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**Family Health Team**

*Better care, together.*

# **Group Medical Visits for CVD Risk Reduction in Family Practice:**

## **Getting Started**

**A Nurse, Dietitian, and Physician Collaboration**

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Hamilton Family Health Team

# Disclosure



The presenters perceives no conflict of interest with this presentation.

# Hamilton Family Health Team



## We Are:

- currently the largest Family Health Team in Ontario
- 150 family doctors at approximately 80 practices sites
- serving a population of over 280,000 people
- commitment to the team approach
- Includes:
  - 135 Nurses and Nurse Practitioners
  - 21 Registered Dietitians
  - 73 Mental Health Counselors
  - 22 psychiatrists
  - 10 pharmacists

# Today's Goal

At the end of this session, participants will be able to:

1. Describe a group medical visit approach for CVD risk reduction in family practice
2. Think about how you could use this approach in your practice
3. Access tools to start your own group visits

# Our Interprofessional Team



- ◆ RN CDE – Nurse – Tara Currie
- ◆ MD – Physician- Dr. Leo DiPaolo
- ◆ RD CDE – Dietitian- Michele MacDonald Werstuck



# Managing Lipids in Family Practice



How often in your day are you talking with your patients about managing hypertension or high cholesterol levels?



Do you hear yourself saying the same message over and over again to patients with similar conditions?

**Group Medical Visit may be your answer!**

# You May Want to Consider a Group Medical Visit if...



- Your patients are not achieving targets
- Your patients always have more questions than you can answer in one visit
- You have that one patient who is doing so well that you wish could rub off on your other patients
- You often hear yourself saying the same message to different patients over and over again

# Checkups by the Dozen



British Columbia experiments with checkups by the dozen

McLaren C. *CMAJ* 2008 Nov 18;179(11):1111-2.



# What is a Group Medical Visit (GMV) or Shared Medical Appointment (SMA)?



- Way of delivering care that allows patients to spend more time with their health care providers, get answers to their questions, share experiences with other adults with similar health conditions and become motivated to make changes in their self care behaviours.
- An efficient strategy for delivering care to a group of patients with similar conditions at the same time.

Impact BC, Guide to Group Visits.

# Benefits of Group Medical Visits (GMV)



## For patients:

Learn about their illness from peers

- Share experiences
- Support each other
- Build's patient confidence to make changes
- Supports patient self management

# Supporting Patient Self Management

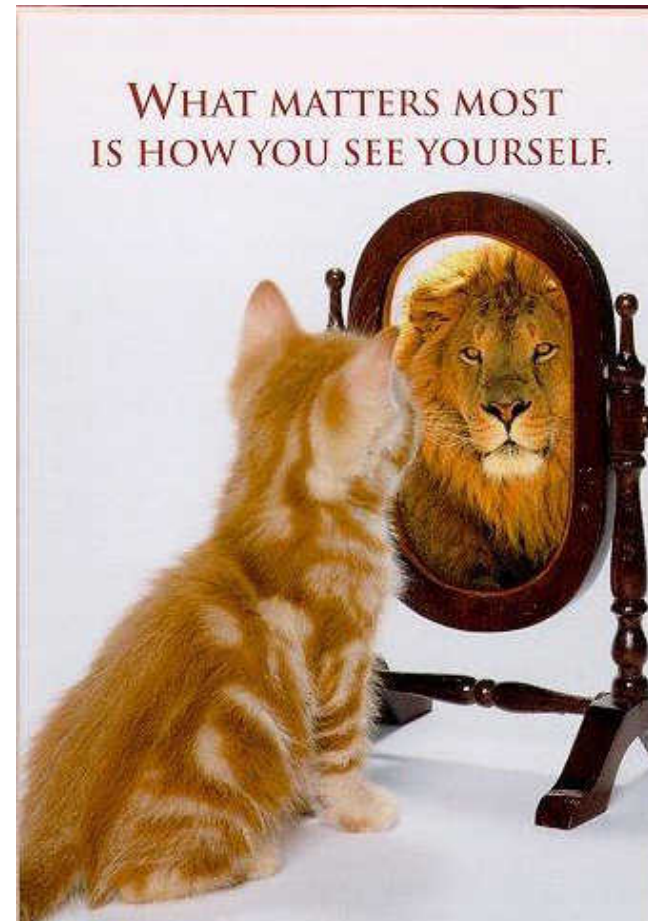


- With some basic knowledge about their condition and sharing their own experiences, patients can often start to identify areas that they can realistically change
- Goal is to increase patients' confidence in their ability to change their own health behaviours

# Building Confidence

- Self Efficacy:  
Confidence that one can carry out a behaviour necessary to reach a desired goal (Bandura)
- Successful achievement of a goal is more important than the goal itself

(Bodenheimer, T et al, JAMA 2002:288 (19)2469-2475). [www.practicesupport.ca](http://www.practicesupport.ca))



# Did you know...?



Adults can only retain:

- 10% of what they read
- 20% of what they hear
- 30% of what they see

With active involvement in their education, adults can retain more than 70% of the information they learn

Knowles MS., *The Adult Learner: A Neglected Species*. Houston: Gulf Publishing Company, 1990.

# Group Visits at Dr. DiPaolo's Office



- Currently using group medical visits facilitated by RD, RN and MD for a variety of medical conditions:
  - Cardiac risk reduction (Cholesterol/BP)
  - Osteoporosis
  - Diabetes : Quarterly Diabetes Follow ups  
Insulin Adjustment Group

# Group Medical Visits: How to Begin



- 1) Identify your target population
- 2) Determine your goals for that particular group
- 3) Preparation for GMV
- 4) Delivery of visit and documentation
- 5) Evaluation of visit
- 6) Follow up plan for future visits

# Step 1: Identifying Target Population

- Think about your practice
- What patients might benefit from a group medical visit?
- Decide on your group
  - chronic disease (dm, chol, bp, osteo)
  - prenatal, infant/toddlers, seniors
- Pull list from Electronic Medical Records (EMR) disease registries or billing codes
- Have physician/receptionist review list of potential patients



# Step 2: Goals



- Will vary with each specific group
  - Should be realistic
  - Patient centered
  - Improve self care management skills
  - Increase access to health care provider

# Goals for Cardiovascular Risk Reduction Group



To help patients improve their cholesterol and blood pressure readings through:

- Facilitated group activities to promote group discussion and knowledge sharing about healthy habits for your heart
  - Heart healthy, low salt eating
  - Daily activity
  - Smoking Cessation
- Focus on goal setting and sharing goals with others in the group



# Preparing for Your Group Medical Visit



- How would you find your patients?
  - Run EMR searches to identify your patient population
  - create registries for target population
- How would you invite them to the group?
  - Phone calls
  - Letters
  - Signs in the office

# Step 3: Preparing for Your Group Visit



- What resources will you need?
  - Do you have space?
  - Do you have a team member who could help coordinate, facilitate with you?
  - What content do you want to cover?
  - Do you need a presentation or prepared questions?
- What handouts will you need?
  - Confidentiality Form
  - Goal setting Form

# Step 4: Delivery of Visit

- Open Ended Questions
  - What can you eat to improve your cholesterol?
  - What foods should I avoid?
  - Does exercise help my cholesterol?



# CVD Risk Reduction Group



Will our patients talk to each other?

- Developed power point to start conversation
- Encourage group discussions with simple activities.
- Challenge isn't getting patients to start talking it's getting them to stop talking!

# SMART GOALS

- **Specific**
- **Measurable**
- **Action-Oriented**
- **Realistic**
- **Time-based**

“I will walk for 20 minutes  
for

three days each week.”

Confidence: 8 out of 10



# Delivery of Visit



- There are many styles.....
- Choose what will work for you and your patients



# Cardiovascular Risk Reduction Group Medical Visit



GMV for patients with LDL chol >4 and hypertension

- 2 hour session co-facilitated by RD + RN, once/month
  - Patients: self referred (waiting room poster), MD referred, invited by phone
  - Patients are given latest results to compare to targets
  - Questions are proposed to patients to encourage discussion, knowledge sharing
  - Activities are planned to develop skills (label reading, meal makeovers)
- Patients identify 1 small change they can make
- Evaluation of session
- Follow up in 3 months for lipids with labs 1 week prior
- MD reinforce goals, medical management

# Objectives for Cardiovascular Risk Reduction Group



By the end of this session, participants will be able to:

- Know their numbers (lipids and blood pressure) and their targets
- Identify foods high in saturated and trans fats and replace them with foods rich in monounsaturated and omega-3 fats
- Identify the super foods of heart health eg. Soluble fibers, plant sterols, nuts, fish and other omega-3 fats
- Use nutrition labels to select low sodium, heart healthy foods
- Decide upon a goal to work on and will share it with the group

# Patients Leave Visit With...



- Goal to work on for next 3 months
- Date for next group visit appointment
- Lab requisition for next group visit
- Motivation to make changes
- Sense of community

# After the Visit



- Documentation
  - Charts previewed before visit
  - Goals documented in patient's charts
- Debrief with team
  - What went well?
  - What could be improved?

# Cardiovascular Risk Reduction Group



- Increased patient satisfaction with this approach
- Increased awareness of heart healthy foods
- Set realistic goals for change
- Next steps....measuring specific outcomes eg) improved LDL, BP and smoking cessation

# Step 5: Evaluation...

## A work in progress



- Clinical outcomes
- Behavioural – adoption of health habits
- Self-efficacy- pt confidence in self care
- Patient and provider satisfaction
  - Provider evaluations
  - Patient evaluations (anonymous)

# Summary



Group visits are:

- Combination of interprofessional medical visit + adult learning approach to promote retention of knowledge
- Focus on enhancing patient self management to promote healthy behaviours and improve outcomes
- Can be uniquely designed for your practice

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**Thank you!**

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