

Preventive Health Tools

The future of healthcare is going to be focused upon health and not simply upon excellent care of disease processes. Yet, the ideal of preserving and/or regaining of a healthy state of being is not as easy as it sounds. Often, patients do not see any immediate benefit in making a change which may or may not make a difference in their sense of well-being. Also, making a change in one's life style requires the hope that such change will make a difference. Many patients do not have hope. Many do not have the resources or mental or emotional capacity to make those changes. All of this complicates our realizing the promise of preventive care.

Typically, when we talk about "preventive health" we are talking about immunizations, screening and disease avoidance strategies. Another element of preventive health has to include [risk stratification](#). Evidenced-based medicine not only helps us understand what treatment methodologies work but also who needs the most aggressive treatment either in prevention or therapeutics. "Preventive health" also must include life-style changes by individuals.

Preventive health initiatives can be measured and they should be. But, if those measurements are going to make a difference, the results must be disclosed. In a recent conversation with the staff of the American Medical Association's Physician Consortium for Performance Improvement (PCPI) Department, SETMA addressed the "missing element" in quality measures. That missing element is a systematic and consistent auditing of a practice's and/or of a provider's performance on those quality measures.

As a result, SETMA has added a major new tool to our preventive health initiatives which is our [COGNOS Project](#). This will be described later in the Public Reporting Section of the site, but in summary it is the ability for SETMA to report internally to our providers and staff and externality to our patients and community how we are performing on over 300 quality-of-care metrics. SETMA's COGNOS Project involves the auditing of:

- What preventive measures a patient needs, before they are seen.
- What preventive measures a patient receives when they are seen.
- What preventive measures remain to be fulfilled.

This information will be reported to:

- The provider before and after a patient is seen.

- The patient before and after he/she is seen.
- The provider's colleagues.
- The provider's community and patients as an aggregate of the entire practice without patient or provider identification.

SETMA's first major effort in true preventive care stemmed from when we began developing disease management tools, it quickly became obvious that there were three life-style changes we wanted everyone to make. And, if a person were not ill, there also were three life-style changes we wanted them to make. The three were the same; we wanted everyone to:

- Lose Weight
- Exercise
- Stop Smoking

To confront one person with this need is easy, but how do you assure that everyone who is seen in a multi-specialty practice which sees 400-600 patients a day has these issues addressed? In his book, *The Fifth Discipline*, Peter Senge said, "The more complex a problem the more systemic the solution must be." Therefore, we designed the LESS Initiative and we audit our performance on it.

Today, SETMA's preventive health efforts involve the following components:

- LESS Initiative [T](#)
- Weight Loss [T](#)
- Exercise [T](#)
- CHF Exercise [T](#)
- Diabetes Exercise [T](#)
- Smoking Cessation [T](#)
- Hypertension Prevention Program [T](#)
- Diabetes Prevention Program [T](#)
- Aggressive immunization
- Aggressive Health Screening
- Aggressive Risk Stratification for diabetes, hypertension, cardiovascular disease and others.
- Auditing of HEDIS, PCPI, NQF, PQRS, NCQA quality-of-care measurement sets (these will be discussed under the [Public Reporting](#) and [Medical Home](#) Sections of this site).

Within these components, SETMA's patients are given:

- An assessment of their risk for developing diabetes and/or insulin resistance.
- A Weight Management Assessment which reports to the patient their BMI, BMR, Class of weight and strategies for increasing the BMR and decreasing weight.
- An Exercise Prescription which is personalized for each individual and which includes a recommendation for duration, frequency and intensity of exercise. We also have a prescription exercise specific for patients with diabetes which addresses the limitations of

exercise for the five major risk categories of diabetes. And, we also have an exercise prescription for patients with CHF and/or other limitations to activity.

- A smoking cessation strategy if they smoke or if they are exposed to environmental, second-hand or passive tobacco smoke.
- A disclosure of the preventive health quality measures SETMA tracks and whether or not those measures have been met in each patient's care.

We have already seen significant improvement in the life-style choices of our patients and in our treatment outcomes. We will continue to develop new preventive health tools.