

Medical Assistants as Health Coaches?

An Effectiveness Outcome Study

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Faculty Disclosure

The presenters of this session have NOT had any relevant financial relationships during the past 12 months.

Conference Resources

Slides and handouts shared by our conference presenters are available on the CFHA website at https://www.cfha.net/page/Resources_2019 and on the conference mobile app.



Learning Objectives

At the conclusion of this session, the participant will be able to:

- Describe the health coaching curriculum and its fit with the overall intervention
- Review outcome data from this training and intervention
- Analyze next steps in training medical assistants to facilitate health behavior change

Bibliography / Reference

1. Busetto, L., Luijkx, K. G., Elissen, A. M. J., & Vrijhoef, H. J. M. (2015). Context, mechanisms and outcomes of integrated care for diabetes mellitus type 2: A systematic review. *BMC Health Services Research*, 16, 18.
2. Van Eeghen, C. O., Littenberg, B., & Kessler, R. (2018). Chronic care coordination by integrating care through a team-based, population-driven approach: A case study. *Translational Behavioral Medicine*, 8, 468-480.
3. American Diabetes Association. (2016). 1. Strategies for improving care. *Diabetes Care*, 39 (Supplement 1), S6-S12.
4. Pirbaglou, M., Katz, J., Motamed, M., Pludwinski, S., Walker, K., & Ritvo, P. (2018). Personal health coaching as a type 2 diabetes mellitus self-management strategy: A systematic review and meta-analysis of randomized controlled trials. *American Journal of Health Promotion*, 32, 1613-1626.
5. Sarre, S., Maben, J., Aldus, C., Schneider, J., Wharrad, H., Nicholson, C., & Arthur, A. (2018). The challenges of training, support and assessment of healthcare support workers: A qualitative study of experiences in three English acute hospitals. *International Journal of Nursing Studies*, 79, 145-153.

Learning Assessment

- A learning assessment is required for CE credit.
- A question and answer period will be conducted at the end of this presentation.



Medical Assistants as Health Coaches?

An Effectiveness Outcome Study

Research → Practice



- Integrated approaches promoting patient engagement & self-management have been shown to improve health outcomes
...but are difficult to implement in real-world settings
- Population-based T2DM management service feasible in primary care (van Eeghen, Littenberg, & Kessler, 2018)
...but has yet to be tested systematically



Current Study

- 3-month lifestyle intervention delivered by MAs in primary care
- **Efficacy:** HbA1c, lipids, blood pressure, VO_2 peak
- **Effectiveness:** acceptability, utility, fit of program

Reach: # enrolled completing program / # eligible

Effectiveness: patient measures, cost, workflow within the practice

Adoption: modifications made during implementation vs. design

Implementation: staff reported ability to implement in routine practice

Maintenance: continuation of program during and after grant

Why Medical Assistants?

- Efficient use of existing resources
- Already familiar with primary care workflow
- Already involved in screening process
- Have established relationships with patients & providers

Intervention

- Physical activity
- Nutrition
- Health coaching



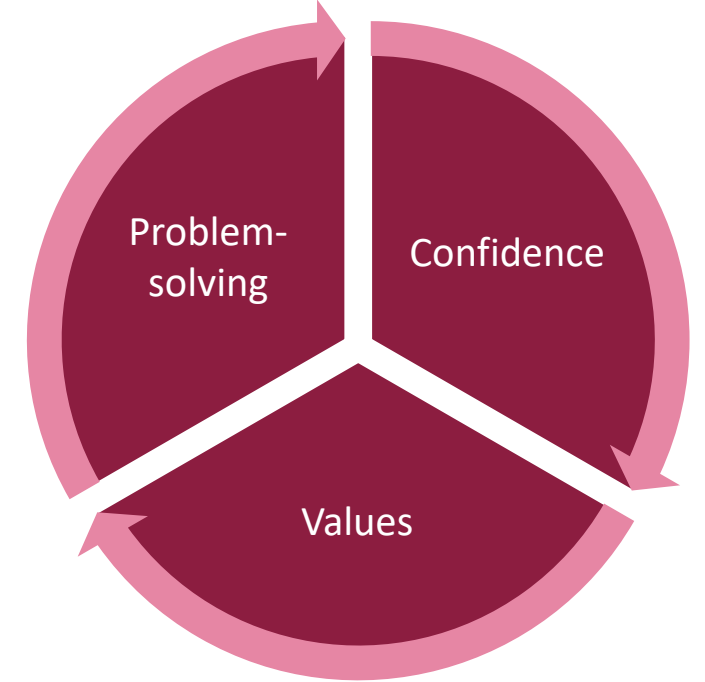
What is Health Coaching?

The use of **evidence-based** skillful **conversation**, clinical interventions and strategies to actively and safely engage patients in **health behavior change**.



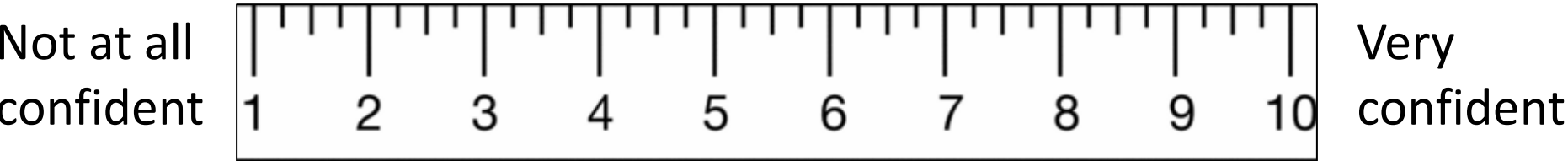
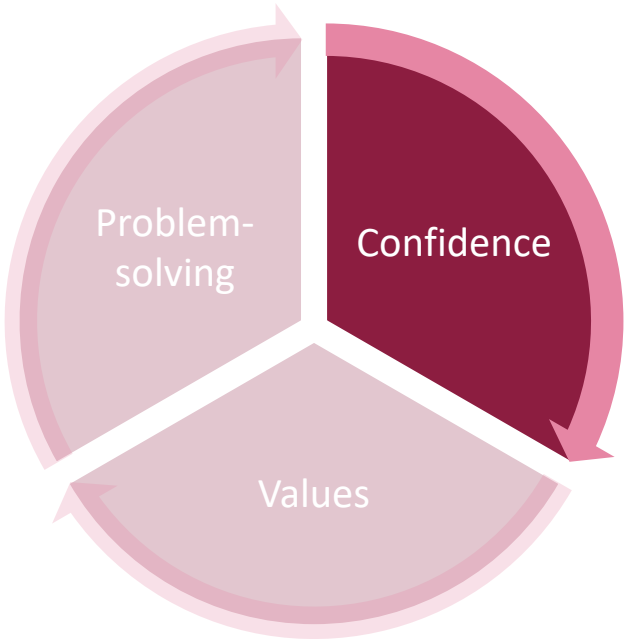
Intervention: Health Coaching

- Care plan + 6 20-min follow-up sessions
- Elements drawn from MI, ACT, & PST
- Collaborative, focus on skill-building



Intervention: Health Coaching

“On a scale of 1 to 10, with 1 being not at all confident and 10 being extremely confident, how would you rate your confidence TODAY in following your activity and eating plan?”

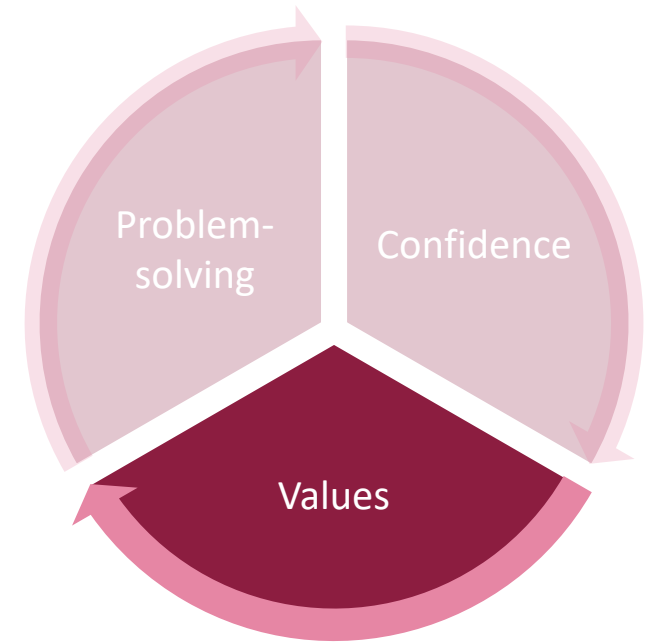


Score	Confidence	Response
0-3	Weak	Express support
4-7	Moderate	Elicit motivation (follow-up Qs)
8-10	Strong	Elicit motivation (follow-up Qs)

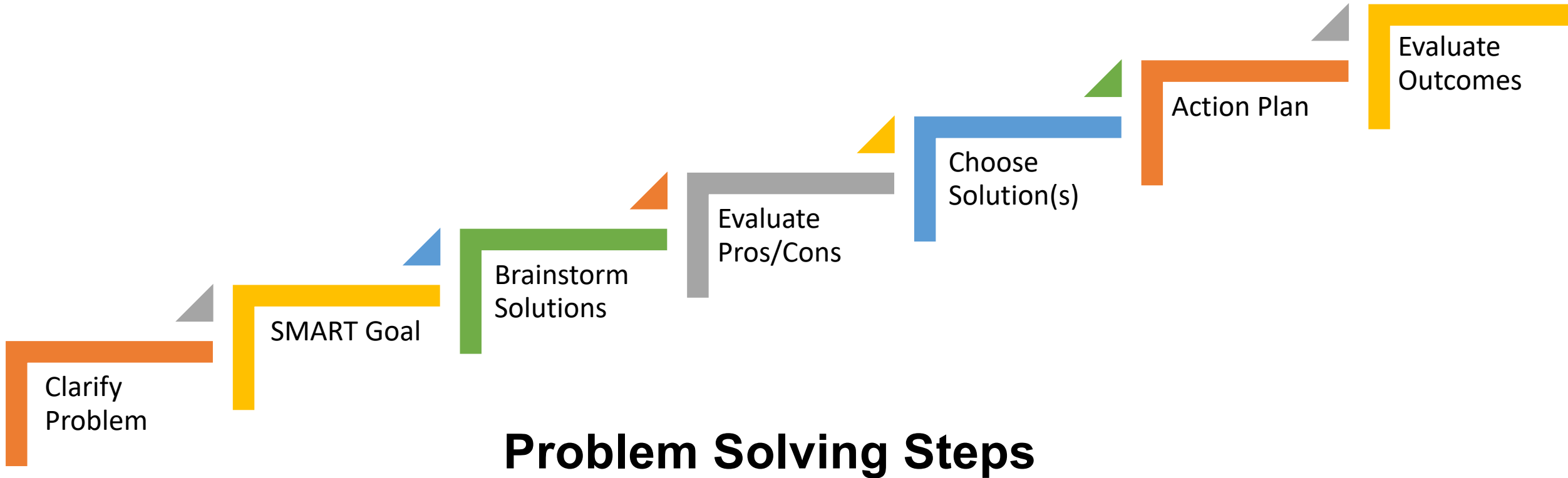
Intervention: Health Coaching

Values Workflow

1. Orient patient to why values are important
2. Identify patient's personal values
3. Help patient connect personal values to DM mgmt
4. Summarize/reflect & record value(s)



Intervention: Health Coaching





Preliminary Outcomes

Patient sample

- 30-80 years of age
- HbA1c 7.5%-10%
- Exclusion criteria:

Require injectable insulin

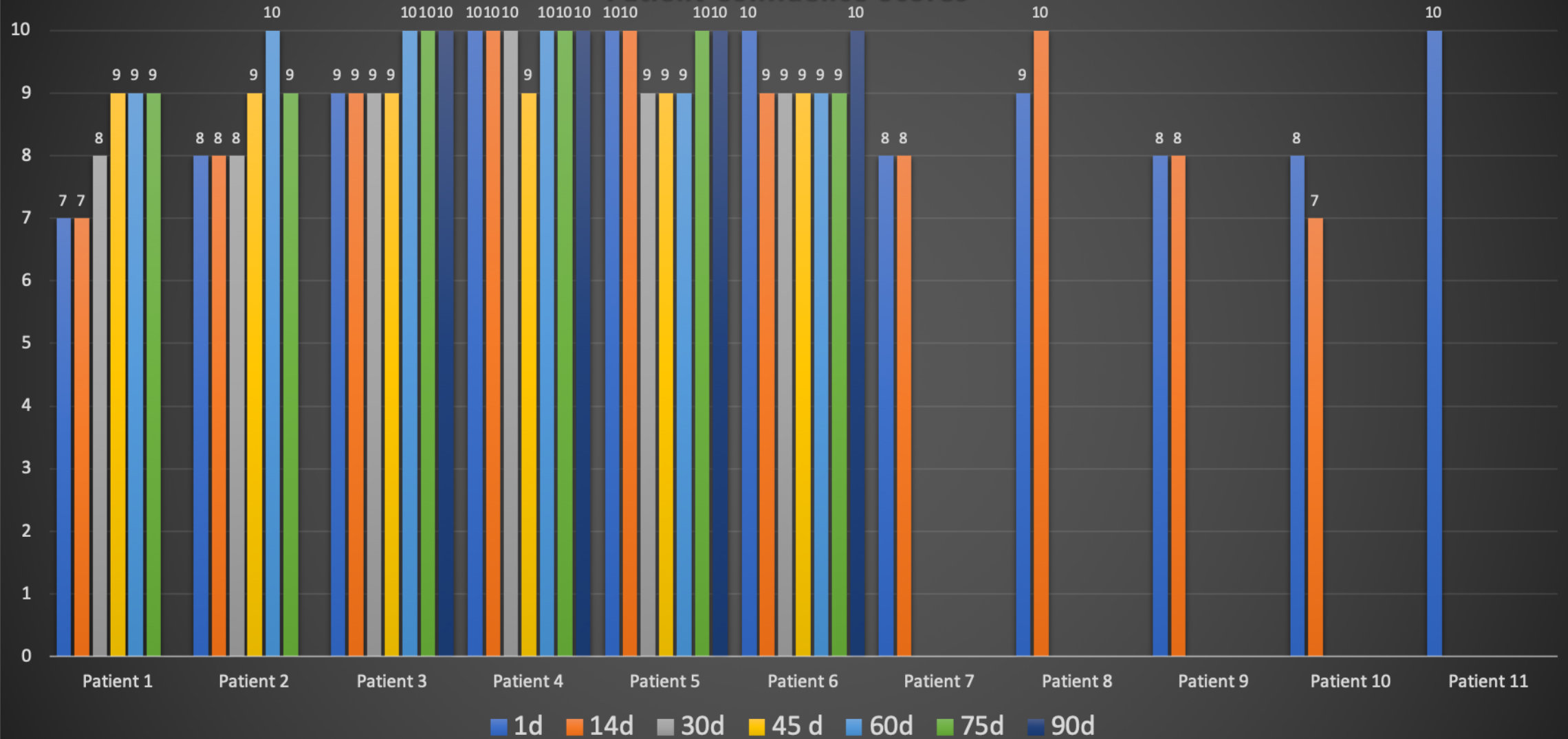
Contraindications to physical activity

Plan to become pregnant

Preliminary Outcomes

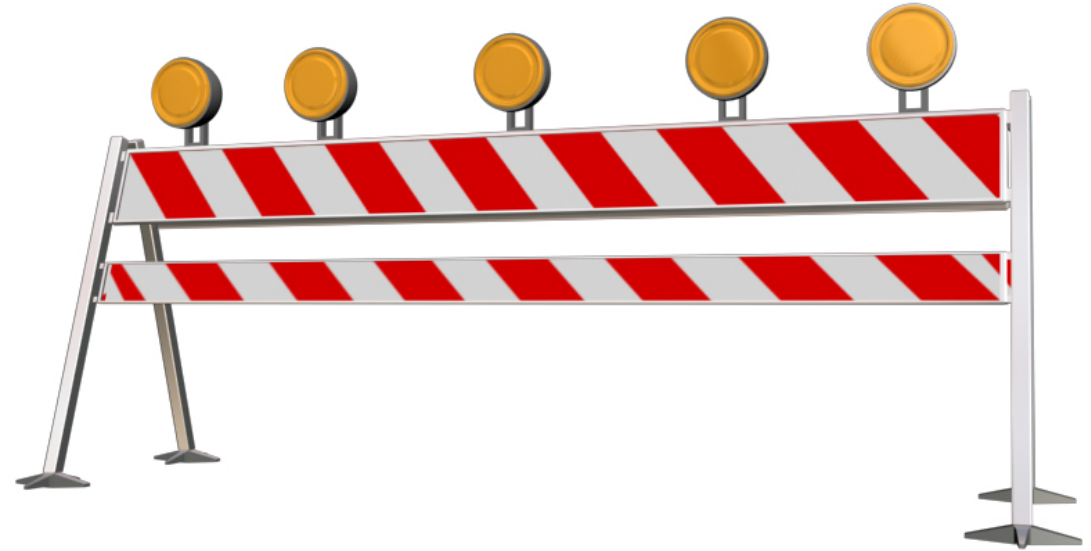
- N=6 completed
 - Mean HbA1c 8.1 → 7.2
 - Average reduction of 0.88
 - Changes > 0.5% considered clinically significant

Patient Confidence Scores



Challenges

- Competing priorities
- Limited resources
- Tech
- Adaptations
- On-site management
- Sustainability



Moving Forward

- Practice-based research checklist
- Community health workers?
- Important to collect implementation data

Audience Q&A / Brainstorming

- Health coaching in primary care:
 - Who can do it? Clinicians, nursing staff, or paraprofessionals
 - How does it work best? Universal or population health approaches

Session Survey

Use the CFHA mobile app to complete the survey/evaluation for this session.



Join us next year in Philadelphia, Pennsylvania! Thank you!