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Title

Extent of Weight Management Services Provided in Health System Primary Care Practices

Priority 1 (Research Category)

Obesity, exercise and nutrition

Presenters

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Abstract

Context: Primary care practices can help patients address obesity through weight loss, however, there are many barriers to doing so. Objective: This study sought to examine current weight management services provided and factors associated with higher reported provision of services. Study Design and Analysis: One time survey. We used descriptive statistics to summarize responses and linear regression with generalized estimating equations to assess the association between the clinician characteristics and the amount of weight management services provided. Setting/Population: Clinicians in 18 diverse primary care health system practices in Colorado. Instrument/Outcome measures: Survey assessing 19 weight management services (e.g. identifying obesity, educating, prescribing medications, etc.) to assess the amount and type of weight loss assistance provided and other factors that may be important. Results: The overall response rate was 65% (257/397). Of respondents, 28% were clinicians, 3% other providers, 47% clinical staff, and 21% administrative staff. On average, clinicians reported performing 70% (IQR: 60%-80%) of the services and when grouped into minimal, basic, and extensive types of services, the clinicians on average performed 87%, 78%, and 69% of them respectively. Factors associated with performing more services included perception of overall better practice culture (more team-ness, less chaos, more change culture) and perception of weight management implementation climate (support for, recognition and expectation to support weight loss) ($p < 0.05$). Demographics, satisfaction with the practice's provision of weight loss services, importance of providing weight management, and clinician-specific joy at work and level of burnout were not associated with the number of services performed. Ninety-six percent of clinicians indicated interest in learning more about weight management, especially recommendations about diet and eating plans and organizing workflows to accommodate weight management. Conclusions: Practice-associated factors such as culture and implementation climate may be worth examining to understanding how to implement weight management in primary care. These data add to the growing knowledge base about overcoming challenges to address obesity in the US.