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Dr. Carroll earned her medical degree from the University of Connecticut School of Medicine, Farmington, and completed her residency in Family Medicine at the University of Rochester, New York. She furthered her career in research with a fellowship at the National Research Service Award training program in Family Medicine at the University of Rochester. In 2013, she was appointed as a Diplomate in Family Medicine by the American Board of Family Medicine. Dr. Carroll's research has been supported by the American Academy of Family Physicians (AAFP) and the Massachusetts Academy of Family Physicians (MassAFP). She has been recognized for her research and teaching, earning awards for service, teaching, and research from the American Academy of Family Physicians (AAFP), MassAFP, and the University of Massachusetts Medical School. In 2017, she was inducted into the Massachusetts Academy of Family Physicians (MassAFP) Preceptor Hall of Fame.

Learning Objectives

1. Develop a curriculum and lesson plans for group visits with obese and/or overweight patients.
2. Lead a group visit with an understanding of effective methods for conducting a group visit to enhance learning of healthy behaviors by patients.
3. Organize office staff, document group visits for individual patients, and code group visits for billing insurers; transforming current office structure and systems to enable group visits.

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My Experience

Your Experience?

AES POLL QUESTION
Which of these statements are true?
A. >36.5% US adults are obese
B. >350,000 deaths per year due to poor nutrition and inactivity
C. Obesity is difficult to treat

• A
• B
• C
• D - A and B
• E - All of the above

Why Lead a Group Visit?
• Effective weight loss
• Chol/HDL ratios and a1c’s improve
• Patients learn healthy nutrition
• Patients change their behavior

• Masley et al, FPM. June 2000:33-37

Group visits are Fun
• Patients are happier
• Physicians are happier
• Doctor patient relationship is enhanced

Jaber et al, J Am Board Fam Med 2006;19:276-90

Patients and Doctors are Happier
Group visits are efficient and productive

• Meet with 10-20 patients in 2 hours
• Time to present and discuss complex information
• Time to listen carefully to patients’ experience and questions
• e/m code: 99213 and 99214

Select patients to recruit

• Recruit 25 patients (obesity, overweight, with or without related illnesses)
• Patient capacity to learn nutrition
• Patient capacity to implement lifestyle changes

Encourage your patients to attend

• Invitations at office visits
• Invitation letters
• Physician endorsement and encouragement

Choose a meeting space and time

• Where can you arrange a circle of chairs with 22 patients and the leaders?
• What time of day allows you and patients to meet weekly 3-4 times per month for 8-10 sessions?

Staffing

• Front desk and MA/nurse
• Co-leader: LICSW or psychologist with experience leading a group and facilitating lifestyle change

Group Visit Timing

• Allow 30 minutes for:
  – Check-in at front desk
  – MA/LPN to assess vital signs, meds, any problems requiring 1:1 with MD
  – Patients complete standard group visit questionnaire (to be scanned into EHR)
• Allow 90 min for meeting
• Allow 30 min for healthy snack and break
• 1:1 visits before group visit, during the break and after group visit.
Confidentiality and Payment forms, Questionnaires
- Confidentiality and HIPAA form
- Payment and consent form
- Standard visit questionnaire including:
  - HPI: Nutrition, Activity, Happy/Satisfied
  - ROS
  - Questions or concerns?
  - Tobacco, Alcohol, PHQ-2
  - Any medicine changes?
  - Medicine refills?

Documentation
- Questionnaires for e/m documentation and nutrition documentation (to be scanned)
- Vital signs
- Labs
- Medicines
- PMH, Problem list, allergies
- Standard text for note and plan
- Patient diagnoses and specific comments

Conducting First Group Visit
- Welcome
- Introductions of leaders and patients (name tags for everyone)
- Privacy, confidentiality,
- Co-payment, billing, responsibility for payment

First Group Visit (continued)
- Dyads for sharing health reasons for attending and health goals, past experience with weight loss, healthy nutrition
- Group discussion
- Presentation on simple white carbohydrates and balanced healthy plate
- Q&A
- Break and healthy snack (possible 1:1)

First Group Visit (continued)
- Presentation of basic information on insulin, sugar, insulin resistance, and diabetes; and simple white carbohydrates are metabolized just like sugar.
- Share experiences and Q&A
  - Food Rules by Michael Pollan
  - Review healthy and unhealthy food choices handout
  - Review balanced plate handout
  - Choose healthy complex carbohydrates, Identify and avoid/minimize simple white carbs
- Appreciation and encouragement, (reading or poem)

Sample Timetable for Group Visit
- Welcome and Introductions - 15 min
- Expectations group function and privacy, schedule of the series, handouts - 5 min
- Explain dyads - 2 min
- Dyads - 8 min
- Group discussion - 15 min
- Presentation - 10 min
- Q&A - 5 min
- Break - 20 min
- Presentation - 10 min
- Q&A and sharing experiences - 10 min
- Homework and handouts - 10 min
- Appreciation and encouragement - 2 min
Enhance Group Participation

- Listen to others and yourself without judgment
- Be open to whatever happens
- Tell participants to create an environment of support, listen to each other, share your own experience, try not to lecture or advise in response to someone else’s story
- Gratefulness for showing up, taking a risk and working together as a supportive group

Dyads

- Dyads allow everyone to speak and be heard
- Count off 1-2, 1-2, …
- 1’s speak, 2’s listen
- Speaker talks and listener offers full attention but doesn’t speak
- Speaker has 4 minutes to speak
- Roles reverse and listener speaks for 4 minutes

Dyads give participants active engagement for learning new concepts

Motivational Interviewing Style for Group Visits

- What is your understanding of why you are here?
- What are your long term goals? Why are they important to you?
- What are daily actions that can help you to your goal?
- What is your experience? What’s difficult? Helpful?

Motivational Interviewing Style (continued)

- How confident are you that you can accomplish a particular change?
- May I give you some information, a suggestion, or some help?
- Who has a comment about this question or topic?

Conducting subsequent group visits

- Greetings, leaders and participants introduce themselves.
- Present a key topic from last visit
  - Example: white carbs - what’s easy, what’s difficult?
- Form dyads - 4 minutes speaking followed by 4 minutes listening
- Group discussion
  - What was easy or successful? What was difficult, Q&A
  - White board to highlight key points or to park pending questions
- Presentation on nutrition or eating behaviors and situations
- Q&A, Discussion

Conducting subsequent group visits (continued)

- Break, healthy snacks, 1:1
- Presentation on disease and nutrition
- Q&A, discussion
- Homework and handouts, share recipes
- Appreciation and encouragement (reading or poem)
AES POLL QUESTION
Group Visits
a. Group visits are not covered by most health insurance
b. Dyads allow everyone to talk
c. Group visits allow exploration of complex concepts with simple language
d. Preparation is key
e. Group visits are fun for patients and physicians
Which is false?

Dx, Coding and billing
• Copays and deductibles
• Insurance coverage and group visits
• e/m codes: 99213, 99214

How Many Visits
• 10 sessions weekly followed by 6 monthly refreshers

Refreshers and repeat series
• Patients enjoy group visits and want to continue
• Repeating the series enhances learning

Enhance Healthy Eating
• Aspirations and goals
• Recognize unhealthy and healthy foods
• Label reading
• Healthy meal – balancing your plate
• Capacity for change and challenges to change
• Restaurants, fast food and family celebrations

Developing curriculum
• Food Rules by Michael Pollan
• Basic essential healthy nutrition information
• Basic eating behaviors
• Mediterranean Style Diet
• Water
• Activity and exercise for beginners
Nutrition Curriculum
• Simple white unhealthy carbohydrates
• Complex carbohydrates
• Protein portions, 3 meals per day
• Vegetables and fruits
• Healthy oils and fats
• Water
• Don’t drink calories (or artificial sweeteners)
• Healthy and unhealthy snacks

Portions
• Proteins: 4 oz, palm of hand, deck of cards
• Complex carbohydrates: palm of hand
• Vegetables: palm of hand
• Fruits: medium apple
• Water: 2 glasses per meal
• Healthy Oils: 1 tbsp. olive oil per day

AES POLL QUESTION
Nutrition Curriculum
a. All calories are equal
b. Small suppers are helpful
c. Breakfast with healthy proteins and healthy carbs promotes weight loss
d. Smoothies promote weight gain
e. Recognition of hunger being satisfied is more important than portions

Which is false?

Healthy eating behaviors
• Healthy plate components and amounts
• Breakfast>Lunch>Supper
• 2 glasses of water with each meal
• Accessible Healthy snacks when you need them

Healthy behaviors (continued)
• Assess your plate before starting
• Put down your fork between mouthfuls
• Taste each morsel of your food
• Consider stopping after each mouthful if you are not hungry
• Read labels

Weight Loss and Health
• Weight loss, healthy nutrition, or both
• Body Type

Long term change, choosing carefully one step at a time.
Label Reading

- Components (sugar, protein, fat, fiber)
- Ingredients
- Sugar synonyms
- White flour synonyms
- Unknown chemicals
- Would your Grandmother see this as food?

Read the Label, is this food?

Power protein fitness
nutrition breakfast bars

AES POLL QUESTION

Which of these are food?
A. Soy lecithin
B. Oats
C. Titanium dioxide
D. Whey protein concentrate
E. Malted barley and corn extract

A, B, C, D, E or F—all of the above

Exercise, activity

- Any activity is helpful
- Consider moderate activity 20 min per day, cumulative
- Minimum Ideal is 150 min/week
- IOM Ideal is 1 hour daily, very difficult for ordinary people 😞

Nutrition is much more helpful than exercise

Sleep

- Feeling rested in the morning = enough sleep
- When we are tired the metabolism slows down, we burn calories more slowly
- We eat sugar to wake us up [excess calories]

Mindful Eating

- Paying attention in a particular way
- In the present moment, to:
  - taste of food
  - level of hunger
  - level of fullness
  - social or family obligations
  - Health Goals
Practice Recommendations

• Organize your staff for group visits
• Recruit a co-leader
• Plan a standard note, a nutrition curriculum, develop supporting educational materials
• Recruit and encourage patients to participate
• Have some fun providing excellent patient care

Questions

Contact Information

• Len Finn Email: mehn.nwfm@gmail.com
• Website for documents, bibliography, topics and handouts: MindfulEatingHealthyNutrition.org
• Password for FMX participants: MEHNFMX2017

Bibliography – Group Visits

• Dreffer, Douglas. “Group Visits Hit the Road.” Family Practice Management. 2004 Sep;11(8):38-42.

Bibliography Healthy Food Choices

- Jacobs Jr, D. “A randomized controlled trial of dietary improvement for adults with major depression (the MINDS trial).” BMJ; 2007; 335: 123-34.
- “The End of Over-Eating” by David Kessler. 28 April 2009.
Simple white carbohydrate topics

- Healthy vs. unhealthy carbohydrates
- Sugar synonyms
- Shakes smoothies, fruit juice
- Energy bars, protein bars
- Food industry adds sugar to 74% of foods
- Sugar stimulation of the brain and sugar addiction

Artificial Sweeteners

- Artificial sweeteners cause weight gain by increasing gut microbes that promote weight gain

Nutrition topics

- Label reading
- Healthy plate: balance, portion size
- Fats
- Healthy oils: olive, avocado, almond
- Protein
- Fruits, veggies
- Healthy snacks and how to snack
- Water

Disease and nutrition topics

- Diabetes mellitus
- Insulin resistance
- Metabolic syndrome
- Fatty liver and high fructose corn syrup, glucose, weight gain
- Fatty liver, cirrhosis and liver cancer
- High blood pressure
- Coronary artery disease

Healthy eating topics

- Mindful eating
- Breakfast > lunch > supper
- Balanced plate
- Starvation
- Weight gain
- Drinking calories
- Portions, calories or satisfying hunger, satisfying fullness
- Mediterranean style and traditional diets