

## Community Pediatrics Training Initiative [CPTI]

Children's Hospital of Wisconsin Pediatric Residents' (175) self-report surveys (2000-2010) were used for the comparisons of pre/post test using Wilcoxon Test analysis (Mean  $\pm$  standard deviations) for each of the five Community Pediatrics Training Initiative measurements: System-based Practice, Poverty Impact on Children, Professionalism and Diversity, Teambuilding and Child advocacy. Software used for data analysis was Stata10SE.

Average Pediatric Residents' Perceptions of Exposures and Competencies in Domains Before & After Community Pediatrics Training Initiative 2000-2010 N=175						
	EXPOSURES			COMPETENCIES		
	Before (SD)	After (SD)	Change	Before (SD)	After (SD)	Change
<b>System-Based Practice</b>	2.24 (.73)	3.83* (.78)	1.59	2.01 (.74)	3.60* (.73)	1.59
<b>Poverty Impact on Children</b>	2.60 (.59)	4.09* (.69)	1.49	2.42 (.60)	3.89* (.59)	1.47
<b>Professionalism/Diversity</b>	2.80 (.73)	3.84* (.67)	1.04	2.71 (.72)	3.72* (.58)	1.01
<b>Teambuilding</b>	3.63 (.67)	4.28* (.58)	.65	3.55 (.68)	4.22* (.55)	.67
<b>Child Advocacy</b>	2.46 (.71)	4.04* (.71)	1.58	2.22 (.59)	3.85* (.61)	1.63

**Scale:**

1 = lowest and 5 = highest, SD = Standard deviation, \* P-value statistically significant  $p < 0.001$

**Legend:** For both exposure and competency, there was a significant difference pre- and post- for all 5 main groups. The pediatric residents' improved their level of exposure and competency after their training. Baseline ratings in the domain of teambuilding were relatively high in the initial self-assessment, indicating that pediatric residents felt competent in this domain before the Community Pediatrics rotation began. Pediatric Residents perceived the greatest changes in their exposures and competencies related to system-based practice, child advocacy, poverty impact on children, and professionalism/diversity.