



Innovative Use of the Omaha System at the Community Level

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Obesity is a Multifaceted Problem

- * Requires multifaceted interventions
 - * Individual Level
 - * Systems Level
 - * Schools
 - * Worksites
 - * Communities
 - * Health Care Settings
- * Can the Omaha System capture systems level interventions?

3 Standards

- * Institute for Clinical Systems Improvement (ICSI)
 - * Prevention and Management of Obesity Guideline
 - * Evidence-based practice
- * 5 As Systems-Level Framework
 - * **A**sk, **A**dvice, **A**ssess, **A**ssist, **A**rrange
 - * Glasgow, et al.
- * Omaha System
 - * Community level modifier – PHN practice
 - * Health care supervision problem
 - * Documentation of interventions
 - * Measurement of community level outcomes



Omaha System Problem

- * **Health Care Supervision**

- * Management of the health care treatment by health care providers.

- * Health Care Setting as Client Interpretation:

- * Management of the health care treatment by health care providers *via implementation of evidence-based guidelines.*

- * Sign/symptom:

- * inadequate treatment plan

Health Care Supervision Care Plan

Category	Target	Care Description Note followed by PHDoc Answer Group
Surv	Screening Procedures	Evidence-based guideline (EBG) knowledge and practice: organizational/clinician surveys, chart audits, action plan, progress reports, patient surveys, other ^{1,5}
TGC	Screening Procedures	EBG knowledge and practice: organizational/clinician surveys, chart audits, action plan, progress reports, patient surveys, other ^{1,5}
TGC	Wellness	EBG information/resources/tools: face-to-face, webinar, conference call, consult, resources, tools, other ^{2,4}
Surv	Behavior Modification	EBG readiness to change: organizational readiness to change, other ³
TGC	Behavior Modification	EBG organizational change: culture of change, action plan, progress reports, explore supports, address barriers, other ⁴
TGC	Other Community Resources	EBG community resources: collaborative, mini-grant, motivational interviewing, CDSMP, I CAN Prevent Diabetes, MNHelp.info, other ⁴
CM	Other Community Resources	EBG community resources: collaborative, mini-grant, motivational interviewing, CDSMP, I CAN Prevent Diabetes, MNHelp.info, other ⁴



Care Plan References

- * ICSI (2010). Obesity, Prevention and management of (mature adolescents and adults) (guideline). Retrieved from http://www.icsi.org/obesity/obesity_3398.html (p.18)
- * WHO (2004). Self-management support for chronic conditions using 5As. Retrieved from <http://www.who.int/diabetesactiononline/about/WHO%205A%20ppt.pdf>
- * Glasgow RE, Davis CL, Funnell MM, Beck A (2003). Implementing Practical Interventions to Support Chronic Illness Self-Management in Health Care Settings: Lessons Learned and Recommendations. *Joint Commission Journal on Quality and Safety*, 29(11):563-574.
- * Glasgow, R., Goldstein, M., Ockene, J., & Pronk, N. (2004). Translating what we have learned into practice. principles and hypotheses for interventions addressing multiple behaviors in primary care. *American Journal of Preventive Medicine*, 27(2 Suppl), 88-101. doi: 10.1016/j.amepre.2004.04.019, p. 94



Community

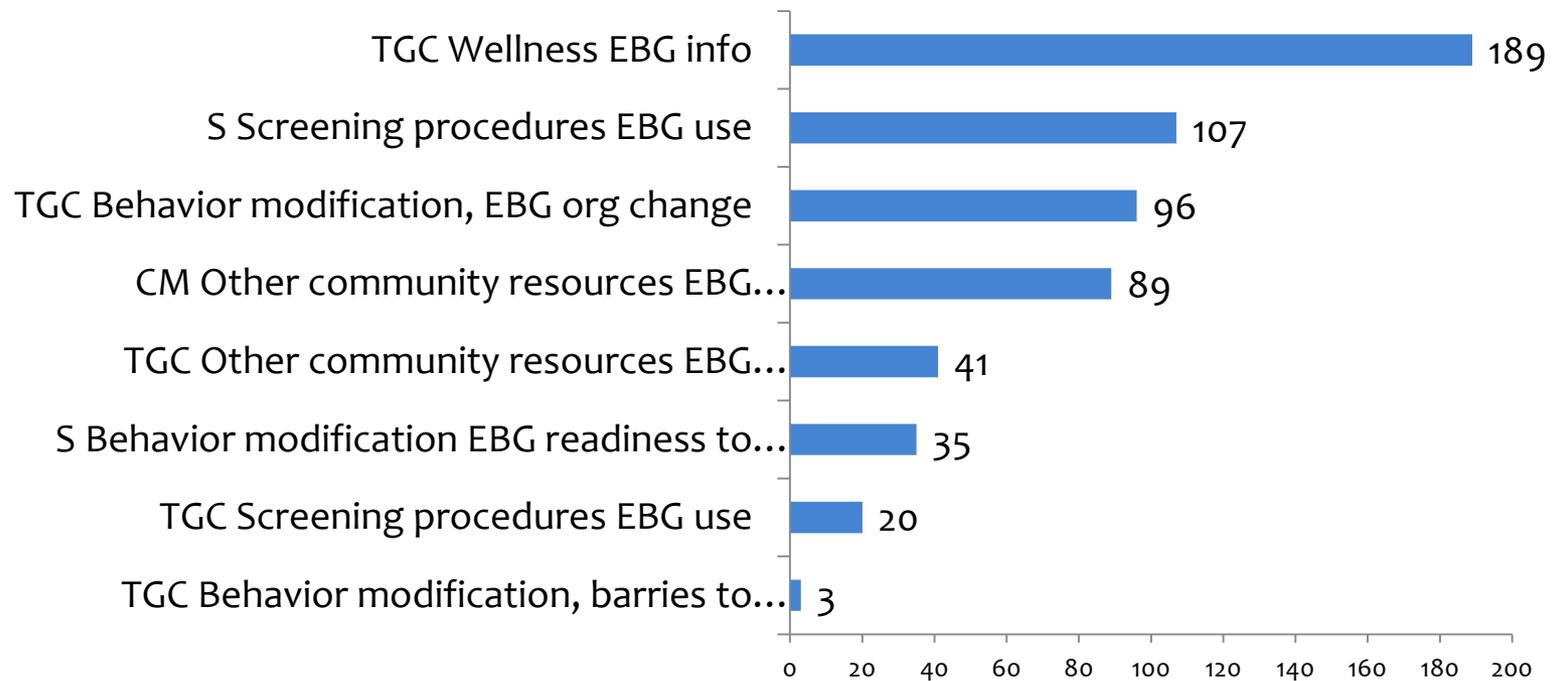
- * 10 Community Partners
- * 23 Health Care Settings:
 - * Migrant Health Service, Inc.= 9
 - * Federally Qualified Healthcare Center (FQHC) = 1
 - * Private Medical Clinics = 7
 - * Outpatient PT and OT = 2
 - * Local Public Health Agencies = 4



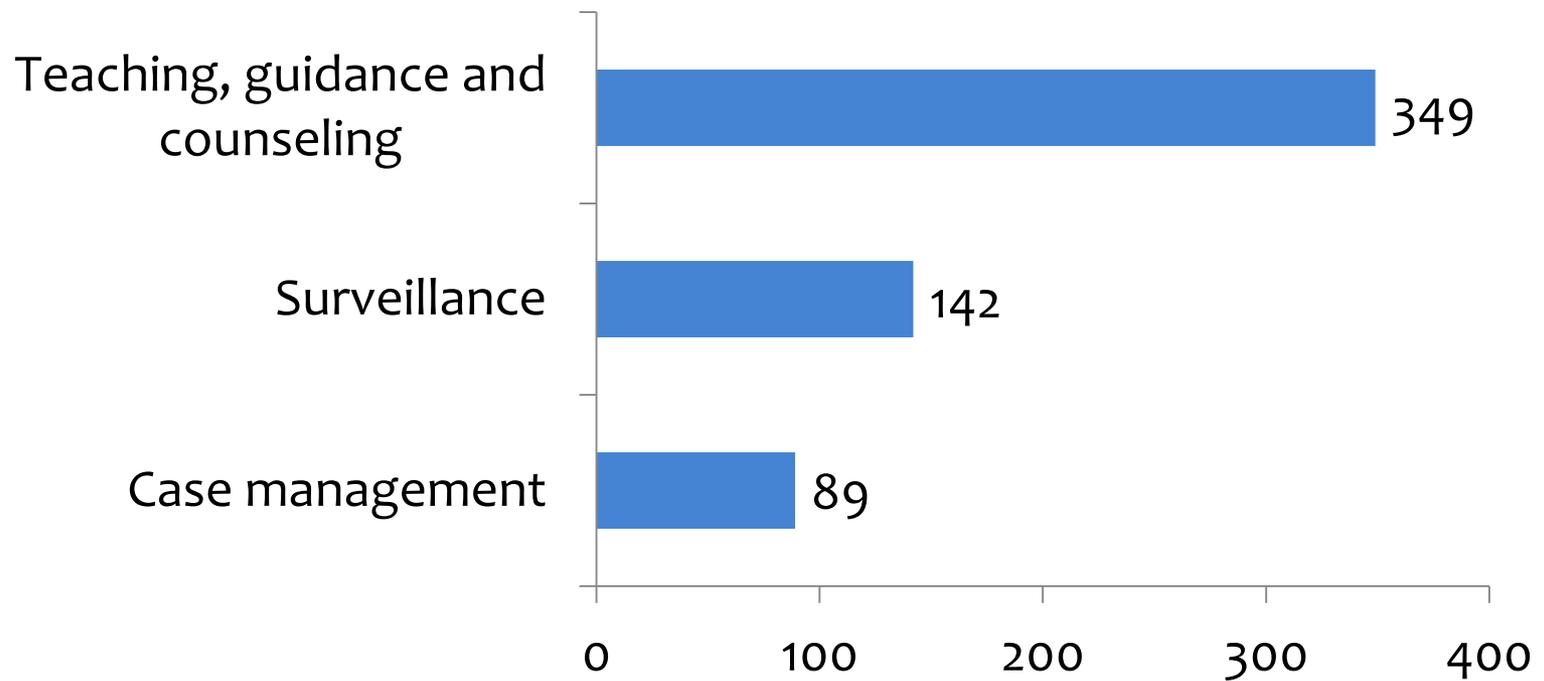
Intervention Data

- * 646 interventions in original report
 - * 66 were administrative tasks (removed)
- * 580 interventions
 - * Range = 7-70
 - * Average = 52.7

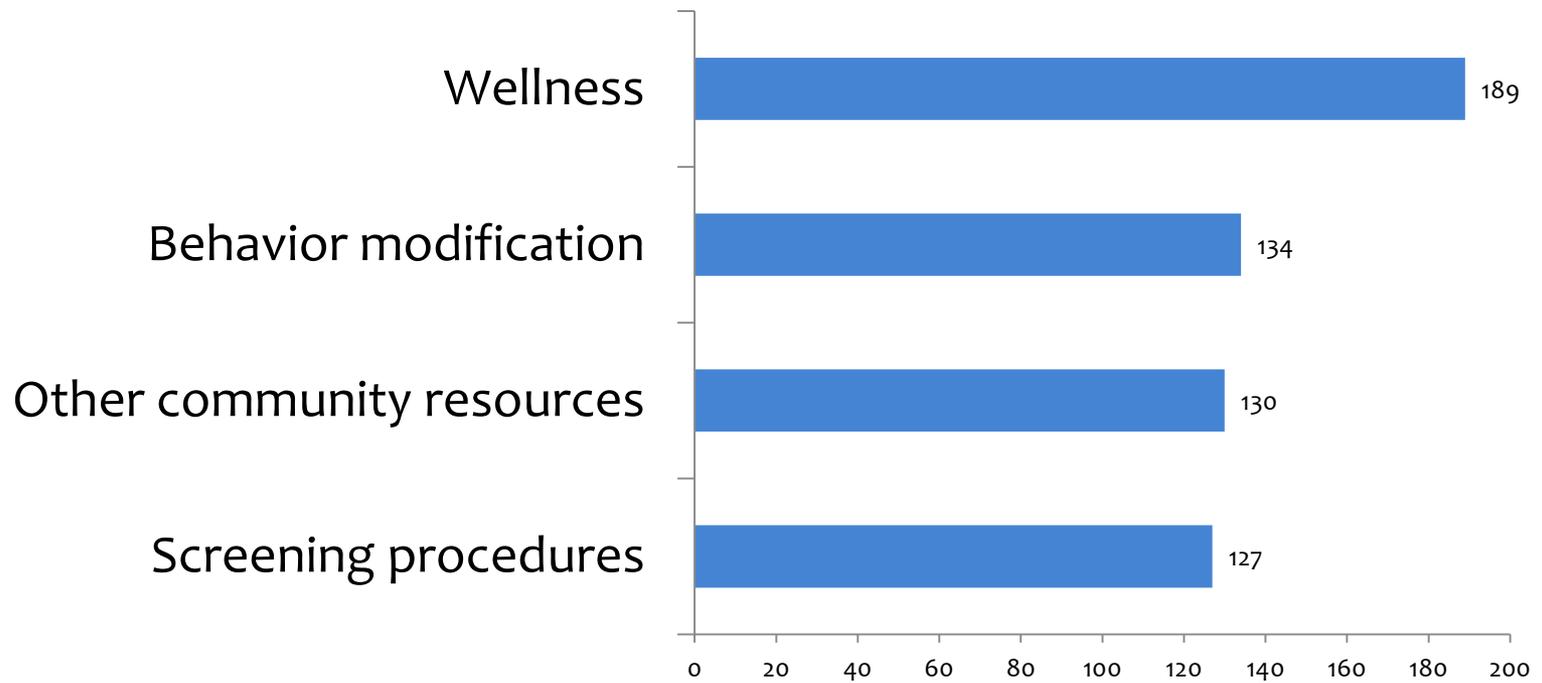
Health Care Supervision



Categories



Targets





Health Care Provider Knowledge Assessment

Rating the organizational knowledge of:

- health issue as a health problem
- evidence-based guidelines address the health issue

Rating Categories:

- * No knowledge
- * Minimal knowledge
- * Basic knowledge
- * Adequate knowledge
- * Superior knowledge



Health Care Setting Behavior Assessment

Rating the organizational behavior regarding:

- * Implementation of evidence-based guidelines to address the health issue

Rating Categories:

- * Not Appropriate; Never implements
- * Rarely Appropriate; Rarely implements
- * Inconsistently Appropriate; Inconsistently implements
- * Usually Appropriate; Usually implements
- * Consistently Appropriate; Consistently implements



Health Care Setting Status Assessment

Rating the organizational status regarding the:

- * Adoption of evidence-based guidelines to address the health issue

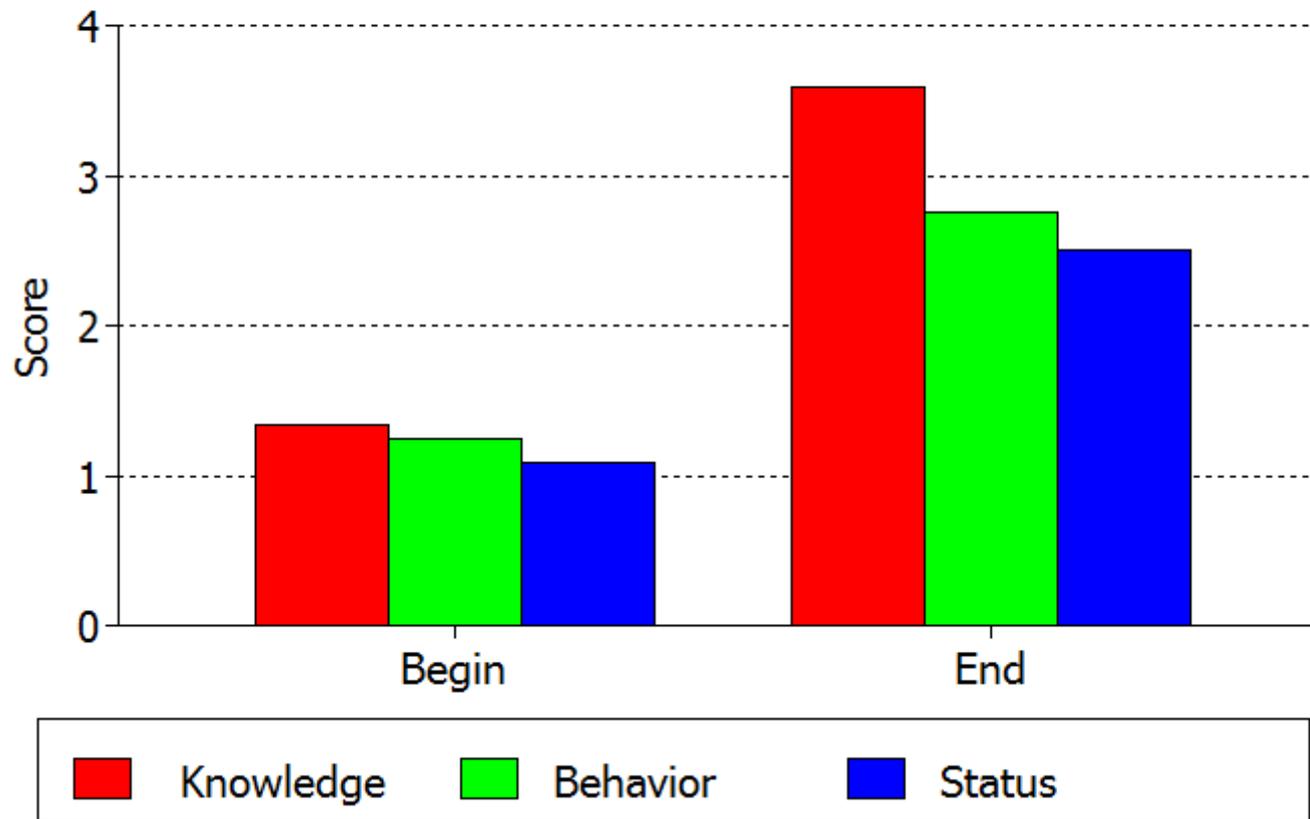
Rating Categories:

- * Extreme S/S; No adoption
- * Severe S/S; Rare adoption
- * Moderate S/S; Minimal adoption
- * Mild S/S; Moderate adoption
- * No S/S; Generalized adoption

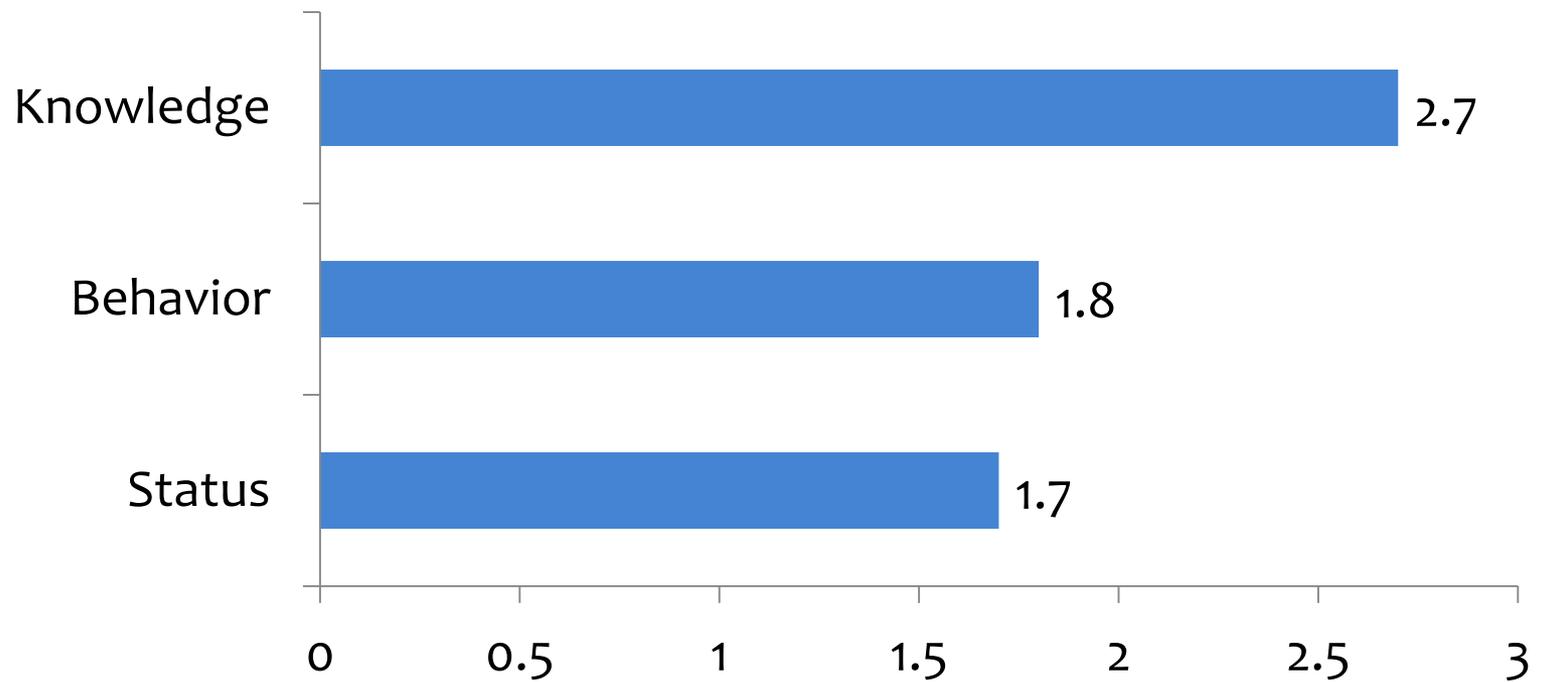
KBS Average Begin and End Ratings Across Problems

Organizations with Health Care Supervision

KBS Ratings Between 01/01/2010 and 02/22/2013



KBS Change





Adult Obesity Management and Prevention Group

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- * Contact
 - * Debra Eardley: fost0065@umn.edu
 - * Kristin Erickson: kerickso@co.ottertail.mn.us



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