QI Project: Assessing motivation and readiness to change within an interdisciplinary weight management program for outpatient internal medicine.

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Introduction

- Strong Internal Medicine Lifestyle Group involves multidisciplinary team supporting patients' weight management efforts.
- Program structure: patients meet with BH team member, if admitted, patient is scheduled for additional individual visits (up to 8 visits) with other team members; multimedia visits (Zoom, phone, in person).
- PROJECT AIM: assess benefits of incorporating a BH provider as the first patient contact and if a restructured clinical pathway would be effective at reducing patient weight.

First Visit with BH team member



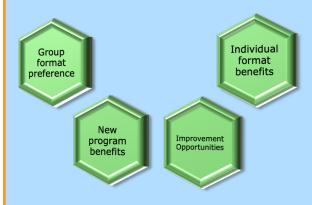
Method

- Anonymous SurveyMonkey sent to SIM Lifestyle providers (n = 5)to assess perceptions and attitudes towards revised care pathway.
- 11 survey questions (7 open-ended with free text response) and 4 scaled questions.
- Data was analyzed and coded using Nvivo software, thematic analysis strategy.
- Additional data: # enrolled patients, # completed patients, weight lost, and quality of life (modified Q-LES-Q-SF).

Results/Themes

Response time averaged 6 min per survey. Questions were subdivided into grouped themes.

Program Change Themes (Q1,3,7):



Psych Fellow Specific Themes (Q4,5,6,11):





Patient Data Points

Total enrolled patients: 18

Left prior to program completion: 11

Redirected to PCP: 2

Completed: 7

Weight Lost: Average 10 lbs

Quality of Life change over time: QOL

increased by 7.07 points on average* (Range:

11-55 points)

Discussion

- Overall preference for group, notable benefits in restructured program.
- Future needs include further team-based communication and integration.
- BH is helpful and future involvement is needed.
- Measurable QOL increase and weight loss.
- Limitations include small sample size, uneven OOL data, and other methodological limitations.

Acknowledgements

Thank you to the internal medicine Lifestyle Group in AC 5 for their help and support on this project.

How comfortable do you feel
providing continued
motivation to patients? (R8)

How interested would you be in further integration of BH in this clinical pathway? (R10)

Avg: 3.5

How prepared do you feel to work with complicated weight-loss patients? (R9)

Avg: 3.25

How do you feel about the mixed media visits presented to patients?

(R2)

Avg: 2.6

Avg: 4

(Zoom, phone, in-person)

Score Range: 1-4; with higher scores indicating more favorable response based on the question asked.