

Staff/Provider Survey

Implementation of the Institute for Clinical Systems Improvement (ICSI) Obesity and Chronic Disease Prevention Guidelines

Notice on Data Privacy

Purpose

This survey is part of a project that is focused on promoting the implementation of primary prevention of chronic disease (PPCD) and obesity guidelines* within clinics and clinic systems in Hennepin County. It is funded by the State Health Improvement Program (SHIP). Hennepin County, Bloomington-Edina-Richfield, Minneapolis Department of Health and Family Support and local clinics are working collaboratively on this project. Results of this survey will help project partners to develop appropriate approaches to implementing the PPCD and obesity guidelines in clinics. Results will also be used to monitor overall and clinic-specific progress on this project.

Content of the survey

You will be asked about your perceptions and practices at work related to implementing the PPCD and obesity guidelines. The data includes two questions that could be used to identify an individual. They are questions about the name of your clinic and your role. The survey will not ask for your name. The name of the clinic in which you work allows us to determine how perceptions and practices at your clinic are similar or different from those in other participating clinics. Information about your role allows us to determine if different people with different roles are answering questions in different ways. If you feel uncomfortable answering any questions in the survey, simply skip or leave the question blank. Once all survey responses are received, data will be removed from Survey Monkey and stored in a password-protected file on a secure server. Only evaluators on this project will have access to individual, provider-level data stored on this server.

A report that summarizes responses from your clinic will be shared with the management and/or a small workgroup at your clinic. Participating clinics and their management will not receive individual, provider-level data, but the identity of respondents from clinics with small numbers of providers could be inferred. Any results that are shared with a broader audience such as the Minnesota Department of Health will be aggregated so that the names of individual clinics and providers cannot be identified.

Voluntary participation

Your participation in this survey is completely voluntary. If you decide not to complete the survey or decide not to respond to one or more of the questions, the only consequence is that your clinic will not benefit from having your input into the areas of the survey that you choose not to complete. Monitoring progress related to this project will also be difficult.

Contacts and Consent

For further details or questions related to this survey, please contact Jared Erdmann using the following information: Email: jared.erdmann@ci.minneapolis.mn.us; Phone: 612.673.2638; Address: 250 South 4th Street – Room 510, Minneapolis, MN 55415-1384

By proceeding, you acknowledge that you have read and understand the information outlined above and agree to supply some or all of the information requested within the survey

*Institute for Clinic Systems Improvement (ICSI) Health Care Guidelines are designed to assist clinicians by providing an analytical framework for the evaluation and treatment of patients. They are not intended to either replace a clinician's judgment or to establish a protocol for all patients with a particular condition. An ICSI Health Care Guideline rarely will establish the only approach to a problem.

Staff/Provider Survey

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1. Clinic name: _____ Date: ___/___/___

Please tell us about you:

2. I am a:

- Medical Director
- Clinic Manager
- Physician, Medical Doctor
- Physician Assistant
- Nurse Practitioner
- Registered Nurse
- Other: _____

ICSI guidelines are intended for primary care system redesign. These guidelines are evidence based documents of how to prevent or manage a particular symptom or disease for an individual patient under normal circumstances, taking into account the preferences of the patient or his or her family. Clinics from ICSI member organizations survey scientific literature and draft health care recommendations based on the best available evidence. These documents are subjected to an intensive review process that involves physicians and other health care professionals from ICSI member organizations before they are made available for general use. This survey focuses on components of the ICSI Obesity and Primary Prevention of Chronic Disease (PPCD) Guidelines. Please give us your insights about your awareness regarding practices related to these guidelines. Thank you for your help with this survey, all input and comments are valuable to us.

Section 1

Familiarity and Support for ICSI Guidelines	Strongly Agree	Agree	Disagree	Strongly Disagree
1. I am familiar with the ICSI guidelines for Primary Prevention of Chronic Disease (PPCD)				
2. I am familiar with the ICSI guidelines for Prevention and Management of Obesity				
3. I support improving clinical practices (e.g. increasing screening and counseling rates) related to primary prevention of chronic disease risk factors (e.g. high BMI, low physical activity, poor nutrition, tobacco use and alcohol use) in my clinic				
4. I support improving clinical practices (e.g. increasing screening and counseling rates) related to primary prevention and management of obesity in my clinic				

Section 2

Regarding patients being seen for preventive care and chronic medical conditions...	All Patients	Most Patients	Some Patients	None
1. I assess for overweight or obesity using BMI with...				
2. I assess frequency of engagement in physical activity with...				
3. I assess dietary practices with...				
4. I assess intensity of engagement in physical activity with...				
5. I assess secondhand smoke exposure with...				
6. I assess current tobacco use with...				
7. I assess alcohol use with...				
8. I acknowledge and positively reinforce healthy behaviors related to healthy eating, physical activity, tobacco use and alcohol use with...				

Comments:

Section 3

Regarding patients with identified risk for OBESITY...	All Patients	Most Patients	Some Patients	None
1. I discuss portion control with...				
2. I discuss fruit and vegetable intake with...				
3. I discuss avoidance of saturated and trans fats with...				
4. I assess readiness to change at-risk behavior or habits with...				
5. I negotiate mutually-agreed-upon healthy eating goals with...				
6. I negotiate mutually-agreed-upon physical activity goals with...				
7. I provide diet and nutrition education materials to...				
8. I provide physical activity education materials to...				
9. I make referrals to clinic-based and community-based nutrition/diet, exercise or weight management programs for...				
10. I follow-up on my referrals for...				

Comments:

Section 4

Regarding patients with excessive ALCOHOL USE...	All Patients	Most Patients	Some Patients	None
1. I assess readiness to change at-risk behavior or habits with...				
2. I negotiate mutually-agreed-upon alcohol reduction goals with...				
3. I provide alcohol education materials to...				
4. I make referrals to clinic-based and community-based alcohol reduction programs for...				
5. I follow-up on my referrals for...				

Comments:

Section 5

Regarding patients who are TOBACCO USERS...	All Patients	Most Patients	Some Patients	None
1. I assess readiness to change at-risk behavior or habits with...				
2. I negotiate mutually-agreed-upon tobacco reduction goals with...				
3. I provide tobacco cessation education materials to...				
4. I make referrals to clinic-based and community-based tobacco cessation programs (including, for example, the FAX referral system) for...				
5. Among patients who express interest, I discuss pharmacotherapy with...				
6. I follow-up on my referrals for...				

Comments:

Barriers

1. What barriers have you experienced while using clinical practices and/or guidelines that focus on reducing risk factors for chronic diseases in your practice? (Check all that apply)
- Complexity of guidelines
 - Lack of electronic medical records or charting practices that provide reminder systems or prompts based on the guidelines
 - Lack of sufficient clinician training
 - Low patient adherence to healthcare advice
 - Lack of effective strategies for changing patient behaviors
 - Time constraints
 - Staff/clinicians' resistance to change
 - Other: _____

Motivation

2. What would motivate you to use clinical practices and/or guidelines that focus on reducing risk factors for chronic diseases? (Check all that apply)
- Clear guidelines
 - Ease of implementation
 - A protocol or standard that outlines intervention and requires implementation
 - Endorsement of guidelines by a respected colleague
 - Evidence-based guidelines
 - Availability of reimbursement for following guideline activities
 - Training
 - Systems in place that remind and prompt implementation of guideline, such as reminder tools in the chart or prompts in an electronic medical record system
 - Leadership support
 - Prompts in clinic and exam rooms such as guideline-related logos on mugs, pens, or Post-it pads
 - Chart stickers indicating obesity, tobacco use, or alcohol use
 - Other: _____

Clinic-Based or Community-Based Resources

3. What barriers do you experience when referring patients to clinic-based or community-based resources? (Check all that apply.)
- Lack of quality community-based resources
 - Lack of awareness about community-based resources
 - Lack of time
 - Lack of a referral system or mechanism
 - Lack of someone to make the referral
 - Lack of a database or directory of clinic-based or community-based resources
 - Lack of resources that meet the needs of my patients
 - Other: _____

4. What can we do to assist you in referring at-risk patients to community-based resources? (Check all that apply.)

- Provide an algorithm to identify the at-risk patients
- Provide easy to use referral forms
- Provide a list or database of community-based resources
- Contribute to development of a follow-up system
- Facilitate a team effort by engaging other healthcare staff in the process (i.e. nurses, clerks, etc.)
- Provide information on clinic-based or community-based resources
- Develop a referral system or mechanism
- Other: _____

5. When you refer a patient to a clinic-based or community-based resource, how many options do you want to have available?

- Only 1 resource
- A list of 3 – 5 resources the patient can choose from
- A list of 5 or more resources the patient can choose from
- I want the patient to find the resource on their own
- Unsure

6. What types of resources are you most interested in referring patients to (choose up to 2 items)?

- Clinic based programs
- Reimbursable programs
- Community agencies, programs or classes
- Other: _____

Other Comments

7. What additional comments would you like to share with us? (Please feel free to use the back side of this page).

Thank you for assisting us with this important survey.