Submission Id: 5216

Title

Practice Members Perceptions of Weight Management in Primary Care

Priority 1 (Research Category)

Obesity, exercise and nutrition

Presenters

Jodi Summers Holtrop, PhD, MCHES, Qing Pan, PhD, Johnny Williams, MPH, Leigh Perreault, MD, Carlos Rodriguez, PhD, Mark Gritz, PhD

Abstract

Context: PATHWEIGH is a toolset embedded into the EPIC electronic health record to help primary care practices and their teams with providing weight management assistance to their patients. Objective: The objective of this portion of the study was to determine changes in practice members perceptions of weight management during the first year of intervention. Population studied: 16 primary care practices in one Colorado health system participated in year 1 of implementation. Participants were all practice members in these practices. Study design and analysis: Pre-post surveys (baseline and 12 months). Generalized estimating equations and Chi-square tests were used to assess changes pre to post. Instrument/Outcome Measures: Survey including demographics and background; implementation climate for weight management; work satisfaction and burnout; practice culture; perceptions of weight management, confidence, effectiveness and importance; and number and type of weight management services provided. Results: Response rates were 63% and 44%. Unadjusted analyses found no significant changes in importance of providing weight management, confidence in providing weight management or perception of effectiveness. In a multivariable model adjusted for respondent age, gender, and years of experience, the mean number of services provided by clinicians was greater for males at post and for respondents working in practices with better implementation culture (all P<.05). At post, respondents reported more: attention on weight as a health concern (33%) and discussion about weight loss in other types of visits (33%). There were reductions in the proportion of concerns about providing weight management for "I don't have time in my schedule", "I don't feel like patients will be able to successfully change and lose weight", "We don't have weight management workflows set up in our practice", and "We don't have time to set up a new program" (all P<.05). Conclusions: These results indicate some improvements in attention to weight management in study practices, but not in personal perceptions of services provided, confidence and effectiveness. These results may have been due to overlapping but different individuals responding over time. Limitations include the study crossing the first year of the early COVID-19 pandemic in which there was a lot of employee turnover and periods of intervention stoppage due to priority given to acute visits over preventive visits such as weight loss.