



Making Data Count

Measuring Diabetes and Obesity in the Indian Health System

December 18-20, 2007

IHS Division of Diabetes Treatment and Prevention

Childhood Overweight: What We Know and What Works

Jane McGrath, MD

Session: C4



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“To eliminate the gap between what is and what can be in health care for all children.”

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Envision NM Pediatric Overweight Learning Collaborative 2006 - 2007

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Envision New Mexico Overweight Collaborative Goals

- To improve health care for children & adolescents in New Mexico
- To offer providers best practice improvement tools
- To improve provider communication skills
- To promote collaboration between primary care practices, SBHCs, families and communities



How Serious is Overweight & Obesity?



- In the near future, obesity will be the number one cause of preventable premature death and disability
- Approximately 60% of overweight children ages 5 -10 already have one biochemical or clinical cardiovascular risk factor
- Obesity now outranks both smoking and drinking in its impact on health and healthcare costs

CDC PedNSS, 2002, NM Survey of High School Students, 2001
CDC BFRSS, 2002





Elements of the Learning Collaborative

- Give providers tools for preventing obesity in their patients
 - Key messages
 - Motivational interviewing
- Develop office systems
 - Develop teams
 - Track Data
 - Use PDSA cycles
 - Routine calculation and plotting of BMI%
 - Posters and other visual prompts



Provider Education

- How and why to use BMI%
- Make the diagnosis (terminology change)
- Identify risk factors
- Order appropriate lab tests
- Identify co-morbidities
- Establish routine follow-up
- Referral as necessary



Motivation for Change

- What motivates our patients to change their behavior ?
- What motivates us as providers to change our behavior ?
- *Ruler exercise*



Learning Collaborative Workshop #1

- Incorporate BMI%
 - well child visits 2-18yrs, sports physicals and family planning/gyn visits
- Dx overweight and Obesity
- Discuss 4 key messages
- Develop first PDSA Cycle



Most Common Co-Morbidities

- Pre-diabetes and Type 2 Diabetes (T2DM)
- Metabolic Syndrome
- Hypertension
- Dyslipidemia
- Polycystic Ovarian Syndrome
- Sleep Disorders
- Mental Health Issues



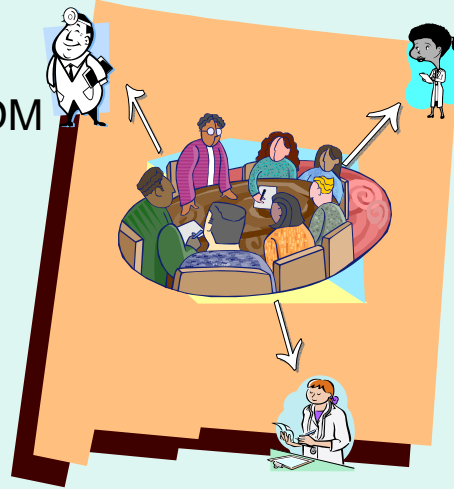
Final Data Report for 2006-2007

- Total charts audited 844
- 8 sites completed the collaborative
- Chart abstractions at:
 - Baseline
 - C1
 - C2
 - C3
 - Final Cycle



Telehealth Clinic

- Overweight
- Pre-diabetes and T2DM
- Hypertension
- Dyslipidemia
- Polycystic Ovary Syndrome



COMM-TC

- Volunteers:
 - Adolescent Medicine specialist
 - Psychiatrist
 - Endocrinologist
 - Nephrologist
 - Cardiologist
 - Hepatologist
 - Psychologist
 - Nutritionist
- Dr Sweeney, as himself

COMM-TC

- E-Meeting Clips



Envision New Mexico Community Outreach Target and Goals

- Target:
 - Community clinic and school-based health centers and teen life center providers
- Goals:
 - Empower providers to be advocates for change
 - Connecting providers to community resources as they serve children, teens and families
 - Promote “Get More Energy!” Campaign to support physical activity and healthy eating in New Mexico communities
- Celebrate providers in their
- practices and in their communities!



Why is this important?

**Healthy kids make better students
and better students make
healthy communities**



Community Outreach

- Identify and use community resources
- Improve the built environment
 - Safe Routes to Schools
 - Multi-use Trails
- Disseminate Key Messages
- Strengthen partnerships
 - Between community clinics, schools and school-based health centers, and community resources



2006-07 Collaborative Community Outreach

- Use the “Rx for Health”
 - Modify into a “pledge” with support from
 - Dr. Susie John
- Assets mapping of your community
- Choose a “Get More Energy!” Project
 - Envision NM provides teamwork assistance



Every Child Deserves to be Healthy and Happy!



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