advocates for individuals with developmental-behavioral disorders
4. Applying strategies for communication and dissemination of information that will inform policy to public officials and engage other professionals and families
 - Incorporates effective communication strategies to optimize message delivery, including: 1) tailoring the message to specific individuals or audiences; 2) using narratives in the form of stories, testimonials, or entertainment-styled education; and 3) framing the message to emphasize the most relevant aspect (e.g., what is gained vs. what is lost)
 - Incorporates effective dissemination strategies to promote use of information, including: 1) distributing information broadly to many audiences and across many settings (e.g., traditional mail, e-communications, social media, mass media); 2) identifying champions who are opinion/thought leaders to increase interest and motivation in the information; and 3) providing additional resources to use and apply the information in specific contexts
 - Explains, as necessary, evidence that is uncertain, utilizing appropriate concepts: 1) overall strength of evidence; 2) risk of bias; 3) consistency with body of literature; 4) generalizability; 5) net benefit; and 6) overall strength of recommendations
 - Actively participates in activities of advocacy organizations with public policy and education processes.
 - Regularly monitors both social media and mainstream media to identify contacts supportive of developmental and behavioral services



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Problems that **generally** require referral/consultation/interprofessional co-management:

While advocacy efforts do not typically align with usual medical care referral patterns, consultation with, referral to, and partnering with others may enhance the efficacy of the advocacy efforts. Effective advocacy can be done in a broad range of levels, including the level of an individual patient, a local population, with populations defined by states and national boundaries, and with populations defined by specific conditions or needs. The effectiveness of advocacy can be enhanced when experts with the appropriate knowledge and skills become engaged. Experts may become long-term partners or engage for specific phases of an advocacy effort. Some activities may require experts from nonmedical professions. For example, advocacy efforts that involve legal and policy perspectives could benefit from engaging attorneys and legislators; activities that involve significant outreach and communication will benefit from experts in print and media communications.

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