

# FIT KID AND FIT TEEN HEALTH COACHING PROGRAM

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Pilot Phase Results

May – September 2014

# Program Team

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- Katelyn Bennett, MPH – Program Manager
- Ashley Jensen, MPA – Data Management Associate
- Matthew Beyrouthy, MPA – Project Coordinator/Coach  
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- Nicole Skursky – Health Coach
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# Special thanks to

- The CCMI team
- Dr. Damara Gutnick

# Overview

- Background and Purpose
- Program Description
- Enrollment
- Phase 1 Results
- Lessons Learned and Next Steps

# Background and Purpose

- The coaching program was designed to address critical need for obesity prevention and reduction in HHC pediatrics clinics
- The NYU team has experience incorporating non-clinicians into primary care and in behavior-change counseling
- The HHC/NYU team conducted a 5-month pilot program embedding health coaches into pediatric care at Lincoln and Gouverneur Health Medical Centers

# Program Description

- Clinical Quality Improvement Program
- Emphasis on goal-setting and making behavior plans
- Patient and family driven
  - Focus on healthy behavior goals
  - Coaches offer various modes of follow-up on plans
  - Tailored resources and assistance
- Relies on evidence-based behavior counseling methods
  - Motivational interviewing
  - Brief Action Planning

# Methods – Data Collection

- Referral:
  - Completed by a physician or RN at visit, includes height, weight, and BMI percentile
- Initial Patient assessment:
  - Completed during first visit with coach
  - Family Nutrition & Physical Activity (FNPA) Assessment, a 20-item validated questionnaire with both children and teen versions
  - Gauge patient's or parent's desire to work on weight
- Documentation of follow-up encounters completed by coaches
- Assessment visit:
  - FNPA re-administered, height and weight measurements taken
  - Timing of these visits varies for pilot participants (21-108 days in program)
  - Complete a confidential assessment of the program and coach

# Health Coaches

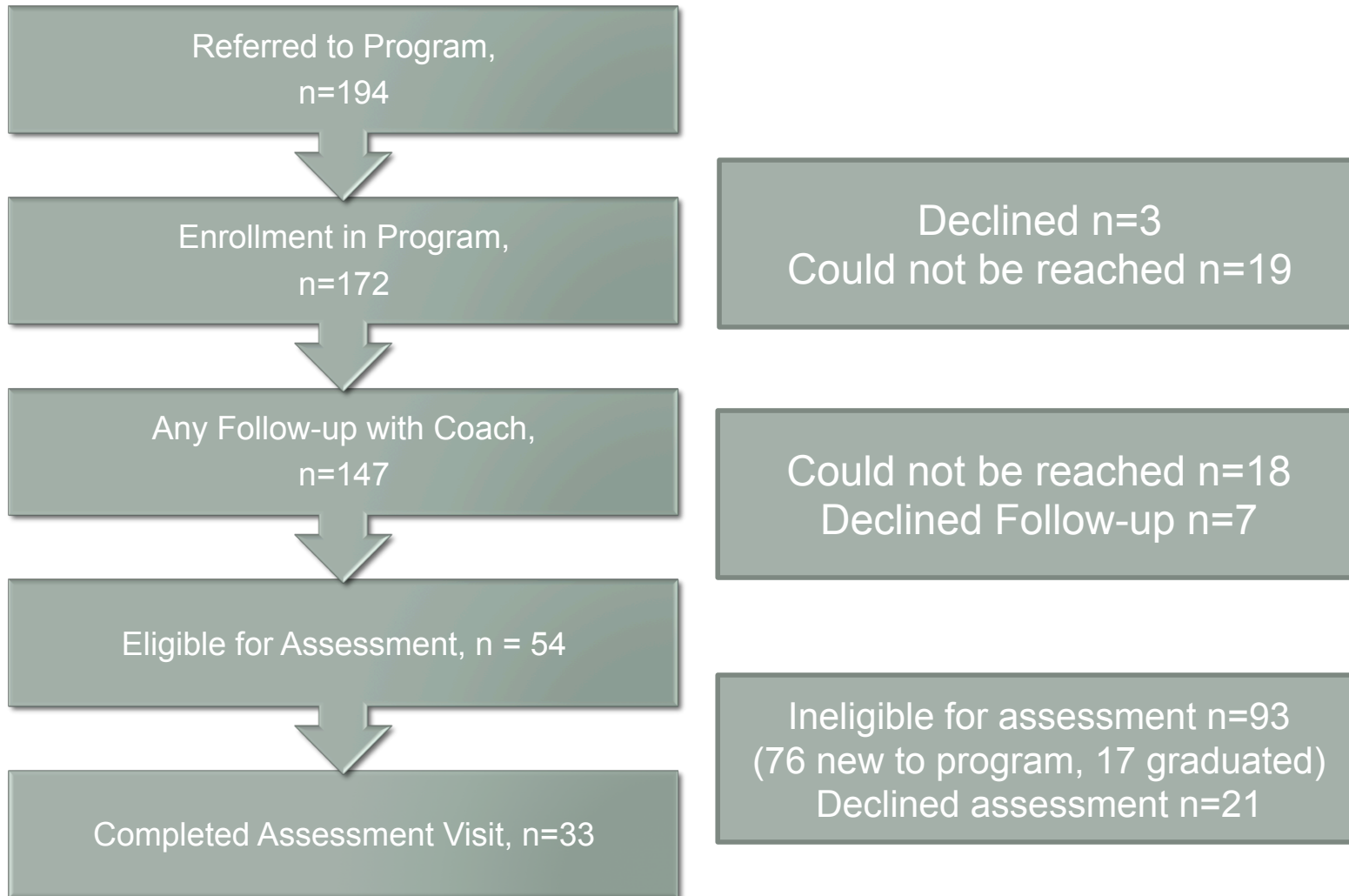
- Training
  - 2 Full days – motivational interviewing, brief action planning health coach program orientation
  - Practice calls with CCMI staff
  - BAP Certification
  - Refresher trainings with BAP trainer to go over cases specific to experiences in clinic including challenging patients
- Development of behavioral menus specific to each population
  - Gouverneur: Hispanic, Mandarin, Caucasian
  - Lincoln: Hispanic, African American
- Development of scripts to use for phone, text, and email follow-up with patients/parents
- Set up with an activity tracker (FitBit) and online profile



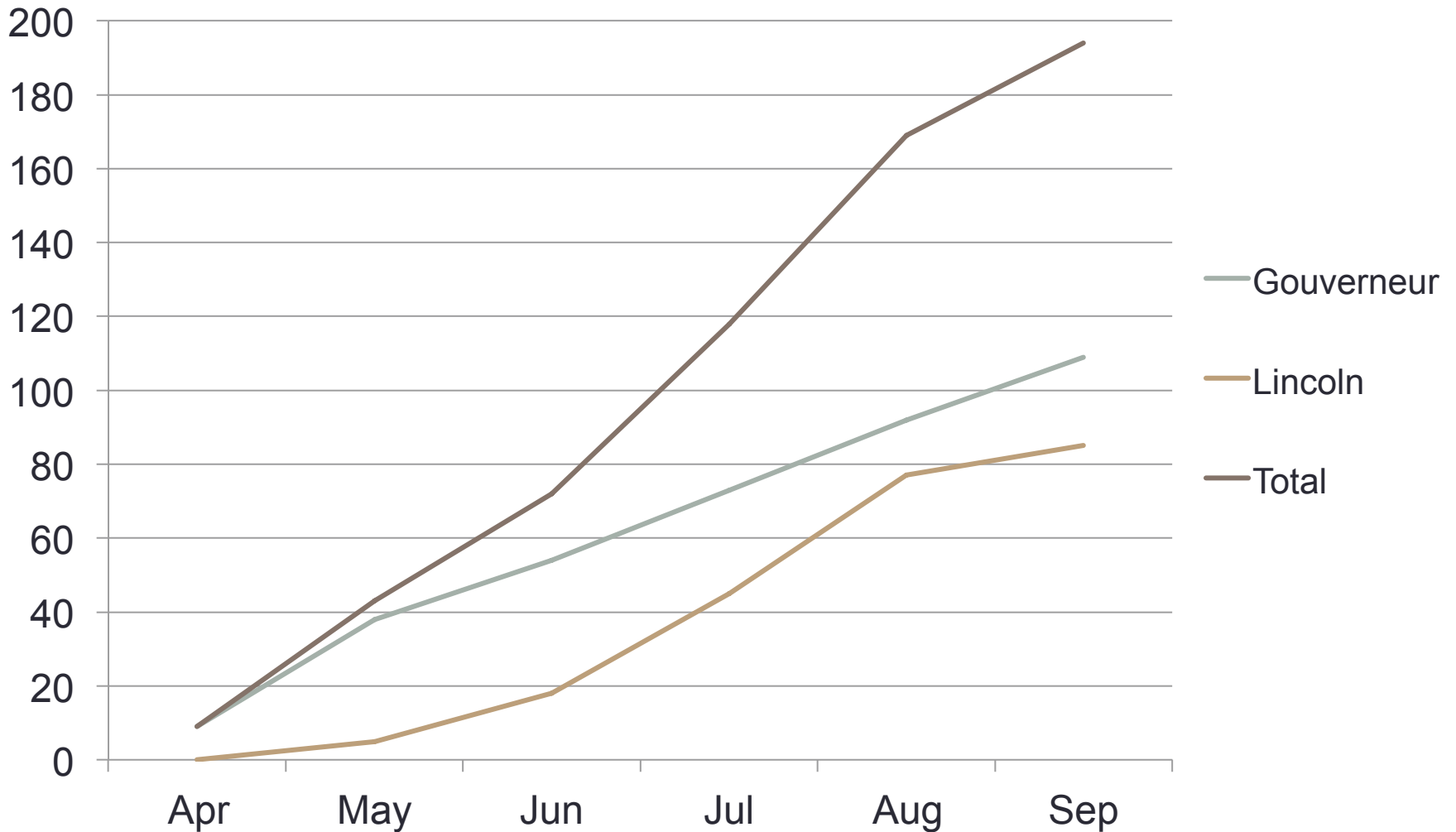
# Health Coaches continued

- Given private space in pediatric outpatient clinic
- Integrate into clinic flow by attending staff huddles
- Provided secure email account and smart phone to communicate with patients/parents electronically
- Provided with resources to give patients/parents related to nutrition and exercise

# Enrollment



# Cumulative Monthly Referrals by Site



# Participant Characteristics

Characteristic	Enrolled % (n=172)	Referred not enrolled % (n=22)
Age		
2-6	7%	23%
7-11	9%	14%
12-16	52%	50%
17-22	33%	14%
Gender		
Female	60%	64%
Male	40%	36%
Site		
Gouverneur	56%	59%
Lincoln	44%	41%
Race/Ethnicity		
Hispanic/Latino	57%	45%
Black	15%	0%
Asian	3%	5%
White	1%	0%
More than one race	24%	50%
Preferred Language		
English	91%	91%
Spanish	9%	9%
Mean BMI Percentile	97.2	97.3

# Characteristics of Enrolled Participants

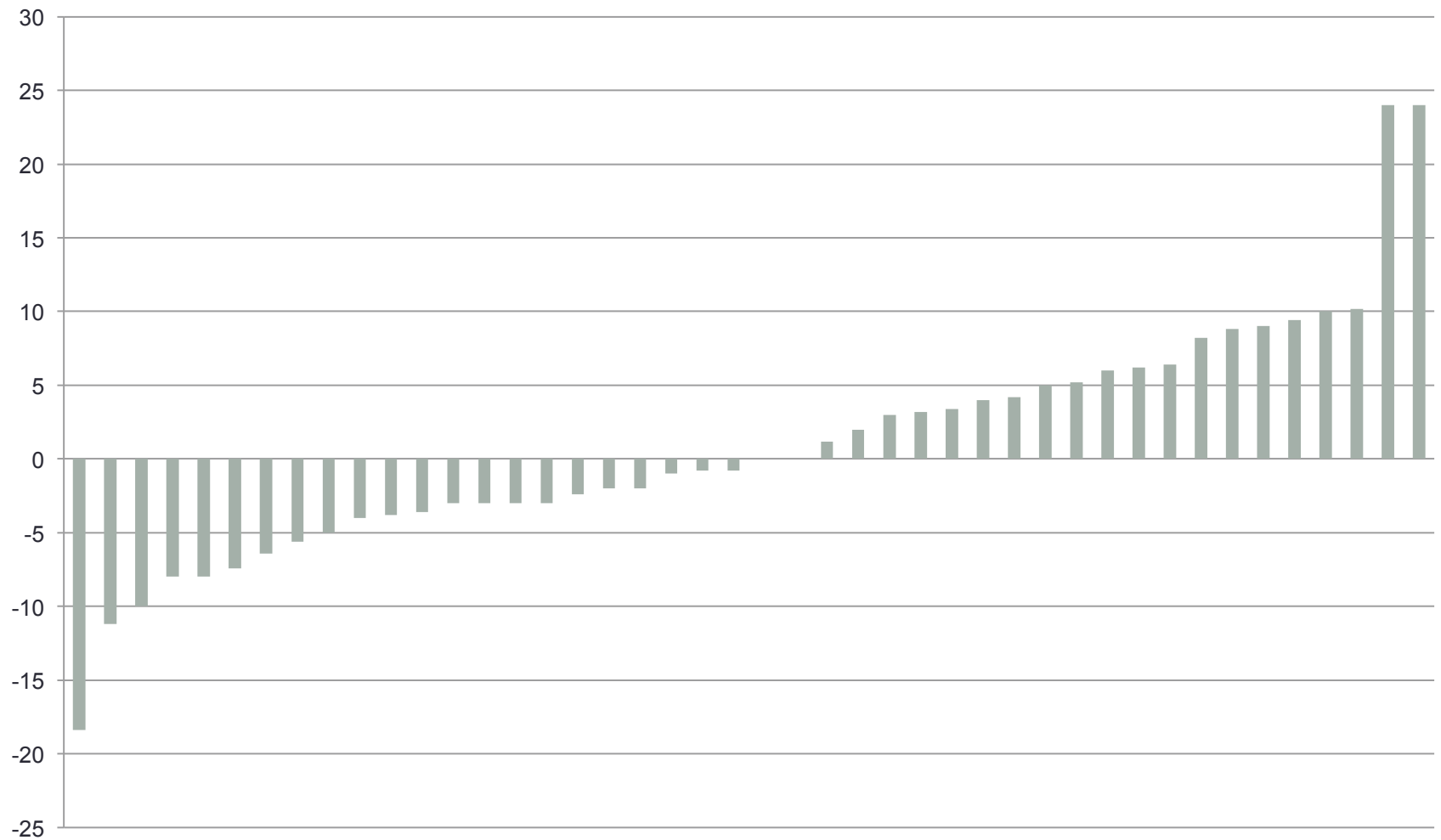
Characteristic	Enrolled Mean, SD (n=139)	Completed assessment visit Mean, SD (n=33)
Days in program	34.7, 3.6	57.5, 23.8
Weeks in program	5.0, 2.1	8.2, 3.4
Number of contacts with coach	3.9, 2.8	5.6, 3.5
Importance of working on weight (scale from 0-10)	8.7, 1.6	8.6, 1.7
Number of goals set	3.0, 3.5	5.4, 3.6

# Results – Weight and BMI Percentile

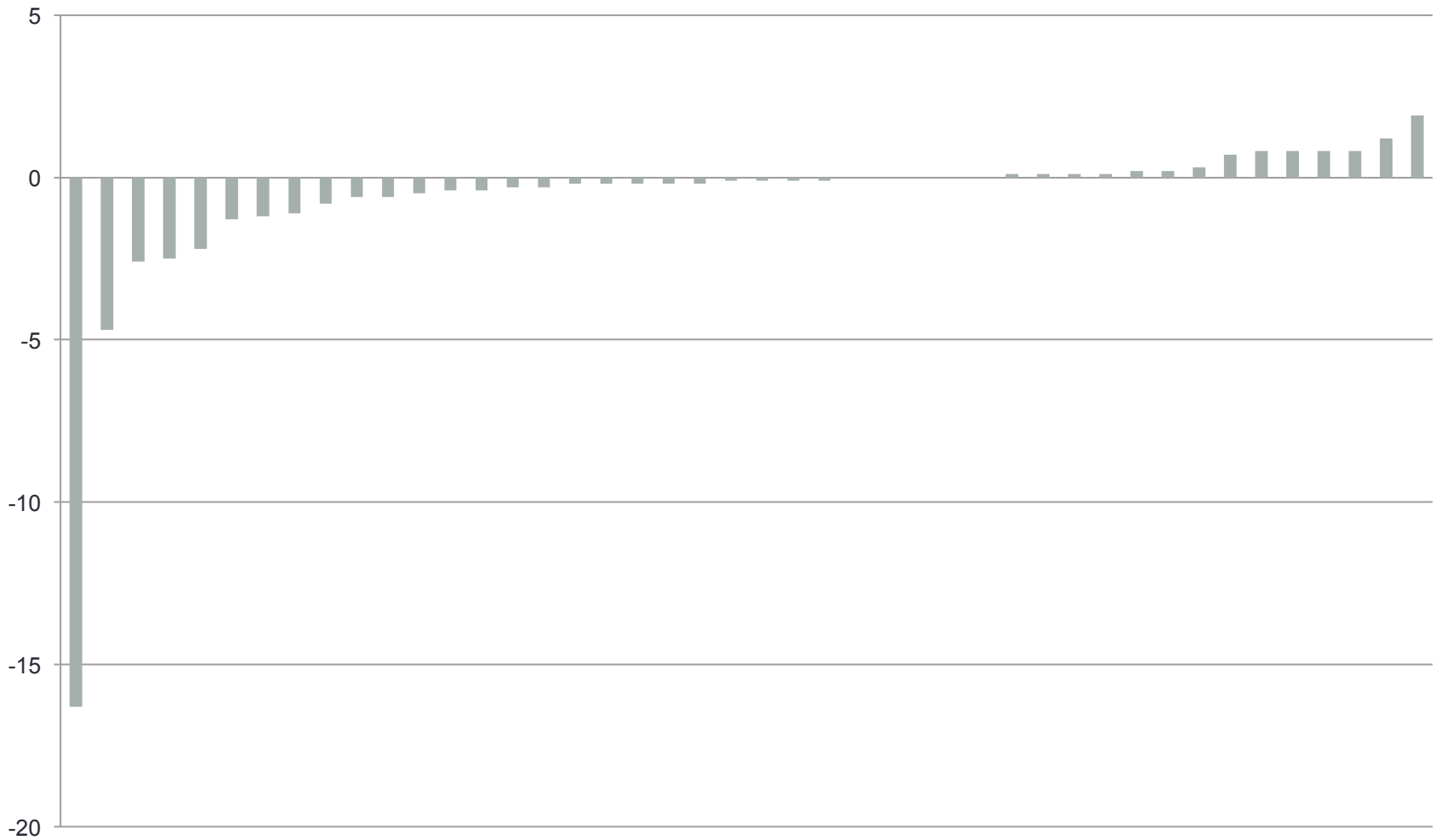
	Mean (Range)	SD
Change in weight	0.69 (-18.4 to 24.0)	7.45
Change in BMI	-0.34 (-4.96 to 3.99)	1.54
Change in BMI percentile	-0.63 (-16.3 to 1.90)	2.92

- No significant differences in weight, BMI or BMI percentile from enrollment to assessment
- 52% of patients lost weight and 64% decreased BMI
- 55% decreased BMI percentile and 12% maintained the same BMI percentile

# Change in Weight From Baseline to Assessment Visit



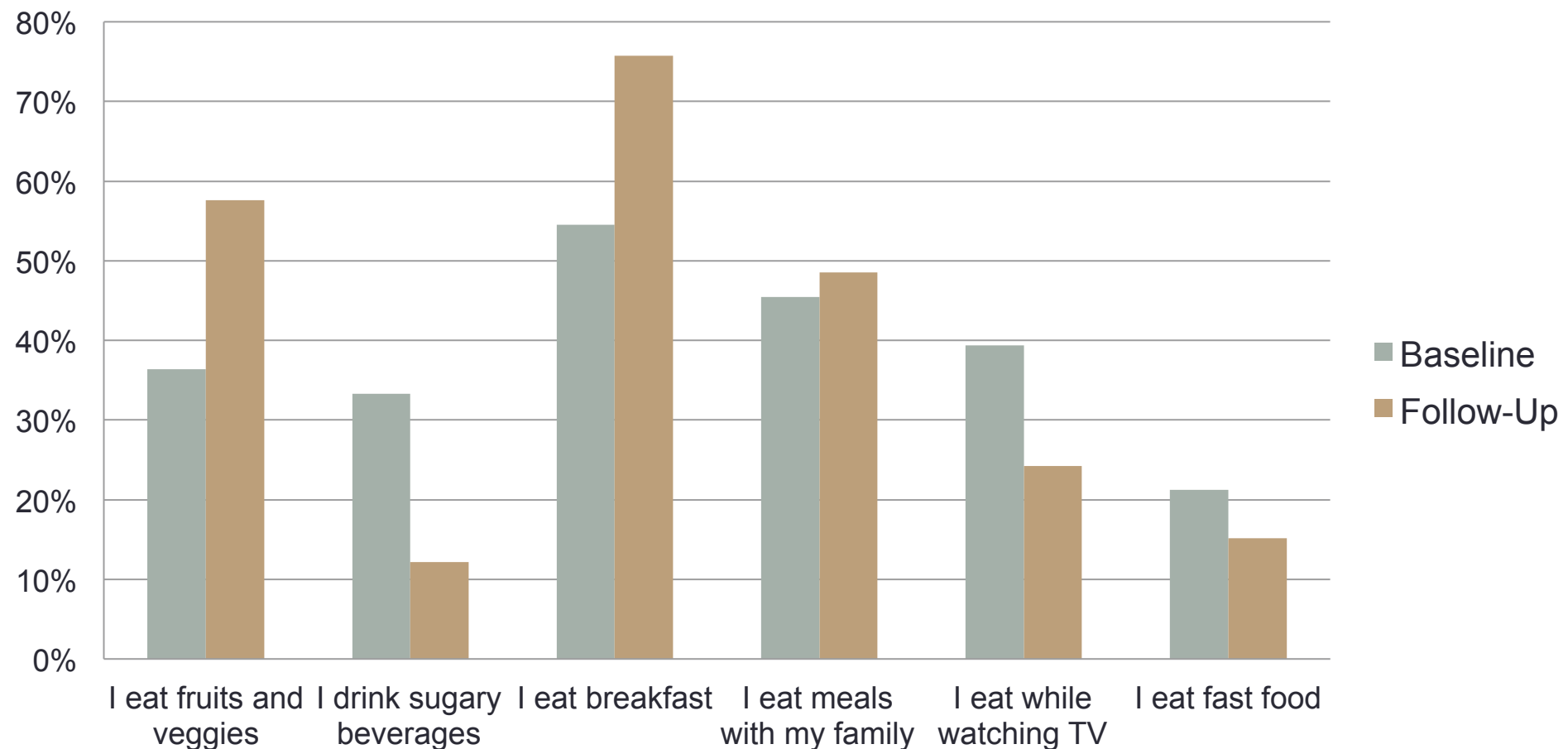
# Change in BMI Percentile from Baseline to Assessment Visit





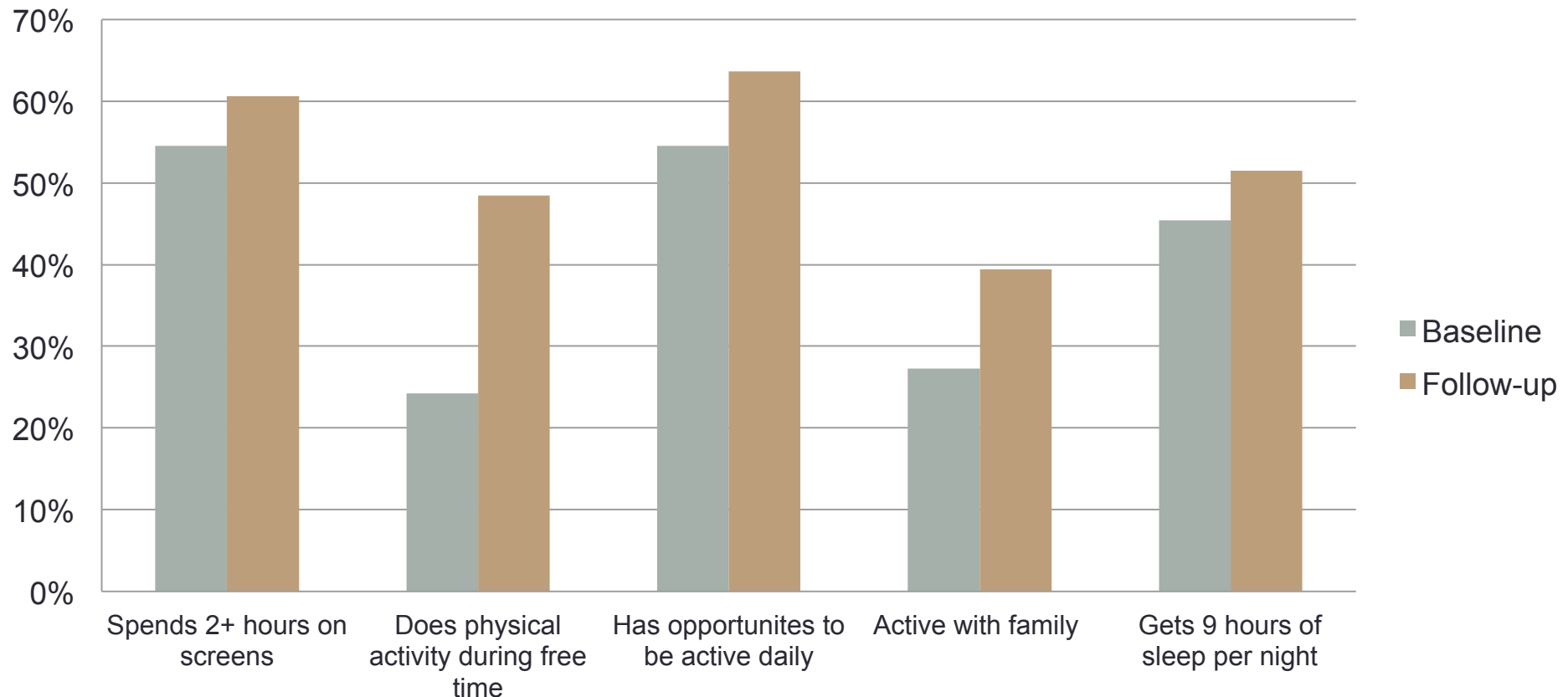
# Results – Nutrition and Eating Habits

**% of participants who almost always or usually....  
(n=33)**



# Results – Change in reported physical activity

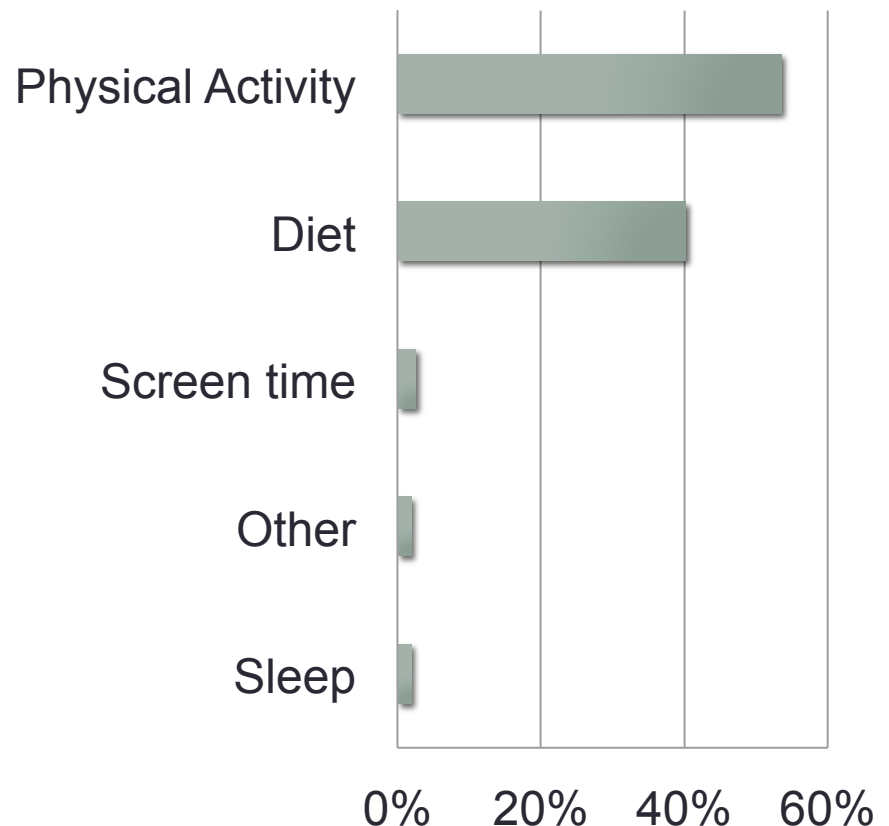
% of participants who almost always or usually...  
(n=33)



# Results – Goal Setting and Planning

- Total 297 goals set in pilot
- 73% of goals were completely or partially achieved
- 93% (136/147) of enrolled patients set a goal
- 69% targeted a 5-2-1-0 behavior

Types of Goals Set



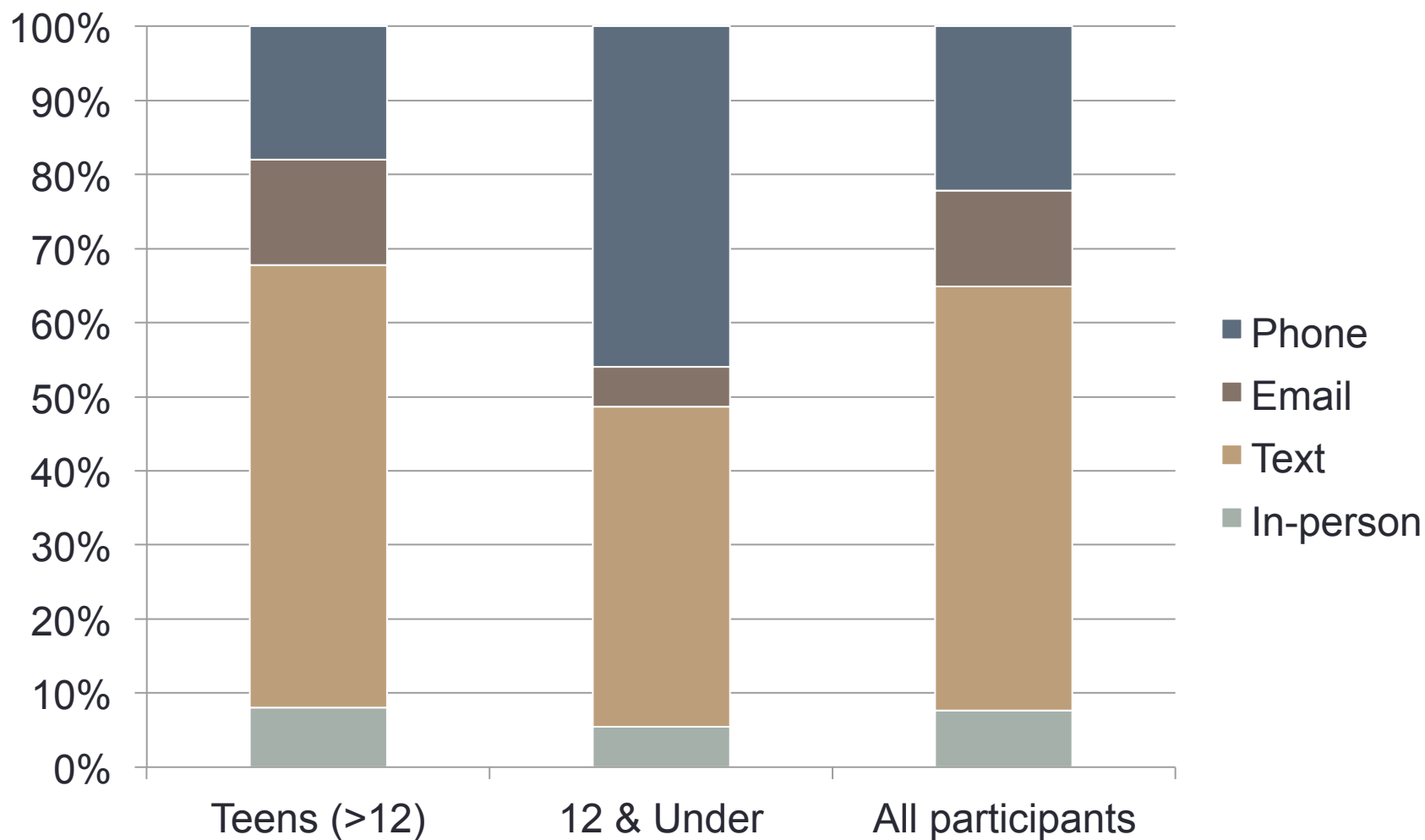
# Results – Goal Setting Success

- Patients set goals around exercise, diet, sleep routines, and screen time
  - “I want to stop eating McDonald’s. Right now I’m going twice a week. I’m going to go zero times a week.”
  - “I am going to run in the mornings for an hour in the park near my house on Mondays, Wednesdays, and Thursdays. I will walk 10,000 steps each day.”
  - Patient X made plan to turn off her phone at 11:30 each night so she can fall asleep by midnight, instead of her normal 1-2am.

# Results: Patient Story

- After talking about her desire to take action for her daughter, mom came up with a plan to take Marcela on daily walks from their home at 2<sup>nd</sup> Ave and Houston, up to 14<sup>th</sup> street and back.
- I checked in with mom a week later to see how it was going with her plan. She noted Marcela would get fatigued easily and it was challenging in the beginning, but that she sees Marcela gaining endurance and wanted to continue with her plan. I told her it is difficult to have complete success when starting a new plan, and that getting Marcela to walk even a little bit was a great accomplishment, and will get easier over time.
- On the second follow-up phone call, mom reported even more success with her plan to walk with Marcela. She had also recently bought a bicycle for Marcela, who loved to ride it out in front of her home in the Bowery.

# Preferred Mode of Follow-up

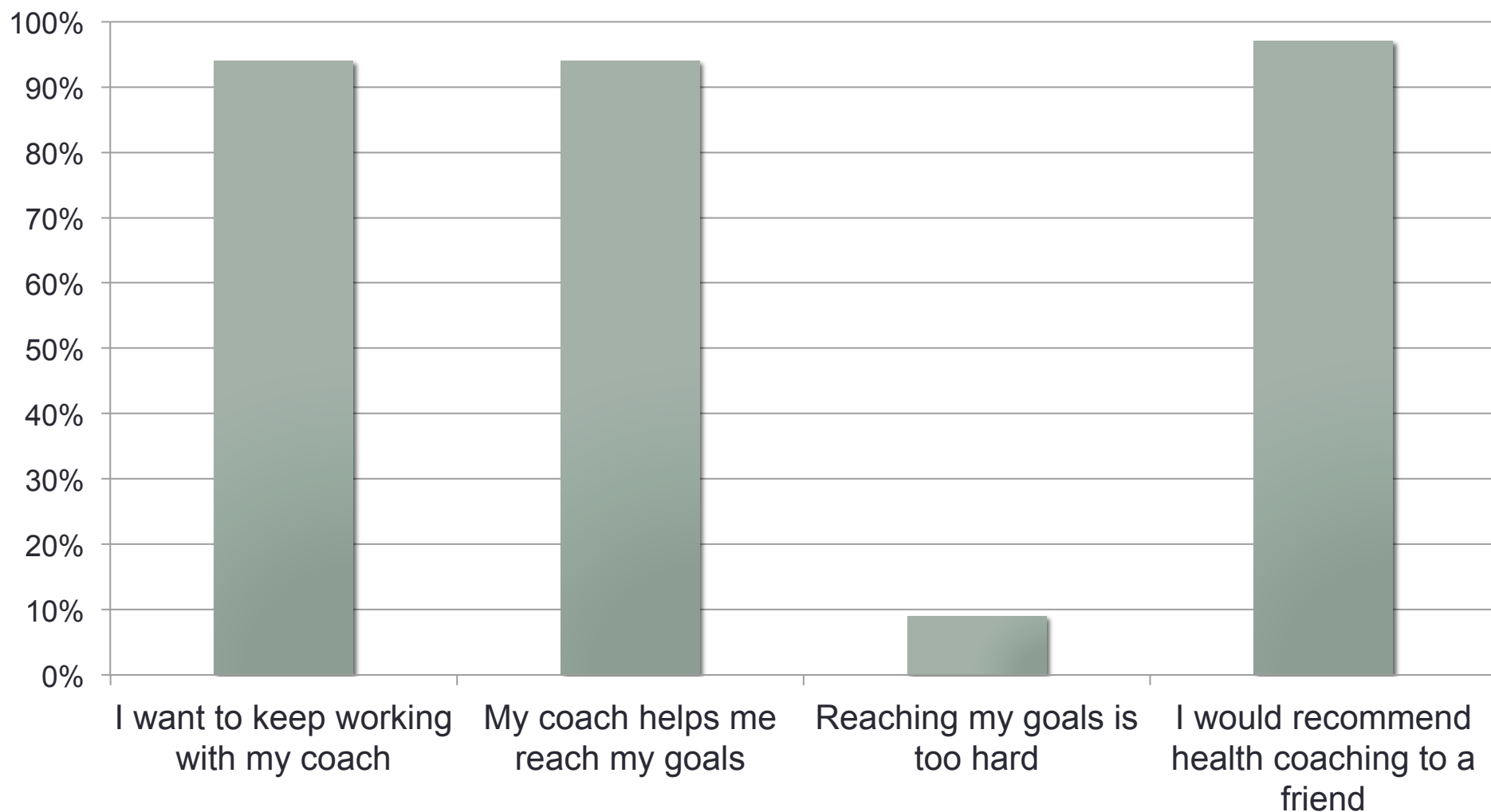


# Program Dose correlated with outcomes

- Days of enrollment in the program was significantly correlated with weight loss and decrease in BMI (Pearson's  $R = -0.761$  &  $-0.734$ ,  $p < 0.001$ )
- Number of contacts with coach also significantly correlated with weight loss and decrease in BMI (Pearson's  $R = -0.540$  &  $-0.665$ ,  $p < 0.001$ )
- Receiving a FitBit was NOT correlated with weight loss (Pearson's  $R = 1.48$ ,  $p = 0.432$ )

# Participant Satisfaction

**% of Participants who Agree or Strongly Agree (n=33)**





# Program Resources



- 67 participants given a FitBit
- 12 participants given a scale (4 Aria wireless, 8 digital bathroom scale)

# FitBit Use – Monthly Steps Taken

- Participants have taken a total of **12,567,339 steps**
- 58 participants have used their FitBit and synced it online
- Average daily steps for participants syncing their FitBit between July-September is 7,927



# Lessons Learned

- Challenges with the younger age group
  - Less perception of problem
  - Doctor's visit not always best time to reach parents
- More intensity, more interaction with coach = better outcomes
- Coaches are generally seen as an asset within the clinic
- Working directly with clinic champions has been key to recruitment success; other PCPs have joined in referring to the coach after time seeing coach, witnessing the proof of concept, and hearing of patient success stories

# Current Phase (Sept 2014 – present)

- As of April 16<sup>th</sup>, 2015 a total of **592 patients** have been referred to the program
- Expansion to Kings (Brooklyn), continuation at Gouverneur (Manhattan) and Lincoln (Bronx)

QUESTIONS?  
COMMENTS?

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