



Implementing Chronic Disease Prevention Clinical Best Practices

This collaborative project of the Minneapolis, Hennepin County and Bloomington health departments helps clinics implement evidence-based obesity and chronic disease prevention guidelines developed by the Institute for Clinical Systems Improvement (ICSI).

The Hennepin County SHAPE 2006-Adult Survey indicated:

- 54% of Hennepin County adults were either obese or overweight
- 43% of Hennepin County adults had one or more risk factors for chronic diseases
- 23% of obese Hennepin County adults who had complete physicals within the past year reported receiving weight loss advice from their health care provider
- 63% of overweight adults had never received weight loss advice from their health care provider

Mission

Through collaboration and partnership, assist selected clinics and health care systems incorporate and implement the ICSI Obesity and Primary Prevention of Chronic Disease guidelines into routine patient care including documenting, counseling and referring to community resources.

Vision

Chronic disease risk factors in Hennepin County will be reduced because all Hennepin County providers are:

- Assessing all patients at preventive and chronic disease visits for Body Mass Index (BMI), physical activity, nutrition and tobacco use/exposure
- Discussing assessment results with patients, and
- Referring patients to effective clinic- and community-based resources

---AND---

Other clinics/clinic systems will use our experiences and models to implement the guidelines in their organizations

Key Strategies

- Partner with multi-disciplinary clinic and clinic system teams to assess current practices, develop and implement clinic-specific action plans and evaluate results.
- Identify clinic- and community-based obesity and tobacco cessation programs and services for patient referrals.
- Clinic teams participate in ICSI Learning Collaborative.



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September 2010

Creating a Healthier Minneapolis
healthy eating + physical activity + smoke-free living

Minneapolis Department of Health and Family Support (MDHFS)
250 S. 4th St., Rm. 510, Minneapolis, MN 55415-1384 | www.ci.minneapolis.mn.us/dhfs

Current Participating Clinics and Clinic Systems

- Bloomington Lake Clinics (Minneapolis and Bloomington)
- Hennepin Care East (Minneapolis) and Hennepin Care North (Brooklyn Center)
- Neighborhood HealthSource (Fremont, Central and Sheridan Clinics)
- Neighborhood Involvement Program
- Park Nicollet clinic system (initial pilot at Minneapolis site)
- Phillips Neighborhood Clinic
- The People's Center Medical Clinic

Health Care Work Group

An advisory Health Care Work Group with representatives from clinics, ICSI, the MN Department of Health, MN health plans, and the University of MN provides feedback and guidance on the work, and develops broader strategies to maximize the projects' impact and sustainability.

Baseline Assessment Results

In May-July 2010 partnering clinics completed some or all of the following activities as part of baseline data collection: clinic policy assessments (7 clinics), staff/provider surveys (9 clinics), chart audits (6 clinics). Some key findings are:

- While all clinics had policies in-place related to some guideline components, mechanisms for putting policies into practice and insuring adherence are needed in most guideline areas.
- Most clinics lacked policies for referral to community resources for obesity prevention and management.
- Provider survey respondents reported that they screen a majority of patients for chronic disease risk factors. Specifically, 88% screened for tobacco use, 73% for alcohol use, and 70% for obesity. However, only 30% of providers asked or screened all or most patients for exposure to secondhand smoke.
- Only 51% of responding providers advised or counseled all or most patients on obesity risk factors.
- For tobacco use, 61% of responding providers assisted or referred, and 55% followed-up on all or most at-risk patients.
- For obesity, 27% of responding providers assisted or referred, and 38% followed-up on all or most at-risk patients.

Contact Information

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