Implementing the health@steps program for healthy living in family health teams

S. Cook, M. Stuckey, R. Petrella AFHTO Conference Oct 16, 2012

Introductions

- Sheila Cook
 - Knowledge Broker
 - info@healthesteps.ca
 - www.healthesteps.ca
- Melanie Stuckey
 - PhD Candidate
 - mstuckey@uwo.ca
 - @mistuckey
 - #STEPtest #healthesteps



Funding and Partner Acknowledgements















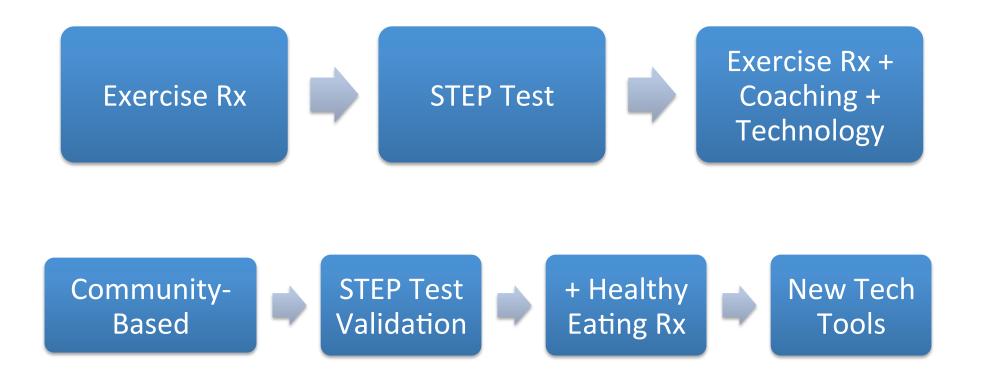


Poll

- 1. Exercise is important to chronic disease prevention and management.
- 2. I consistently talk with patients about the importance of exercise.
- 3. I provide coaching to patients about exercise and help them set SMART exercise goals.
- 4. I consistently give patients exercise prescriptions.



Program of Research & Knowledge Translation Overview



Why do we need exercise counselling in primary care?

 Physical activity is effective in chronic disease management and prevention.

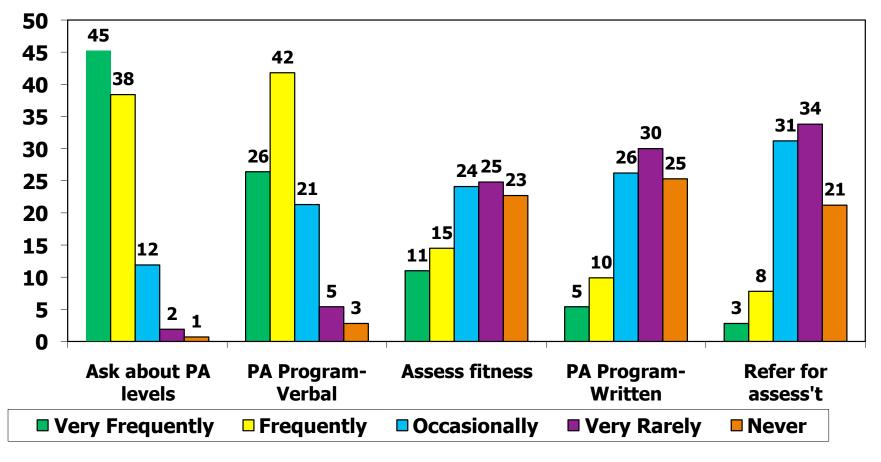
- U.S. Preventive Task Force recommendation:
 - ALL patients should receive activity advice from their family physician.
 - Tailored to lifestyle and health status.

Harris et al (1989) JAMA 261(24): 3590-98



Exercise Counselling in Primary Care





Petrella et al. Am J Prev Med, 2005



Barriers to exercise counselling in primary care

- Counselling skills/confidence
- Perceived ineffectiveness
- Organizational support
- Reimbursement
- Materials/tools
- Time

Marcus et al (1995), Med Exerc Nutr Health, 4:325-34 Petrella and Wight (2000), Arc Fam Med 9:339-44



Step Test and Exercise Prescription (STEP™)

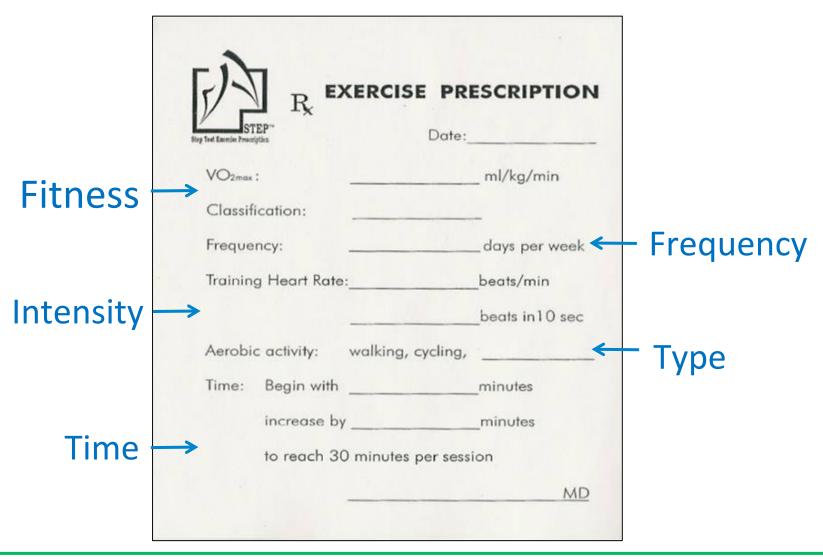


- 20x at a normal pace
- Calculate VO_{2max}
 - Age
 - Sex
 - Body Weight
 - Time to complete test
 - Post-test HR

Petrella and Wight (2000), Arc Fam Med 9:339-44



Exercise Prescription





Results

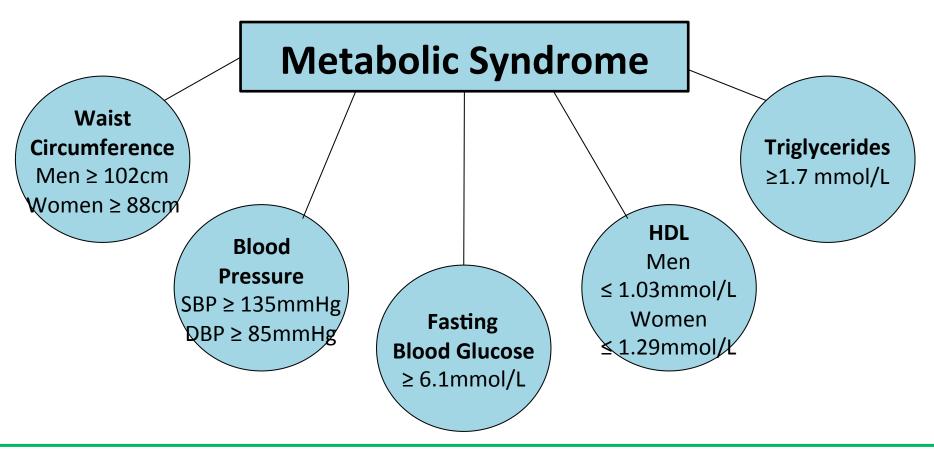
Health Measure	Post-STEP™
Fitness	个7-18%
Weight	↓ (BMI+WC)
Blood Pressure	\downarrow
Blood Glucose	↓
Cholesterol	↓ (no change HDL)
Vascular	↓stiffness

Stuckey, Knight, Petrella (In Preparation)



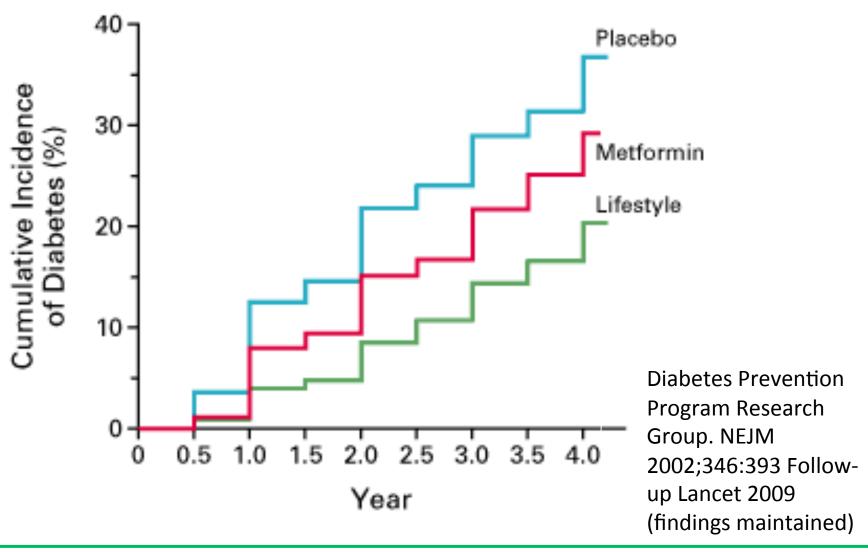
Discussion of STEP™ Results

 Greatest health improvements in at risk populations.





Discussion of STEP™ Results





STEP™ Limitations

- Physician time
 - Allied Healthcare Professionals

Validated in older adults

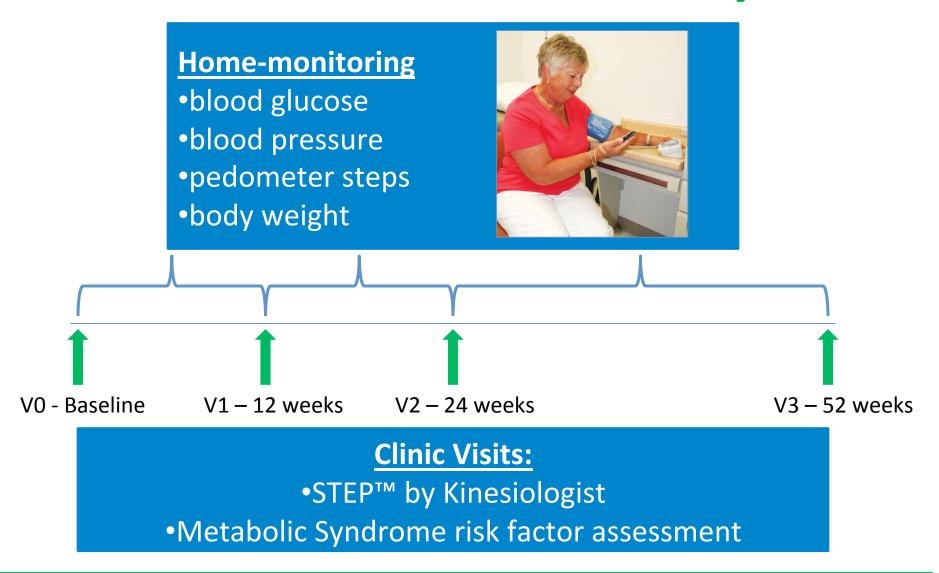
Petrella et al (2001) J Am Geriatr Soc 49:632-8

Validation for all adults 18y+ currently underway

- Heart Rate is needed in calculation
 - β-blockers



ARTEMIS Research Study





PRELIMINARY Results

Measure	Change after 1 yr
Fitness	↑
Waist Circumference	\downarrow
Blood Pressure	\downarrow
Blood Glucose	\iff
Triglycerides	\leftrightarrow
HDL	\leftrightarrow

Community Consultations

This is meat,
potatoes and
gravy country –
we know we
need to be
healthier, we
don't know how.

We made such good progress.

Provide us with on-going support

Ideas about technology and health. Very open.

Don't abandon us after the study is over.



Community Consultations

"Web site – one place to go for trusted information that takes rural living into account.

Make the program available to more people on a long-term basis.

I want my doctor to know what's going on. I liked being accountable to someone else.



Family Health Team Pilots

- ✓ Use existing staff and space resources
- ✓ Do not add to physician backpack
- ✓ Fit into existing workflow as much as possible
- ✓ As many participants as possible in 90-minutes
- ✓ Help us identify patients at risk and support referrals to allied health team
- ✓ Integrate into EMR but no special stamps

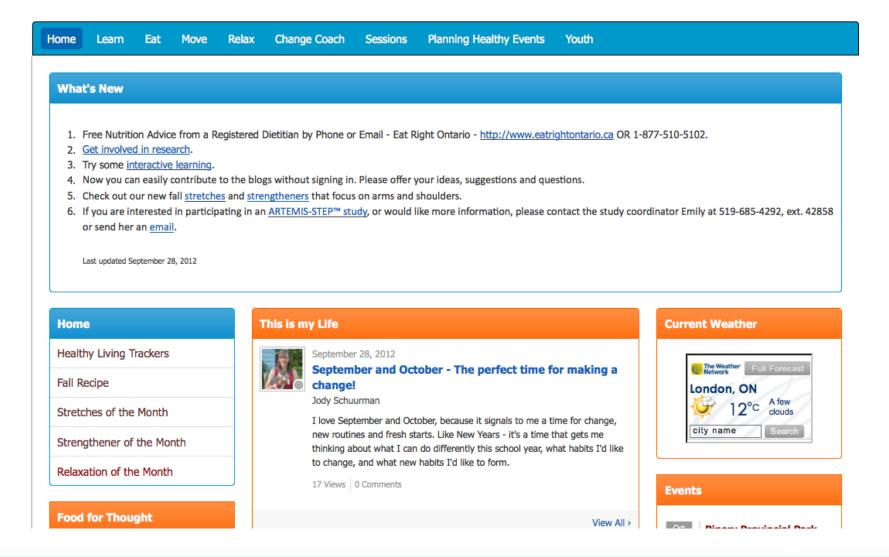


HealtheSteps Response

- FHT Program:
 - Supported training process for local HealtheSteps Coaches
 - Knowledge Broker works with team to develop processes (e.g. recruiting, scheduling, implementing, tracking)
 - 90-minute session facilitated by local coaches
 - Up to 8 participants per session



www.HealtheSteps.ca





FHT Program

- Quick HealtheSteps Check-Up
- STEP™ Test
- Individual Exercise Rx
- Teach how to take HR
- Healthy living resources
- Goal setting with support of coach and other participants
- Self-Directed exercise program
- Repeat every 1 -3 months



HealtheSteps™ Pilots



Large employer



Walk for Wellness Programs



Group of Youth



What we've learned

- Recruiting, referrals and reminders requires constant attention
 - Role of marketers is new for many
 - Tough to get men and families on board
- Takes time to build health literacy
 - How to take heart rate
 - How to set goals
 - Concept of self-management and accountability
- Participants like the positive environment, having a goal and tracking progress



Barriers to implementation	Facilitators to implementation
•Small teams with few	•Physician champion.
resources.	•Full health team participation.
 Full workloads and annual 	Promotional items
plans already established.	(pedometers, etc.)
 Concerned about risk of 	 Local champions to develop
STEP™.	trust relationships and refer to
 Physicians and Allied Health 	other organizations in the
referrals.	community.
Build "KT relationship".	 Knowledge broker support.
 Training and support for 	 Teams sharing tools and
coaches.	experiences.
•Weather.	



Feedback

"Highly recommended."

"My joints were telling me it was time to get active again."

"This is a once in a lifetime opportunity."



Future Research & KT

 Funding to pilot HealtheSteps in rural and remote communities across Canada

Include secure social networking

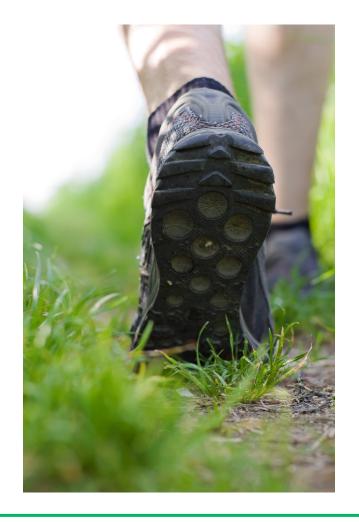
Healthy eating Rx

 Together with Dietitians of Canada - Develop, deploy two new healthy living apps



Future Research & KT

- Applying for funding:
 - Support the HealtheSteps Network
 - Evaluate effectiveness of different combinations of CDM strategies
 - Build new technology-based tools (e.g. web based tracker, enhanced GlucoGuide)
 - Expand to other chronic diseases and age groups
 - Collaborate with international partners





Participate in HealtheSteps™

- Interact at <u>www.healthesteps.ca</u>
- Join the HealtheSteps Network
- Currently working on a implementation kit for FHTs
- Continue to seek research and KT partners
- info@healthesteps.ca

