



# Guelph Family Health Team

**Get FHT**: A healthy lifestyles program

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# Presentation Agenda

- Metabolic syndrome definition
- Overview of Get FHT structure and process
- Role description of HCP's
- Additional services available
- Outcomes from Get FHT
- Success stories
- Challenges
- Future directions
- Key messages



# Background

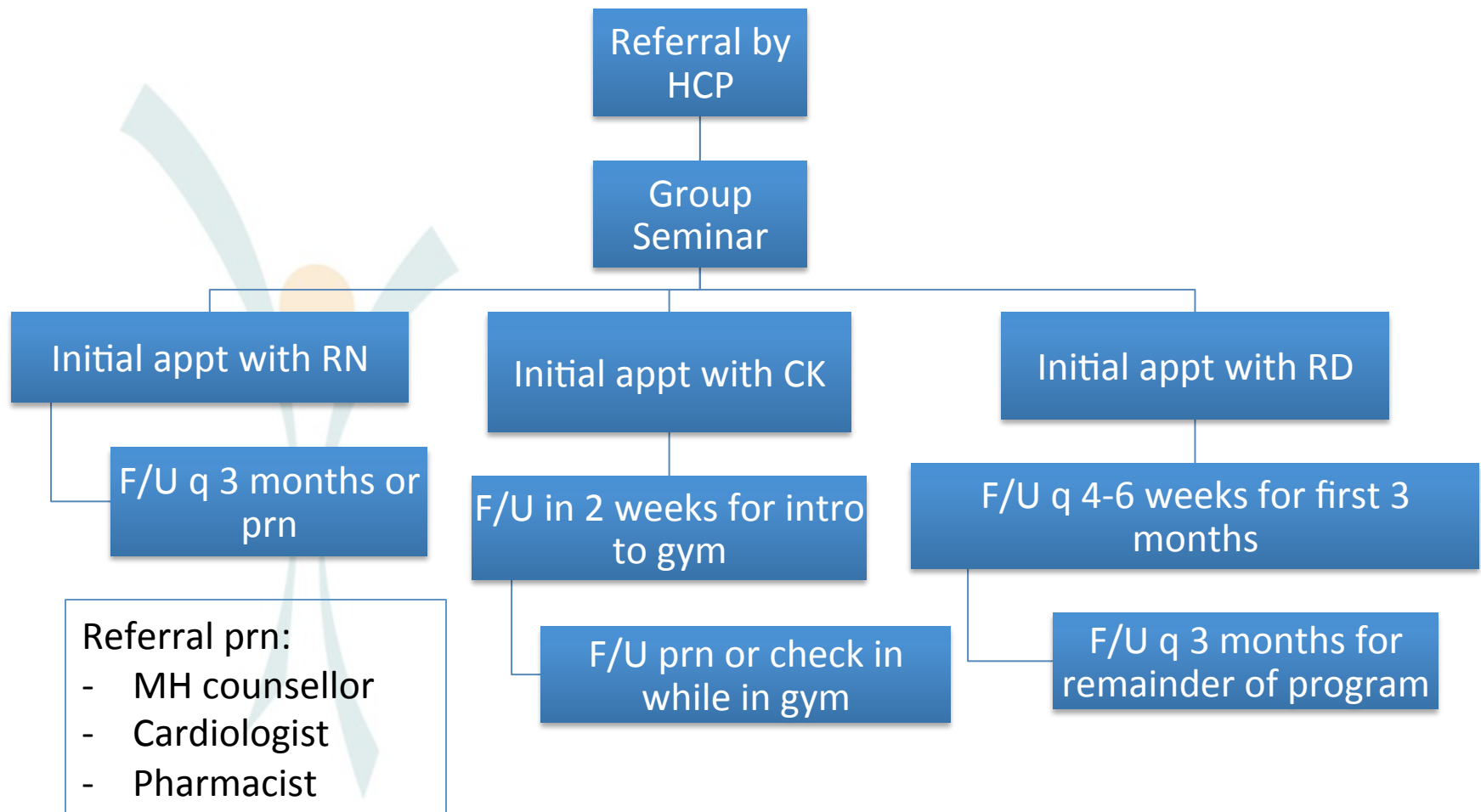
- Metabolic Syndrome
  - Refers to a constellation of conditions that increases a persons risk of diabetes and heart disease
  - IDF Criteria:
    - increased waist circumference plus two of the following:
      - elevated serum TGs
      - elevated blood pressure
      - decreased HDL
      - increased fbs or established T2DM
  - Affects approximately 1 in 5 Canadians



# Process

- Get FHT: Overview
  - Multidisciplinary approach: registered nurse, registered dietitian, certified kinesiologist
  - One year time commitment
  - Group education, 1:1 appointments
  - Motivational interviewing
  - Emphasize positive lifestyle changes and SMART goal setting to improve risk factors
  - Pharmacological recommendations made to MD/NP as needed

# Program Process



# Additional Services

- Additional services available to clients
  - Cardiologist, exercise stress test
  - Mental health counselor
  - Smoking cessation 6 week program
  - Free nicotine replacement therapy
  - Partnership with the YMCA: walking groups and intro to gym, discounted memberships
  - Grocery store tours and cooking classes
  - Pharmacist



# Conversation Maps

- Used in group seminars for the past 2 years
- Goal: actively engage participants with the information they learn and help them make workable plans for achieving their personal health goals
  - Face to face interactions
  - Visuals and education tools
  - Interactive conversations
  - Participants share personal experiences and knowledge



# Role of the Registered Nurse

- Initial Assessment:
  - Metabolic syndrome risk assessment
  - Review of past and current health concerns
  - Current medication review
- Continuous follow up with blood work every 3-6 months through Medical Directives
- Change management support: reviewing and revising patient progress and SMART goals along the continuum
- Evidence based education and management recommendations after allowing 3-6 months for lifestyle changes if possible



# Role of the Certified Kinesiologist

- Initial assessment
  - Body composition
  - Musculoskeletal and functional assessment
  - Risk stratification
- Develop individualized exercise plan
- Referral to cardiologist and interpretation of stress test
- Supervise exercise sessions at onsite fitness teaching room
- Facilitate group exercise sessions at YMCA

# Fitness Area



# Role of the Registered Dietitian

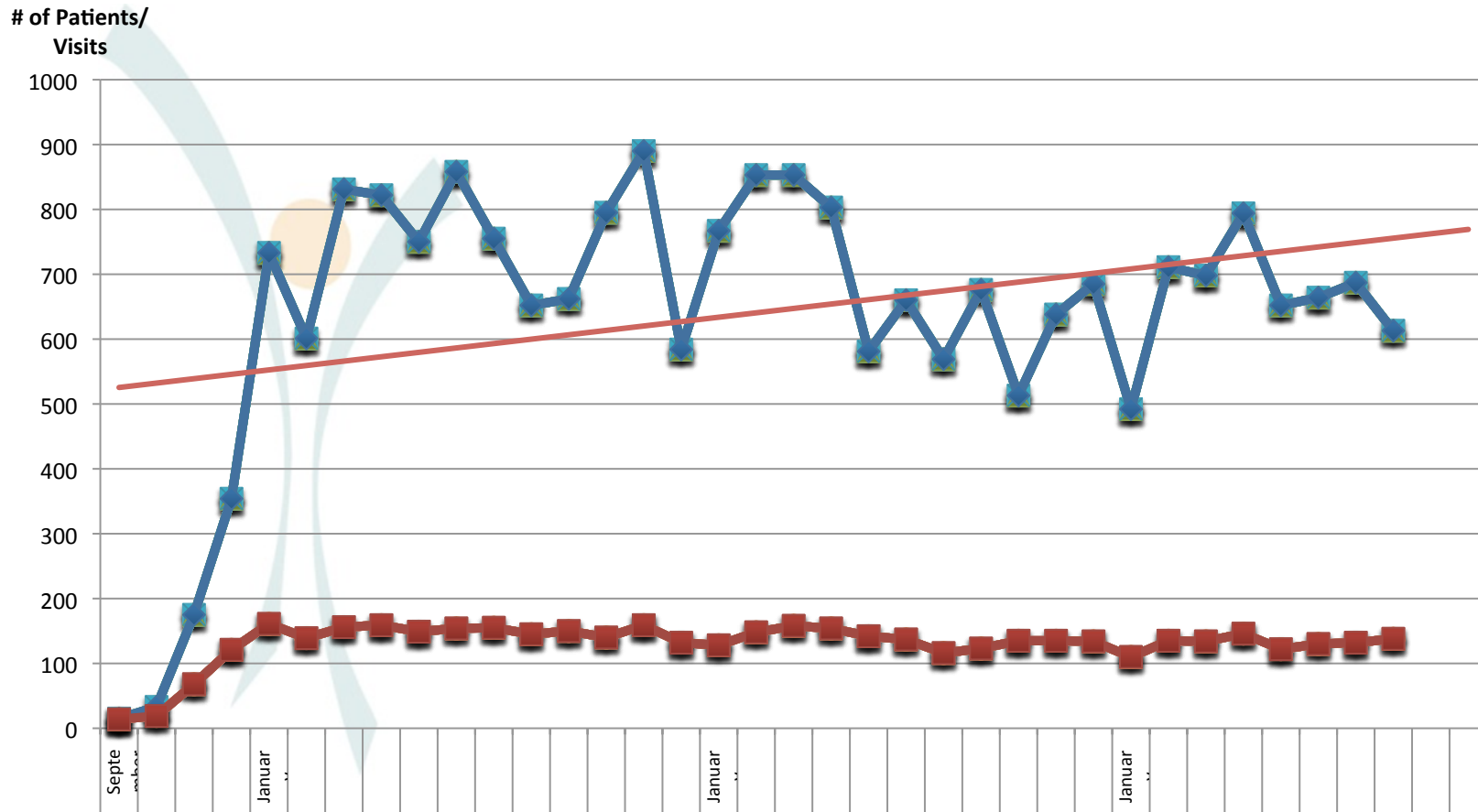
- Complete nutrition assessment
- Education on relationship between metabolic syndrome and nutrition
- Work with client to develop nutrition plan and assist client with SMART goal setting
- Resources and tools: carb counting, online food journals, portion sizes and recommended number of servings per day, label reading, recipe sharing



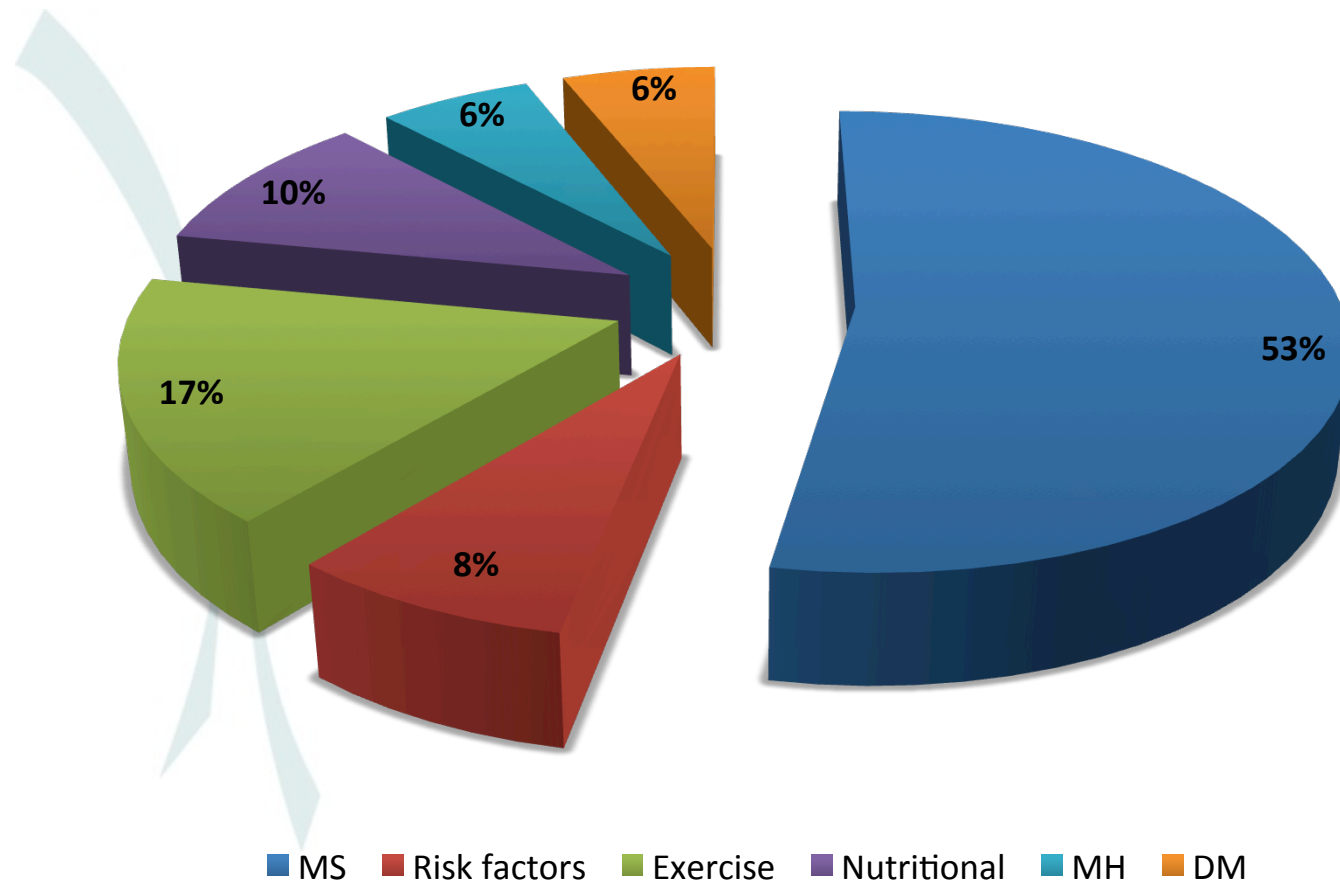
Measure	Target	Pre	3 Month	6 month	9 Month	1 year
Date:						
Waist Circumference	≤94cm (men) ≤80cm (women)					
Fasting blood sugars	<5.6mmol/L					
HbA1C	<0.07					
BP (average of 3)	140/90mmHg Or 130/80mmHg					
Total Cholesterol	<4.6mmol/L					
HDL (Good)	>1.03mmol/L (men) >1.29mmol/L (women)					
LDL (Bad)	Moderate Risk <3.5mmol/L	High Risk <2.0mmol/L				
TC/HDL- C Ratio	Moderate Risk <5.0mmol/L	High Risk <4.0mmol/L				
Triglycerides	Moderate Risk <1.7mmol/L	High Risk <1.5mmol/L				
Smoking	None					
Weight						
BMI	18.5-24.9					
Body fat %						
Fat Mass						
Exercise (Frequency)	5 days/week					
Exercise (Duration)	30 minutes/day					
Target Heart Rate						

# Monthly Distinct Patients and Visits

IMS Data Sept 2009-July 2012



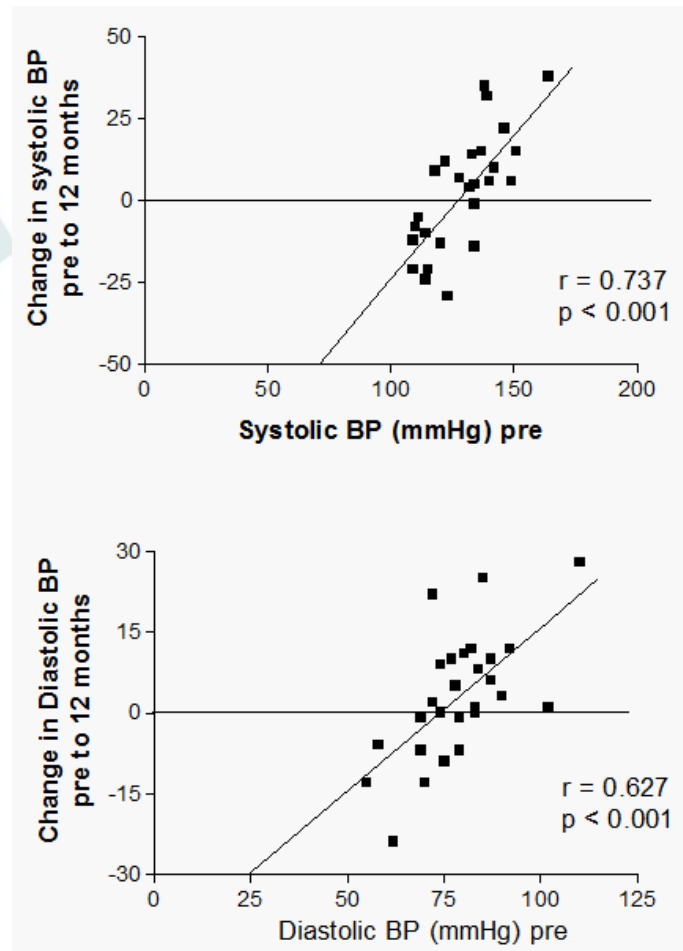
# Case Load by Diagnosis



# Data analysis

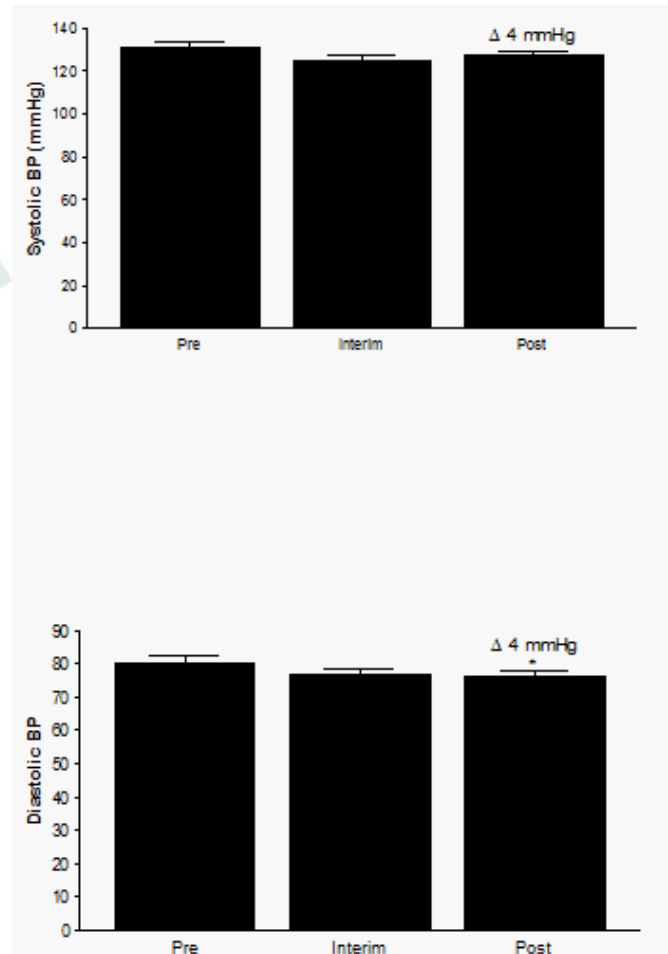
- Data are reported as average  $\pm$  SEM
- Repeated measures ANOVA was only done on patients who had a pre-value, an interim value (3 or 6 months) and a post value (9 or 12 months)
- Tukey's post hoc analyses were done when significance was attained to determine the source of the significance
- Correlational analyses was only done on patients who had pre and post (12 months) values

# Relationship between starting Systolic and Diastolic BP and change over course of the program

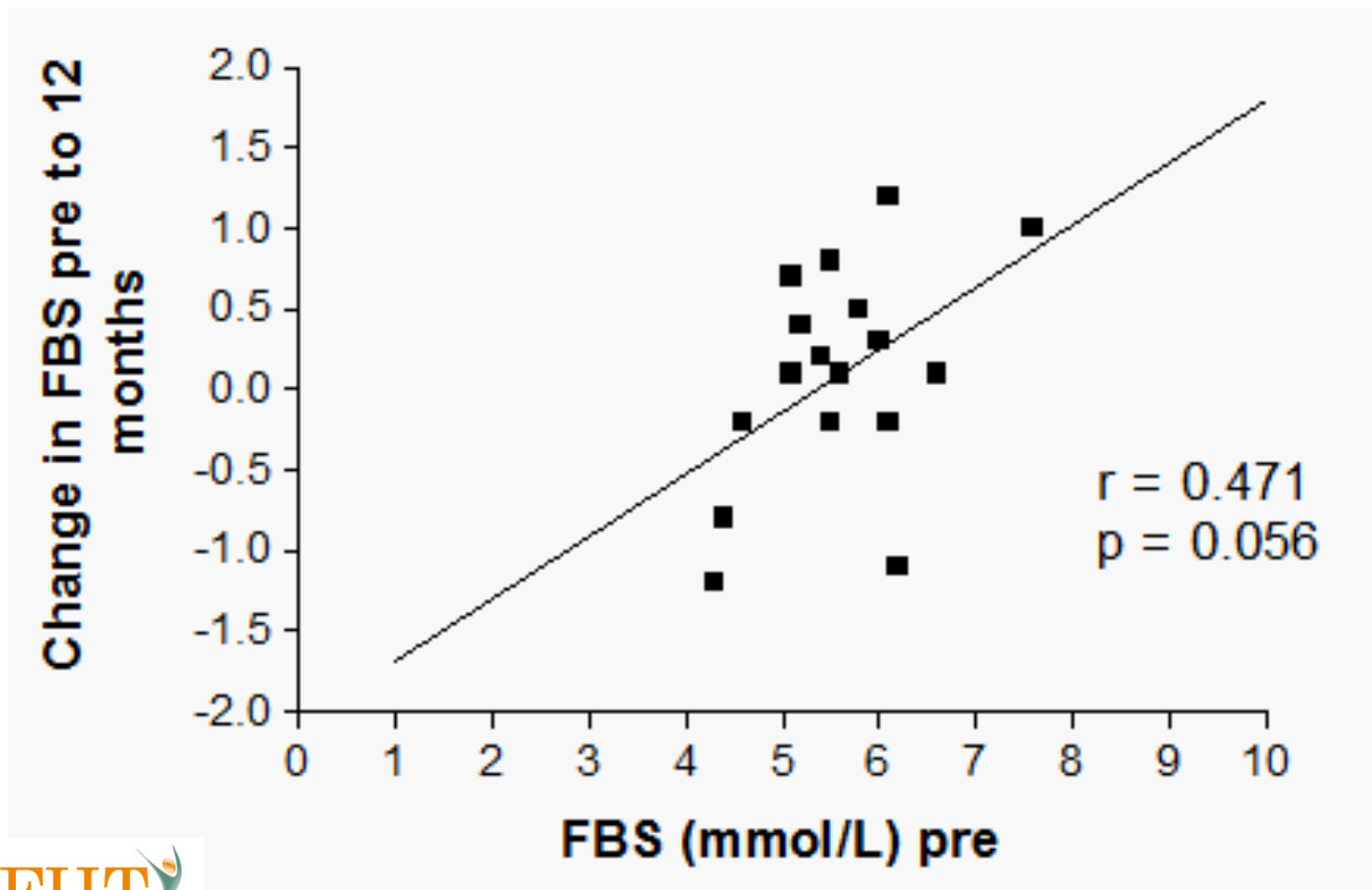




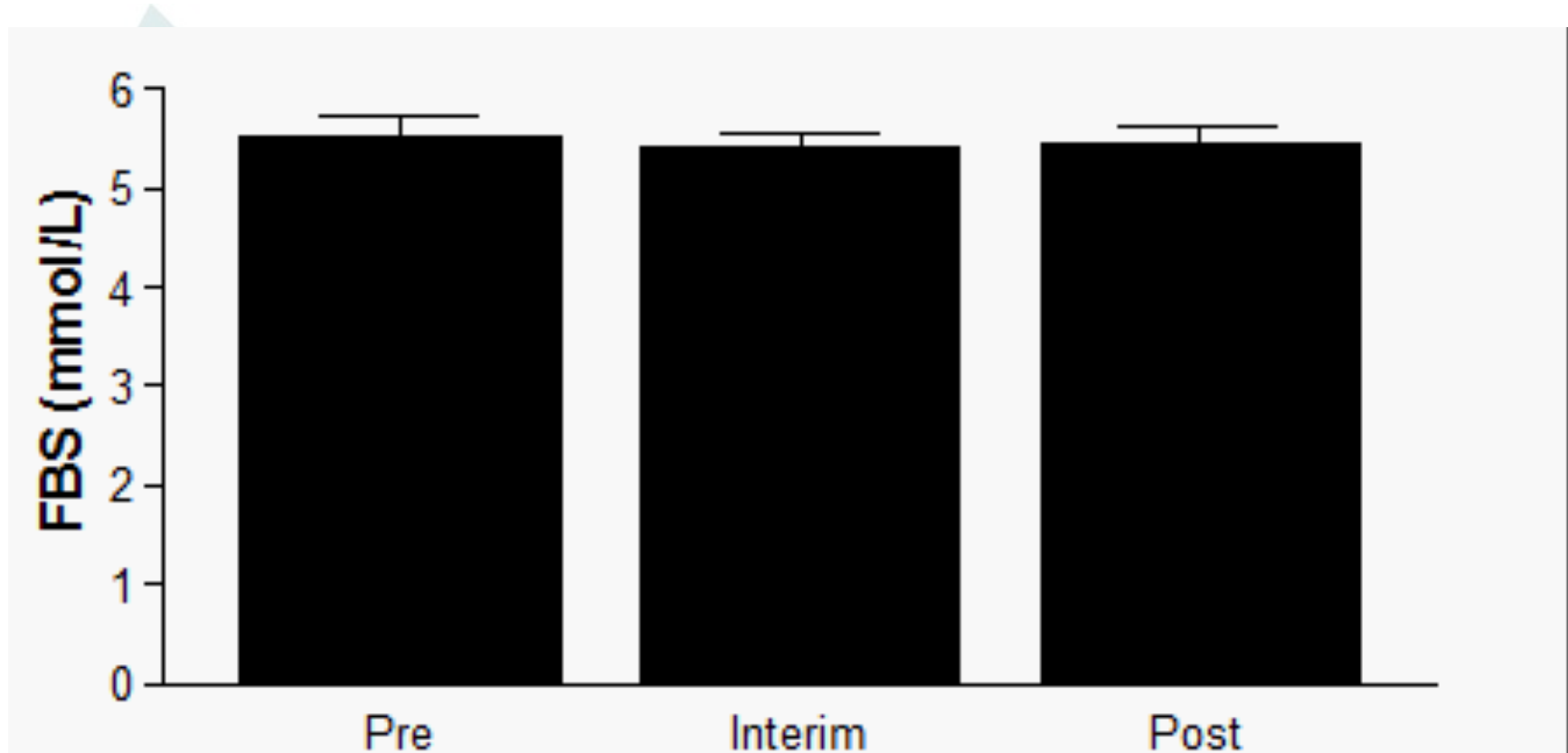
# Improvement in Systolic and Diastolic Blood Pressure



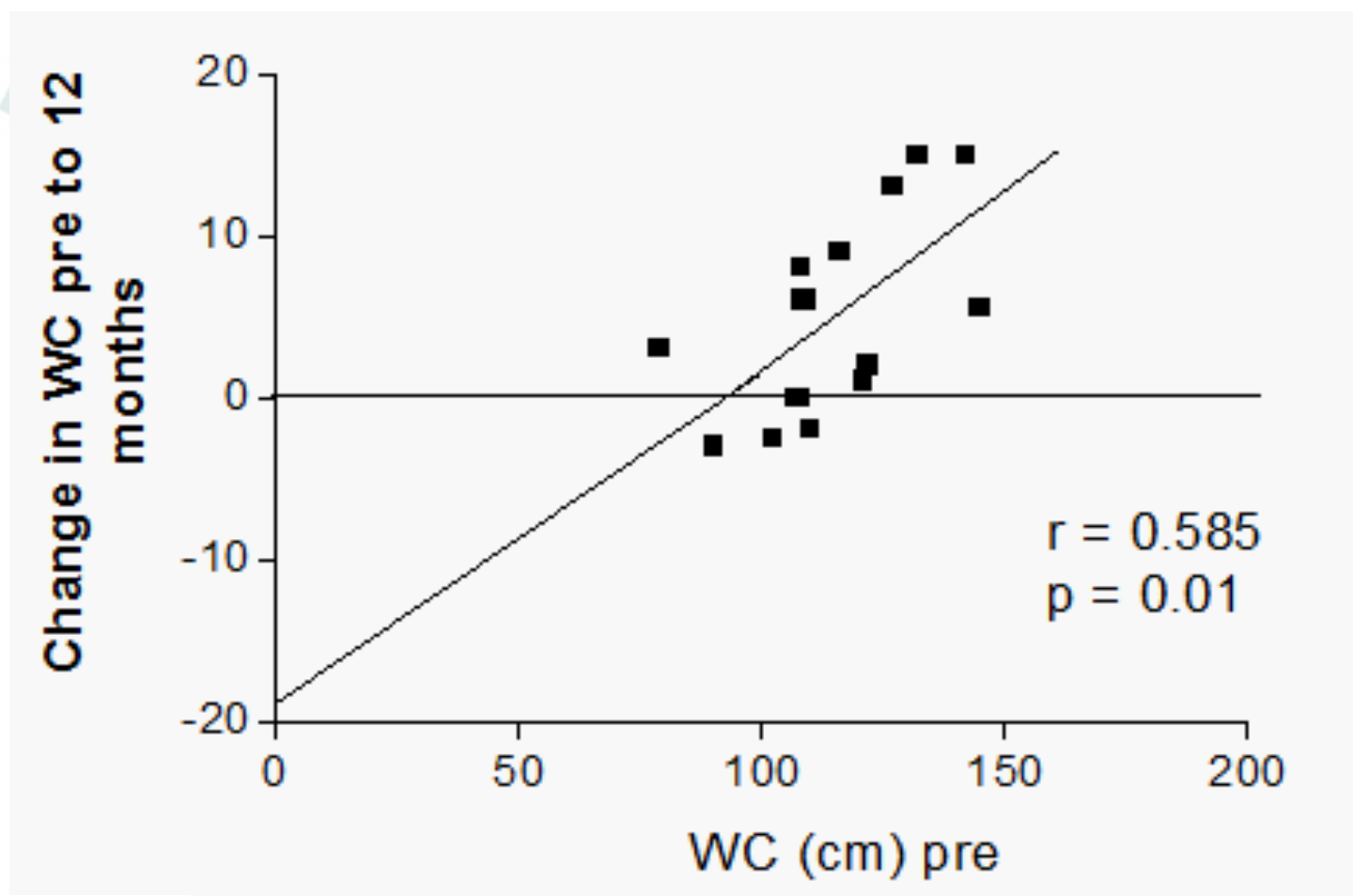
# Relationship between the starting FBS and change over the course of the program



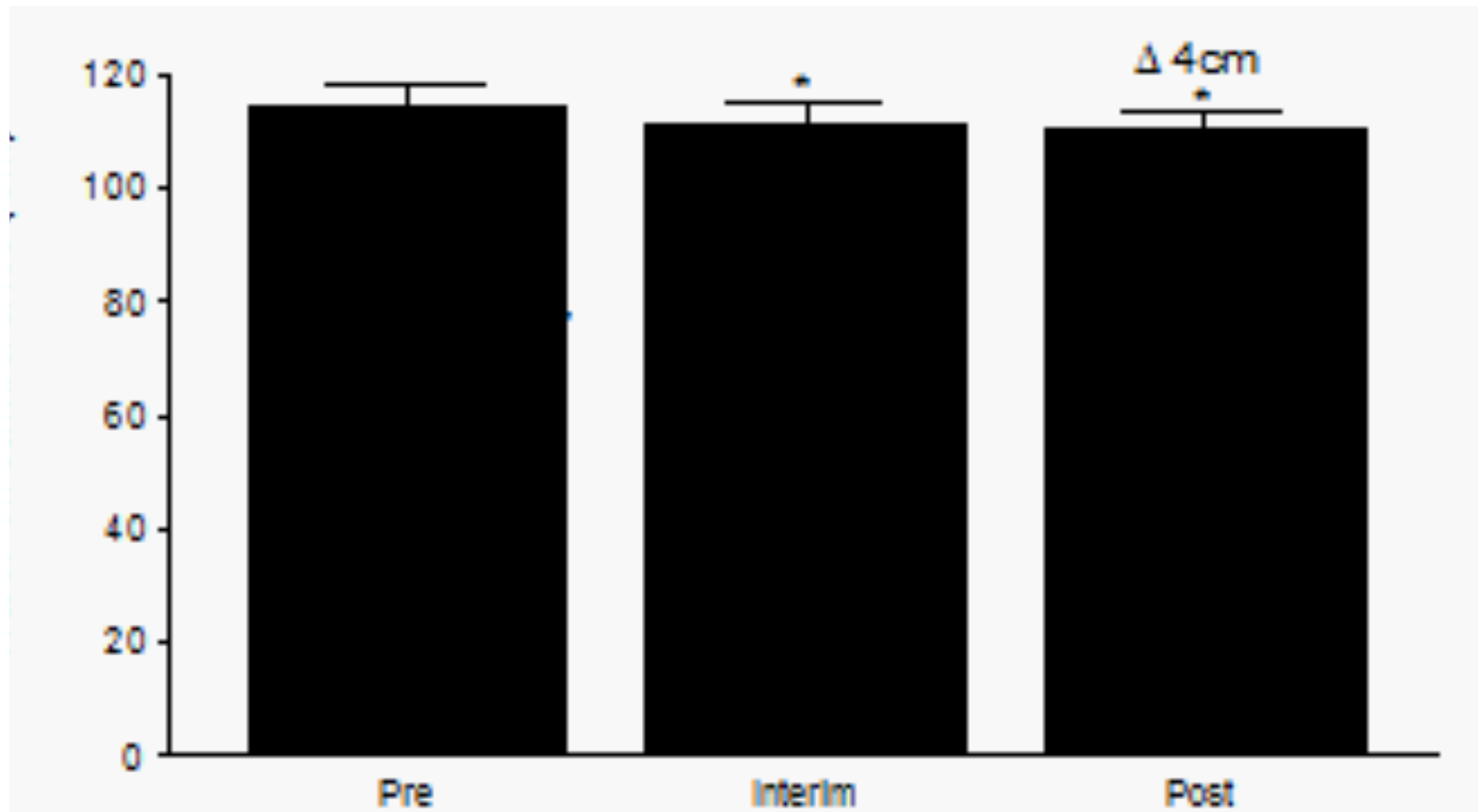
# Fasting Blood Sugar



# Relationship between starting WC and change over the course of the program



# Improvement in Waist Circumference



# Success Story #1

Prior to Get FHT:

- MB: 59 y.o female, abdominal obesity, elevated chol, normal bp, normal bg
- Recently widowed and adjusting to living alone
- Husband did all of the cooking. MB had been eating Hungry Man dinners most nights, did not like to cook
- Nervous to exercise → had recently broken wrist when walking in the snow. Had been hit by a car while on her bike



# MB – Before and After

Marker	March 2011	December 2011
Waist Circumference	100 cm	84 cm
Total cholesterol	6.10	4.88
HDL	1.35	1.50
LDL	3.91	2.93
TC/HDL ratio	4.52	3.25
Triglycerides	1.85	1.00
Weight	170.2 lbs	138 lbs
Body fat %	41.6%	33.3%
Exercise	0 days/wk	3+ days/wk for 60+ min



# Success Story – DW

- “Prior to joining the Get FHT program I weighed 250 lbs and my waist was 57”. One year later I weighed in at 190 lbs and my waist measured 39”. 60 lbs and 20” sounds incredible but that was just hard work. What is incredible is the new lifestyle that I can enjoy for the rest of my life. Through education, exercise and working with the excellent staff at Dawson Road Medical Clinic, you too could have your dreams come true. Pick your goal and achieve!”





# Success Story – KO

Health Concern	Before	After
DM2 x 8 yrs	Rarely SMBG, fbs and A1c not in target, meter outdated	SMBG 3-4x/day, many readings in target
Smoking	At least 1 ppd	Attended 6 week smoking cessation class Participated in free NRT program
Nutrition	Unaware of connection between diet and glycemia Binge eating sweets	Carb counting at each meal Rarely binge eating Menu planning
Exercise	Walking limited due to FM	Getting out of house more, walking as much as possible
Attitude	Distrust of HCP, no desire to change	Strong relationship with team, takes initiative
Medical management	OHA's at max dose, completely opposed to insulin	Basal insulin started

# Challenges

- Patients needed more time!
  - Length of program was increased from 6 months to one year
- However... Time commitment challenging
  - Evening hours were added
  - 3 intro classes combined into two, eventually into one
- Decreased rate of referrals
  - Team visited each office to increase referrals
- But then... Increased rate of referrals
  - Program at capacity. Currently looking for ways to increase efficiency
- Difficult for some clients to access our gym
  - Partnerships- YMCA

# Future Directions

- Need to re-evaluate program on a yearly basis
- How to increase efficiency and effectiveness?
  - Develop algorithm for # of appts/pt based on low, medium or high risk?
  - Offer additional seminars on a variety of topics?
  - Be more strict with length of program?
  - Strict with referral criteria?
  - Health coaching workshops?
  - Stress need for patient self-management and goal setting?

# Key Messages

- Metabolic syndrome is increasing in Canada
- Drug expenditure in Canada: \$32 billion in 2011<sup>1</sup>
- Cost of heart disease and stroke: \$20.9 billion/year<sup>2</sup>
- Cost of diabetes: \$12.2 billion in 2010<sup>3</sup>
- Get FHT as an economical solution?
- Programs need to be patient centered, collaborative and encourage ownership of health
- Ongoing evaluation of Get FHT is needed to adapt to continuing challenges





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THANK YOU

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