



# **Lessons Learned: Models of Integration Across New Hampshire**

**Moderator: Dr. Rick Pollak,**  
Foundation for Healthy  
Communities



# Sharon Beaty

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CEO of Mid-State Health Center in  
Plymouth and Bristol

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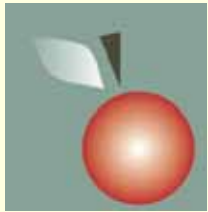
Community Prevention & Treatment  
Initiative  
Childhood Obesity Prevention Project  
*Linking Community Health Efforts  
with the Health Care*

NH Public Health Association  
Annual Fall Forum  
October 20, 2009

Beth Gustafson Wheeler, MS



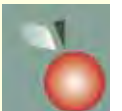
Foundation for  
Healthy Communities



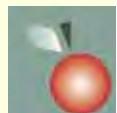
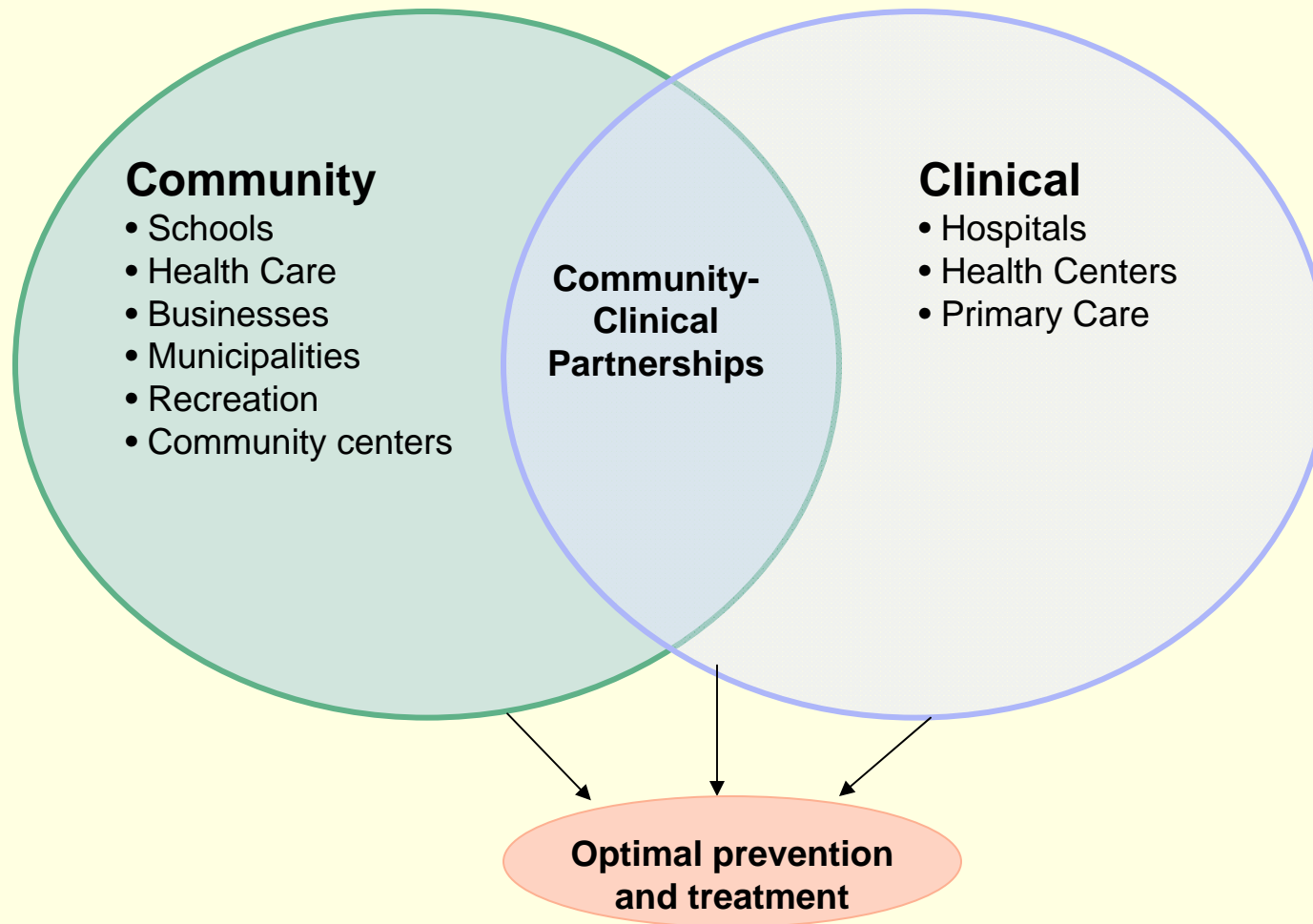
# Foundation for Healthy Communities

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- Mission: improve health and health care delivery in New Hampshire
  - Provider performance improvement
  - Health care system enhancement
  - Access to health care
  
- Partnerships include hospitals, clinicians, health plans, home care agencies, and public policy leaders.



# The CPTI Model



# History of CPTI

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- 2002-2004: **Phase 1:** Build and implement the CPTI model with CHD
- 2004-2006: **Phase 2:** CHD
- 2006-2008: **Phase 3:** CPTI Childhood Obesity Project

# Phase I Results

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## Intervention Communities:

- LDL testing increased significantly in patients with and without a diagnosis of CHD or equivalent
  - Observed increases in control as well- QI reports new cholesterol initiative!
- LDL treatment to goal increased significantly in patients with a diagnosis of CHD or equivalent
- Physical activity levels increased more in intervention vs. non-intervention communities.

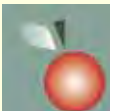


# Community Prevention and Treatment Initiative

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## *Childhood Obesity Project 2006-2008*

- Aims to bring communities together to collaborate on implementing coordinated strategies for the prevention of childhood obesity.
  - Clinical practice interventions
  - Community strategies

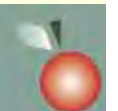




# Funders

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- Alexander Eastman Foundation
- Anthem Blue Cross and Blue Shield Foundation
- Endowment for Health
- Harvard Pilgrim Health Care Foundation
- NH Charitable Foundation
- Northeast Cholesterol Foundation



# CPTI: *Childhood Obesity Project*

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## 2 pilot communities:

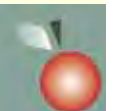
- Mount Washington Valley Region  
(*Conway, N. Conway, Freedom, Madison, Tamworth, and Ossipee*)
- Derry/Londonderry



# Community Partners

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- Hospitals
- Pediatric primary care providers
- Schools
- After school programs
- Recreation and Community Centers
- Boys and Girls Club
- Family Resource Center
- Child Care Centers
- UNH Cooperative Extension



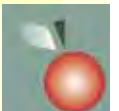
More matters! **Eat fruits and vegetables at least 5 times a day.** Limit 100% fruit juice.

Participate in at least one hour of moderate to vigorous physical activity every day.



Cut screen time to 2 hours or less a day.

Restrict soda and sugar-sweetened sports and fruit drinks. Instead, drink water and 3-4 servings/day of fat-free/skim or 1% milk.

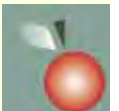


# Practice Goals

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## Increase:

- BMI documentation and classification
- Physical activity and nutrition assessment and education/ counseling
- Appropriate labs
- Follow up visits as needed



# Community Interventions

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## Goals

- Increase opportunities for physical activity in organizations who serve children
  - Positive PA environments
  - Focus on “play”
- Provide more supportive environments for healthy eating

# Community Interventions

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## School

- **5-2-1-0 campaigns**
- Healthy Snack Project
- Food Svc changes
- Non-food rewards
- Garden projects
  
- Take 10!- SAU 9 & 13
- Before school physical activity (CATCH, walking)
- Recess activities
- “Caught Being Active”

## After School

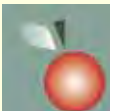
- **5-2-1-0 promotion**
- CATCH Kids Club
- Healthier vending (Boys & Girls Club of Greater Derry)

## Recreation

- **5-2-1-0 promotion**
- CATCH Kids Club
- Winter Passport Program

## Other partners

- **5210 promotion**



# Linking Community Health & Clinical Initiatives

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- Communicated one message
  - **5-2-1-0** was evidenced based, catchy, fun
- Providers are passionate- we looked for their advocacy interest!
- Take advantages of opportunities to make connections: wellness committees, community and staff education, media
- Key informant interviews helped us find connections between partners
- Recruited partners from where kids live, learn, work and play- supportive environments.





# Examples

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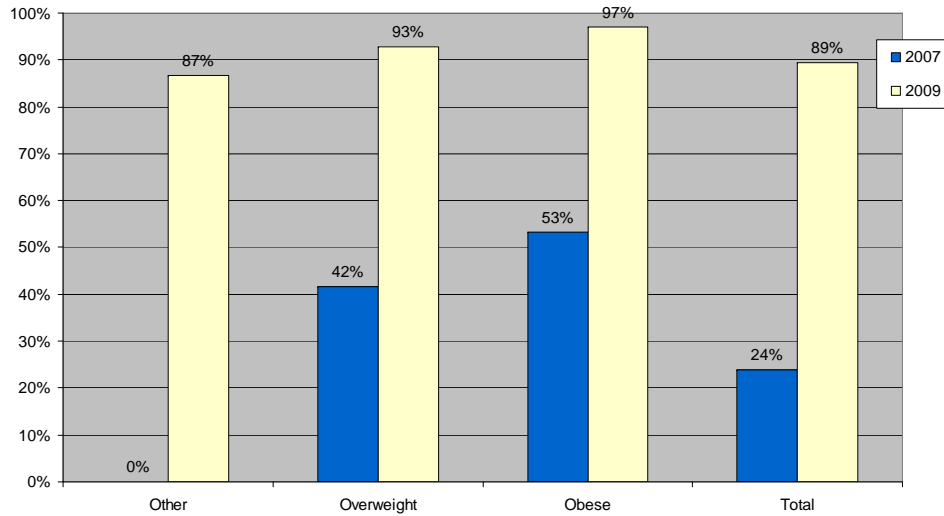
## ■ **Community organizations**

- Provide 5-2-1-0 message
- Provide resources to clinicians-increasing awareness
- Engaging clinicians to support their efforts- what are their advocacy interests?

## ■ **Clinicians**

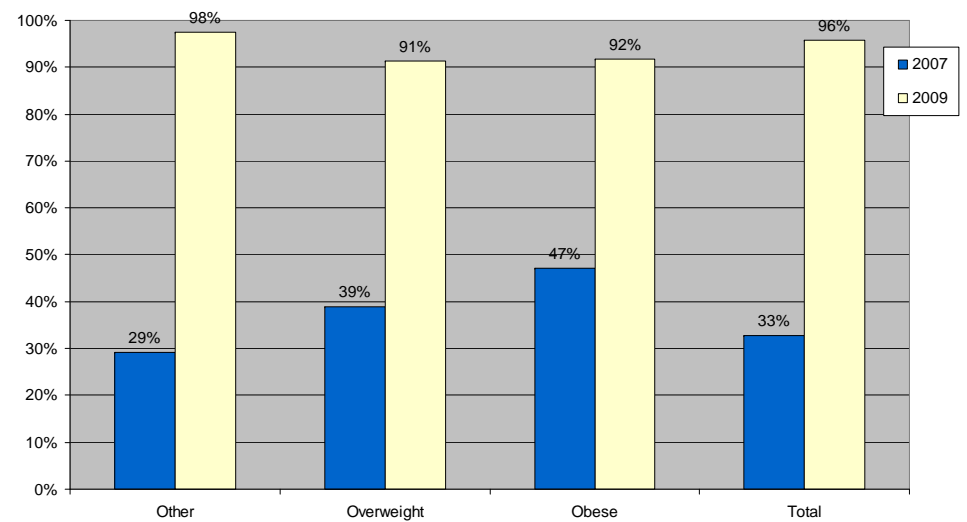
- provide 5-2-1-0 message
- lead community walks
- sit on school wellness committees
- give presentations to child care providers
- give interviews for the media

**BMI Documentation**  
**Mount Washington Valley Region**  
*Childhood Obesity Prevention and Treatment Initiative*  
**Chart Review Results: 2007-2009**



# BMI Documentation

**BMI Documentation**  
**Derry-Londonderry Community**  
*Childhood Obesity Prevention and Treatment Initiative*  
**Chart Review Results: 2007-2009**



# Healthy Eating and Physical Activity Assessment

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*Chart Review 2007-2009*

## **Physical activity assessment:**

- MWV Region: 56% to 60%
- Derry/Londonderry: 69% to 97%

## **Diet assessment:**

- MWV Region: 80% to 91%
- Derry/Londonderry: 72% to 99%



# Healthy Eating and Physical Activity Education

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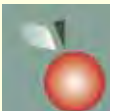
## *Chart Review 2007-2009*

### Physical activity education:

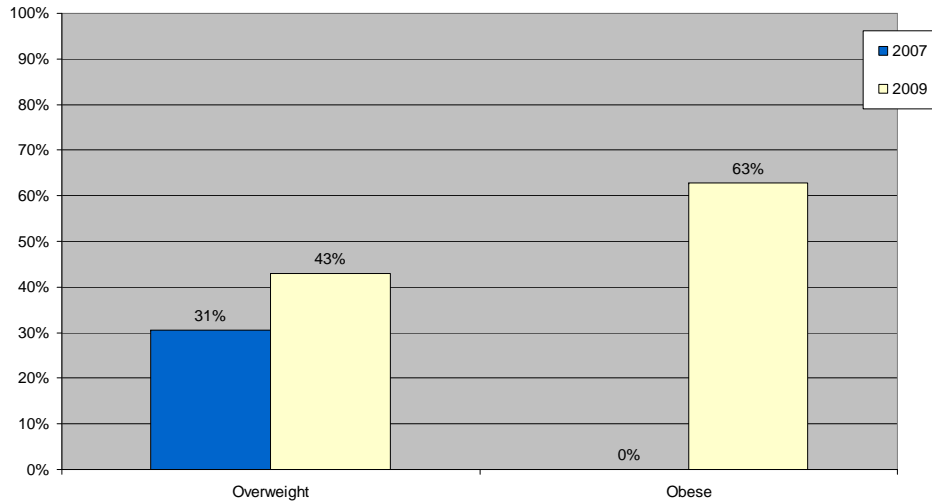
- MWV Region: 45% to 47% (ow/ob: 69% - 92%)
- Derry/Londonderry: 35% to 43% (ow/ob: 34% - 49%)

### Diet education:

- MWV Region: 70% to 75% (ow/ob: 51% - 76%)
- Derry/Londonderry: 66% to 60% (ow/ob: 74% - 63%)

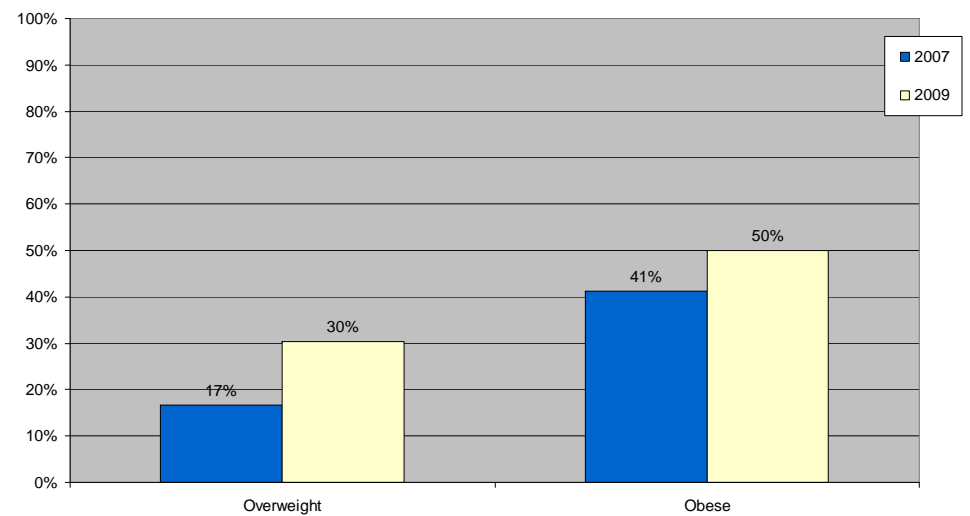


**Weight Discussed?**  
**Mount Washington Valley Region**  
*Childhood Obesity Prevention and Treatment Initiative*  
**Chart Review Results: 2007-2009**



# Weight Discussions

**Weight Discussed?**  
**Derry-Londonderry Community**  
*Childhood Obesity Prevention and Treatment Initiative*  
**Chart Review Results: 2007-2009**

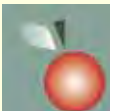


# Follow-up Visits and Labs

*Chart Review 2007-2009*

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- **Follow-up visits: No significant difference**
  - Patient readiness
  - Discrepancy between action and documentation
- **Labs: Slight increase in both communities**
  - Treatment protocols similar with or without labs
  - Discrepancy between action and documentation

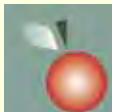


# Results

*(Key informant interviews, observational data,  
policy reviews, etc.)*

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- Food Services in MWV made positive, healthy changes in lunch menus
  - Elimination of whole milk
  - ↑ whole grain foods
  - ↑ fruit and vegetable offerings
  - ↑ communication with parents/community
  - Piloting use of foods from local farms
- ↑ demand for healthy snacks.
- ↑ physical activity opportunities
- ↑ number of after school programs offering a positive physical activity environment for *all* children.
  - **18** new CKC sites and **71** staff trained!
  - **3** new after school programs started with CKC



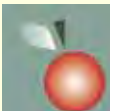
# Results: CATCH Kids Club

Site observations, key informant interviews, and child surveys show:

- Increases in time spent in physical activity
- Most sites conducted MVPA for at least 20 minutes per activity period.
- Children who did not normally participate in physical activity participated in CKC.



Lakes Region Boys & Girls Club





# Lessons Learned

## *Linking Community Health Efforts with Health Care*

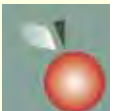
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- Clinicians and community organizations alike, participated because it was a community wide effort!
  - Increases sense of importance, belonging, empowerment
  - “One man shows” are fleeting, ineffective
- A simple, evidence based message bridged the gap between clinical and community efforts. They want to communicate the same message.
  - Felt supported by each other - no mixed messages
  - Education and counseling was more productive, welcome
- Key informant interviews are vital to creating links between partners.
- Capitalize on advocacy interests! Use it for media, community forums, school open houses or family nights, events.

# Lessons Learned

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- Strong message: Short, simple, catchy, evidence-based
- Build initial relationships through key informant interviews
- Commitment from all levels
- Make it easier to do better
  - Practical, evidenced based/promising practices
  - Tools/resources were important for strategy implementation
- Training is vital to proper implementation...and effectiveness.
  - Empowerment and belonging
- People and organizations need to know they are important to the mission...and why
- Change takes TIME
  - Resource dependent, organization readiness



# Questions?

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For more information contact:

Beth Gustafson Wheeler at [bwheeler@healthyNH.com](mailto:bwheeler@healthyNH.com)

For a full report on the  
CPTI Childhood Obesity Prevention Project visit:  
[www.healthyNH.com](http://www.healthyNH.com)



Foundation for  
Healthy Communities

# New Hampshire Local Government Center's *Slice of Life* Initiative *A Multi-Year Case Study*

**Health Promotion  
Disease Management  
Program  
Travis Horne**



Improving health. Producing results.



**NEW HAMPSHIRE  
Local Government Center**

New Hampshire Municipal Association  
Workers' Compensation Trust  
Property-Liability Trust  
HealthTrust

# New Hampshire Local Government Center

- LGC is a non-profit organization that offers medical coverage, workers' compensation, short-term disability, property liability, FSA, dental, and member assistance program benefits

# Program Goals

- Improve health education and awareness
- Detect illness/disease early
- Reduce healthcare costs
- Provide programs on a voluntary/non-discriminatory basis
- Create better healthcare consumers

# Program Eligibility



Enrollees in one of LGC's medical plans:

- Members
- Spouses
- Retirees

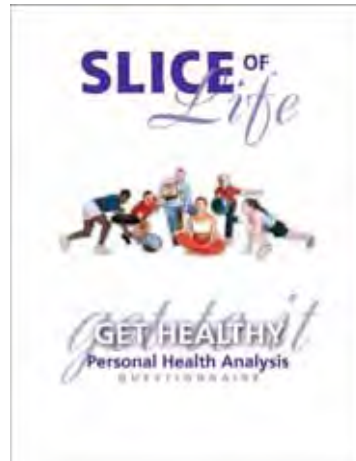
# Steps to Participate

- Complete PHA
  - Online or Paper
- Review Individual Wellness Report
- Contact a Health Coach (if applicable per health status)
- Enroll in a Health Coaching program
  - Lifestyle
  - Chronic Condition





# PHA & Wellness Report



	<b><u>PHA</u></b>
<b># questions</b>	<b>62</b>
<b>Stratifications</b>	<b>Based on PHA answers</b>
<b>Comparison</b>	<b>Y1 &amp; Y2 Wellness Reports</b>

# Program Offerings

## Health Awareness

- Call center access
- On-line programs
- Health education
- Client tailored

## Lifestyle Coaching

- Stress
- Fitness
- Weight management
- Cholesterol
- Smoking cessation
- Blood pressure
- Pre-diabetes
- Menopause
- Osteopenia

## Chronic Condition Coaching

- Diabetes
- Heart disease
- Obesity
- Asthma
- High blood pressure
- GERD
- Migraine
- Cholesterol
- Osteoporosis
- Low back pain

# COACHES



## ***NHLGC provided on-site, customized training to Gordian's health coaches***

- Nurses
- Dietitians
- Exercise specialists
- Wellness coaching
- Diabetes education
- Smoking cessation facilitators
- Personal fitness instructors

# Program Participation: Incentives

## Year 1

- \$50 for completing paper PHA
- \$75 for completing online PHA

- Once PHA completed, gain access to \$300 in annual Health Awareness Reimbursement

## Year 2

- \$50 for completing paper PHA
- \$75 for completing online PHA

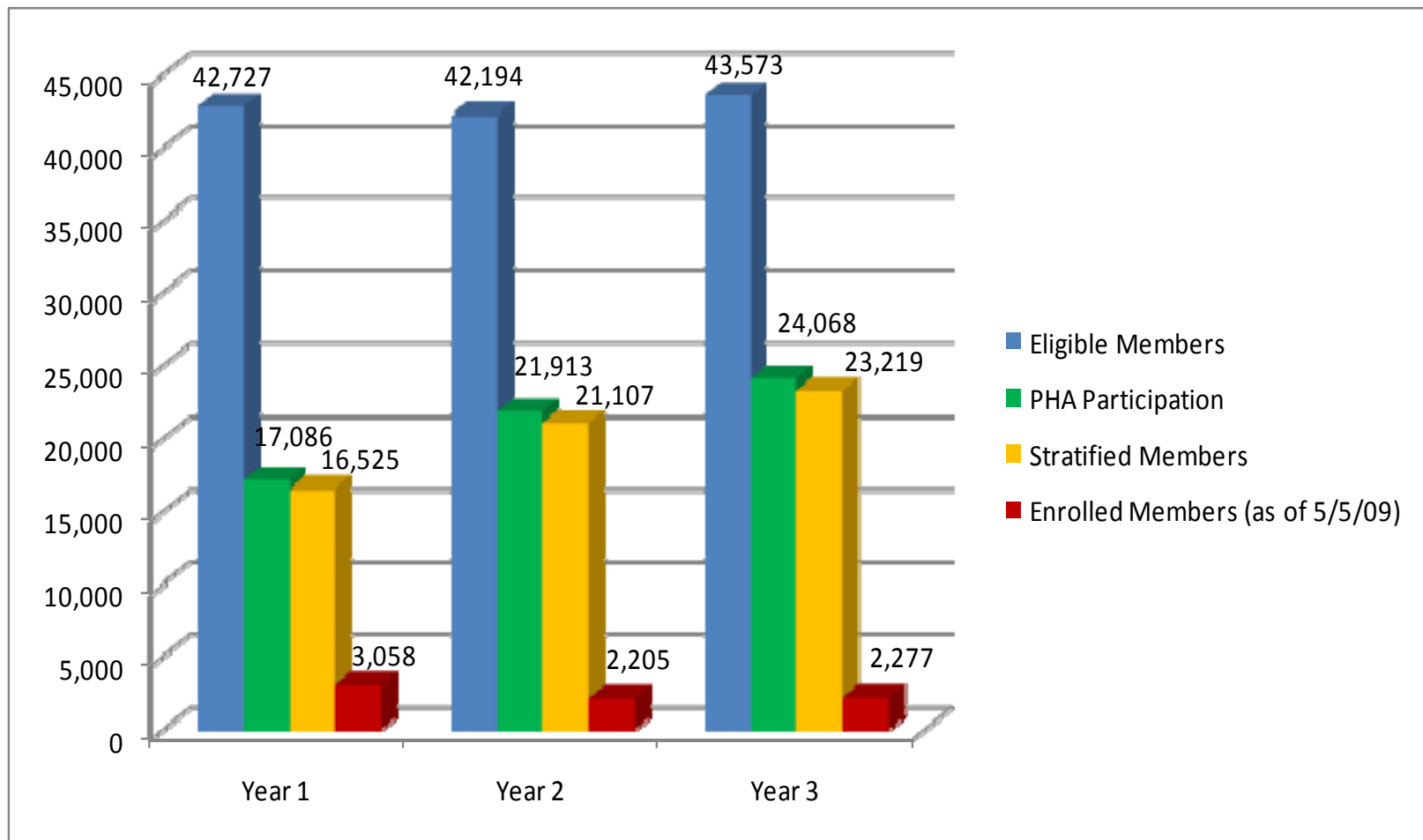
- Once PHA completed, gain access to \$300 in annual Health Awareness Reimbursement

## Year 3

- \$50 for completing paper PHA
- \$75 for completing online PHA

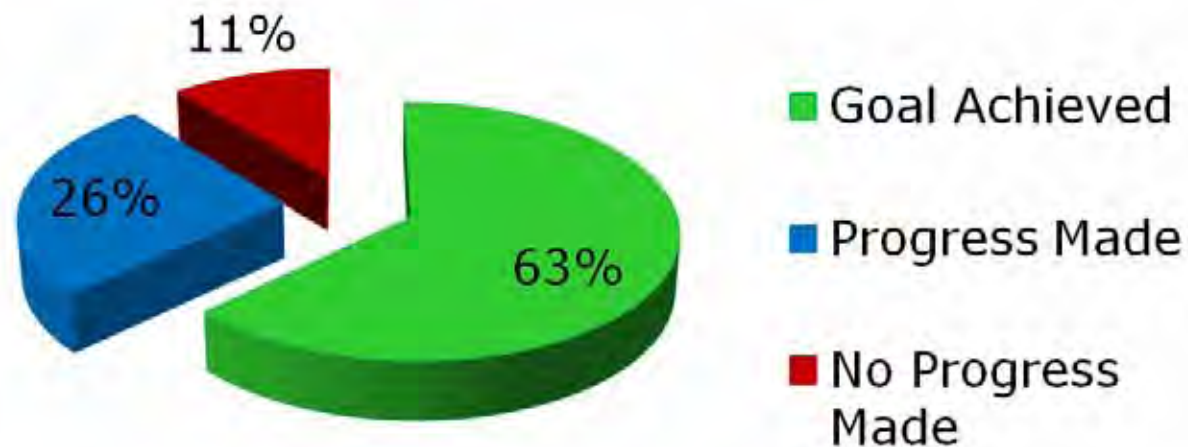
- Once PHA completed, gain access to \$300 in annual Health Awareness Reimbursement

# Participation



# Behavior Change

## Goal-directed Changes of Coaching Participants



# Health Management Individual Programs

## *Slice of Life – Steps to Get Healthy*

- **Get Healthy™ Personal Health Analysis (PHA)**
- **Health Awareness Program**
  - Reimbursement of \$300/person/calendar year for health and safety education courses:
    - Subscriber, Spouse, Retiree, Insured dependents (age 5 and up)
  - Examples of eligible programs:
    - Gym Memberships (Adults only)
    - Tobacco Cessation
    - Karate
    - CPR
    - Weight Watchers®
- **Health at Home™ Handbook**
- **Taking Care of Your Child™ Handbook**
- **LifeResources-Member Assistance Program**
- **Worksite Health and Safety Programs**

# ROI Results

<b>Claims Savings Estimates:</b>	
Y1 PMPM estimate (Per Member, Per Month)	\$8.61
Y2 PMPM estimate	\$20.06
<b>Productivity Savings Estimates:</b>	
Y1 PEPY estimate = 0.379% (Per Employee, Per Year)	\$240.85
Y2 PEPY estimate = 0.363%	\$230.69
<b>Pgm Costs: Participation Incentives &amp; Vendor Fees</b>	
Y1 % Incentives to Total Cost	61%
Y2 % Incentives to Total Cost	76%
<b>ROI Estimates:</b>	
Y1	1.43-to-1
Y2	2.40-to-1
<b>Two-year Net Benefit Estimate</b>	<b>\$5,863,509</b>
<b>Two-year ROI Estimate</b>	<b>1.92-to-1</b>

## Population Health Management



# NHLGC's Bottom Line

- 14 years running NHLGC observed:
  - Rate increases 12-23%
- For both July 2007 and Jan 2008 pools:
  - NO OVERALL RATE INCREASES!

# *New Hampshire*

## *Quality Improvement Learning Teams*

**Reducing Preventable Risk Factors that  
Predispose to Chronic Disease**

**\*Focus on reducing childhood obesity\***



Multi-State Learning Collaborative:  
**Lead States in Public Health  
Quality Improvement**

**This work was funded  
by the Robert Wood Johnson Foundation  
Multistate Learning Collaborative -3 Grant # 64188**

# Selection process:

## Mini-Collaboratives (QuILTs)

- RFP
- Ranked target area:
  - Reducing Preventable Risk Factors that Predispose to Chronic Disease
    - Focus on reducing childhood obesity
- Formal proposal review process
- Aligned with state health priorities and strategic plan

# QuILTs

- Currently: 1<sup>st</sup> of 2 cohorts, 3 each, 15 months
  - Caring Community Network of the Twin Rivers
  - Lakes Region Partnership for Public Health
  - Mascoma Valley Health Initiative
- Content experts
  - Regina Flynn, Health Promotion Advisor - KidPower! Program, NH DHHS - Nutrition & Health Promotion
  - Mindy Fitterman, M.Ed., R.D., Nutrition Consultant, NH Fruit and Vegetable Program DHHS, Division of Public Health Services
- Timeline
  - Kickoff 9/08
  - Monthly meetings – conference call, LiveMeeting, in person
  - Mid session: 4/09
  - Completion 11/09
  - Mentors to Cohort 2 through 4/2011



Caring Community Network of the Twin Rivers

Working Together for Healthier Communities

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841 Central Street, Franklin, NH 03235 Telephone (603) 934-0177 Fax (603) 934-2805 website [www.ccntr.org](http://www.ccntr.org)

# **Childhood Weight Management and Obesity Prevention Quality Improvement**

## **Serving a Population of over 34,000**

### **Michael Loomis, MPH**

### **Community Program Specialist**



Multi-State Learning Collaborative:  
**Lead States in Public Health  
Quality Improvement**

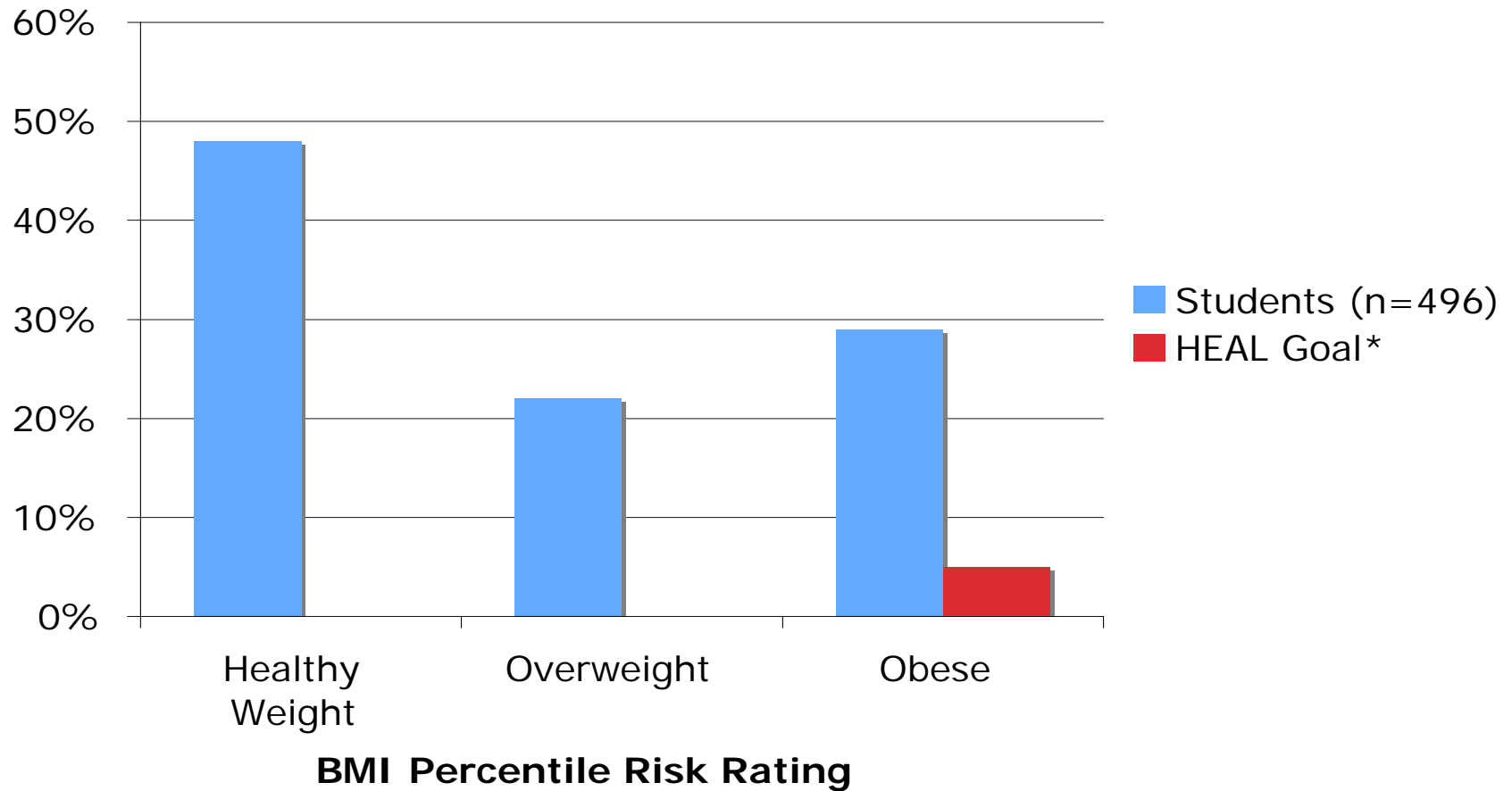
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Multistate Learning Collaborative -3 Grant # 64188

# Team Members

- Rick Silverberg, LICSW (CCNTR)
- Michael Loomis, MPH (CCNTR)
- Sally Minkow, BSN, CHES (LRGH)
- Rick Wilson, MD (LRGH)
- Melissa Rizzo, M.Ed (LRGH)
- Wendy Pavnick, PA-C (Health First Family Care Center, FQHC)

# Assessment of Need

**2007-2008 Age/Gender Specific Body-Mass-Index (BMI) Percentile for Franklin School District Kindergarten-4th Grade**



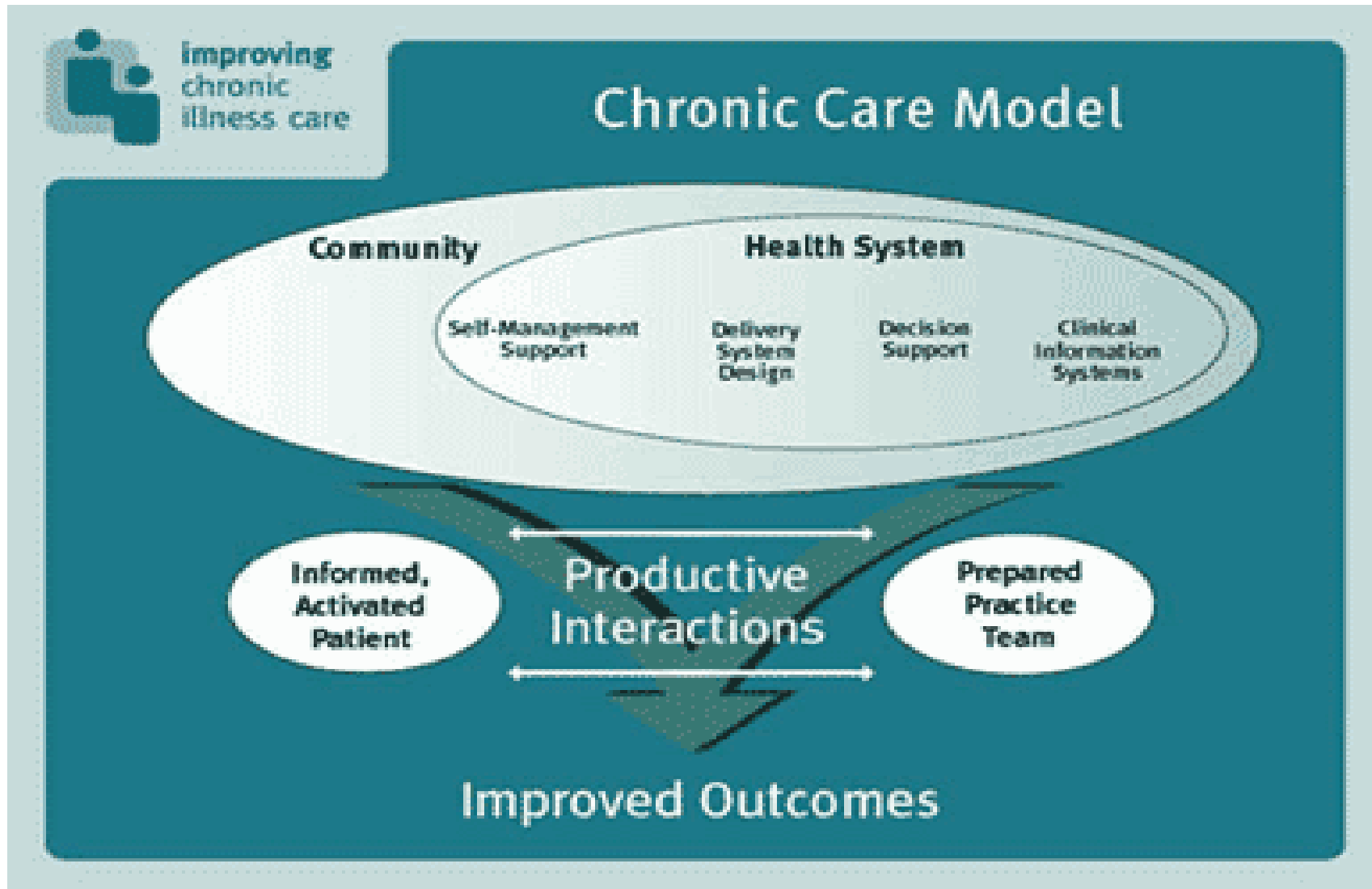
- Upon notice to parent from school nurse of overweight or obese status and health risks related, parents respond with negative feedback with noted reflection to absence of discussion during primary care visit
- Run report at 3 local primary care practices of children ages 2-19 with a well-child visit in 2007 fiscal year with a documented BMI or BMI percentile
- Focus on Primary Care Setting and how weight related risk and behavioral assessment is being delivered to youth



# PLAN

- Documentation Rates Baseline:
  - BMI documentation rates in 2-19 year olds with a well-child visit between 7/1/07-6/30/08 among 3 local primary care practices vary (12.6-90%)
- EMR well-child vital sign template with BMI risk rating calculator identified and uploaded
- PCP “Wellness Champion” to test QI in clinic

# CHRONIC CARE MODEL!



# PLAN

- To begin process, educate providers on BMI measures, community profile, available referral resources
- Update Medical staff on research identifying weight-related health as an indicator for chronic disease risk
- Motivational Interview training
- BMI behavioral risk screening tool
- EMR technology that auto-calculates BMI risk rating at well-child office visit

# Improvement Theory

- The team will improve health care provider access to timely BMI risk rating analysis through redesign of clinical flow to assess behavior, provide effective communication strategies and referrals, and interpret weight related health into diagnosis and treatment
- Goal of all 3 Primary Care Practices documenting at least 65% of children's BMI seen in the following year

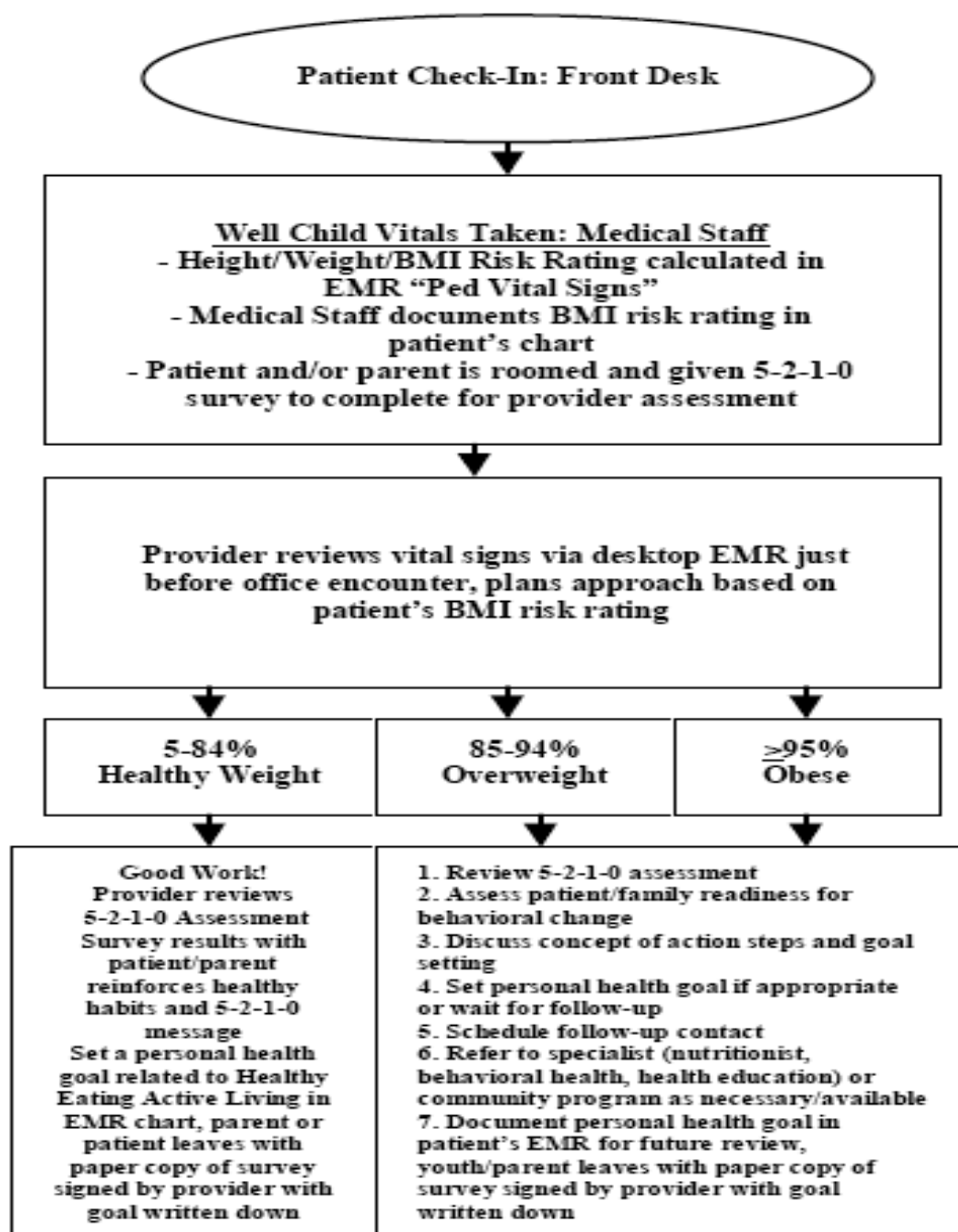
# DO

- Review evidence and recommendations for increasing assessment, prevention, treatment and clinical guidelines
- Identify EMR BMI risk rating tool and upload for prompt evaluation at time of visit
- Designate a “Wellness Champion” in clinic
- Create and educate medical staff on clinical office flow for weight-related health risk factor assessment

- Document SM goal in pt's chart as a measurable health indicator
- Educate providers on referral resources to community HEAL interventions
- Identify locations suitable for outreach activities to distribute printed materials to community members



**CCNTR Weight-Related Health Risk Assessment  
Well Child Visit Clinical Office Flow (Ages 2-19)**



Ped Vital Signs: Sam I Test1

9 years 1 months

BMI Classification: Overweight

Measurements

Weight  lbs  oz  
 lbs  kg  
 Height  in  cm  
 Head Circ  in  cm

Percentiles

Override

Weight  %  
 Height  %  
 Head Circ  %  
 Body Mass Index:  BMI  %  
 Body Surface Area (m2):

Vitals

Temp (F)  Site  Respirations   
 Pulse Rate  Rhythm  BP:  /  mm Hg  
 Peak Flow  PF (predicted)  O2 Sat  %

Comments:

Taken by:

<input type="button" value="HPI"/>	<input type="button" value="Ped Vital Signs"/>	<input type="button" value="In-house Labs"/>	<input type="button" value="Histories"/>	<input type="button" value="ROS"/>	<input type="button" value="Ped PE 6-11 yrs"/>
<input type="button" value="Impression &amp; Plan"/>	<input type="button" value="Prescriptions"/>	<input type="button" value="M Documentation"/>	<input type="button" value="E&amp;M Advisor"/>	<input type="button"/>	<input type="button"/>





## Survey for All Patients at Well-Child Visits

In our office, we are interested in discussing the aspects of a healthy lifestyle with all our patients. While you are waiting to see the doctor, it would be helpful if you would please take a moment with your child to answer the following questions and we will review the answers during your visit. We realize how difficult it is to do all the right things all the time and recognize the questions below only reflect a small portion of the challenges that face us every day.

**Patient name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Date:** \_\_\_\_\_

		True	False
<b>5</b>	I/my child eats 5 or more servings of fruits and vegetables most days.	<input type="checkbox"/>	<input type="checkbox"/>
	I/my child eats breakfast every day.	<input type="checkbox"/>	<input type="checkbox"/>
	I/my child eats dinner at the table with the family at least 2 times per week.	<input type="checkbox"/>	<input type="checkbox"/>
<b>2</b>	I/my child watches TV, videos or plays computer games less than 2 hours per day.	<input type="checkbox"/>	<input type="checkbox"/>
	I/my child does not have a TV in the bedroom.	<input type="checkbox"/>	<input type="checkbox"/>
<b>1</b>	I/my child participates in some type of physical activity in or outside of school for at least 1 hour every day.	<input type="checkbox"/>	<input type="checkbox"/>
<b>0</b>	I/my child does not regularly drink juice, soda or punch.	<input type="checkbox"/>	<input type="checkbox"/>
	I/my child drinks skim/nonfat milk or 1% rather than 2% or whole milk.	<input type="checkbox"/>	<input type="checkbox"/>

On a scale of 0 (not ready) to 10 (very ready), how ready are you to consider making a change in one of the areas below? (please circle the number that best represents how ready you are.)

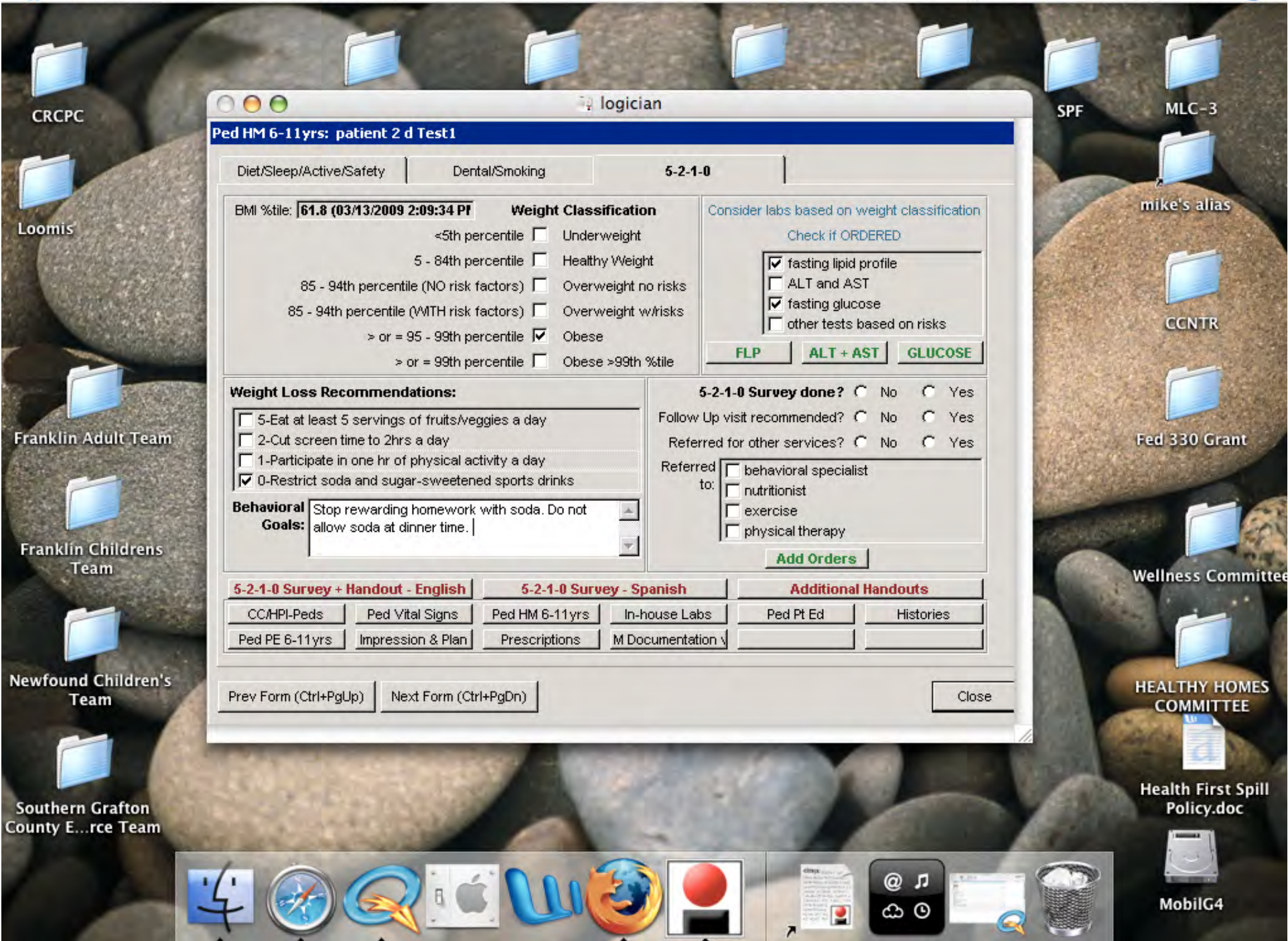
**0 – 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10**

<b>5</b>	<b>2</b>	<b>1</b>	<b>0</b>
Eat at least 5 servings of fruits and vegetables on most days. Limit 100% fruit juice.	Reduce screen time to 2 hours or less every day.	Participate in at least 1 hour or more of moderate to vigorous physical activity every day.	Restrict soda and sugar sweetened sports and fruit drinks. Drink water and 3-4 servings of fat-free/skim or low-fat milk instead.
<b>Ideas for Change</b>			
<ul style="list-style-type: none"> <li>✓ Try one new vegetable or fruit each week.</li> <li>✓ Choose a vegetable with dip for a snack.</li> <li>✓ Add fruit to my cereal</li> <li>✓ Switch sweets to fruit.</li> <li>✓ Eat 2 or more family meals together each week.</li> <li>✓ Eat breakfast</li> <li>✓ Limit snacks after dinner</li> </ul>	<ul style="list-style-type: none"> <li>✓ Plan my TV time</li> <li>✓ Take the TV out of the bedroom</li> <li>✓ Don't eat in front of the TV</li> </ul>	<ul style="list-style-type: none"> <li>✓ Take a family walk after dinner.</li> <li>✓ Wear a pedometer and set a goal for the number of steps I take each day.</li> <li>✓ Play my favorite sport or physical activity</li> </ul>	<ul style="list-style-type: none"> <li>✓ Drink no soda</li> <li>✓ Limit fruit and sports drinks</li> <li>✓ Switch to low-fat or skim milk</li> <li>✓ Drink more water instead of sports drinks or fruit drinks.</li> </ul>

**My/child's personal health goal is to:**

**When I/my child reach the goal, I/my child will be rewarded by:**

**Parent/Guardian signature:** \_\_\_\_\_ **Clinician signature:** \_\_\_\_\_



- CRPC
- Loomis
- Franklin Adult Team
- Franklin Childrens Team
- Newfound Childrens Team
- Southern Grafton County E...rce Team

- SPF
- MLC-3
- mike's alias
- CCNTR
- Fed 330 Grant
- Wellness Committee
- HEALTHY HOMES COMMITTEE
- Health First Spill Policy.doc
- MobilG4

**logician**

**Ped HM 6-11yrs: patient 2 d Test 1**

Diet/Sleep/Active/Safety | Dental/Smoking | **5-2-1-0**

BMI %tile: **61.8 (03/13/2009 2:09:34 PM)** | **Weight Classification**

Consider labs based on weight classification  
Check if ORDERED

fasting lipid profile  
 ALT and AST  
 fasting glucose  
 other tests based on risks

**FLP** | **ALT + AST** | **GLUCOSE**

**Weight Loss Recommendations:**

5-Eat at least 5 servings of fruits/veggies a day  
 2-Cut screen time to 2hrs a day  
 1-Participate in one hr of physical activity a day  
 0-Restrict soda and sugar-sweetened sports drinks

**Behavioral Goals:** Stop rewarding homework with soda. Do not allow soda at dinner time.

**5-2-1-0 Survey done?**  No  Yes  
 Follow Up visit recommended?  No  Yes  
 Referred for other services?  No  Yes

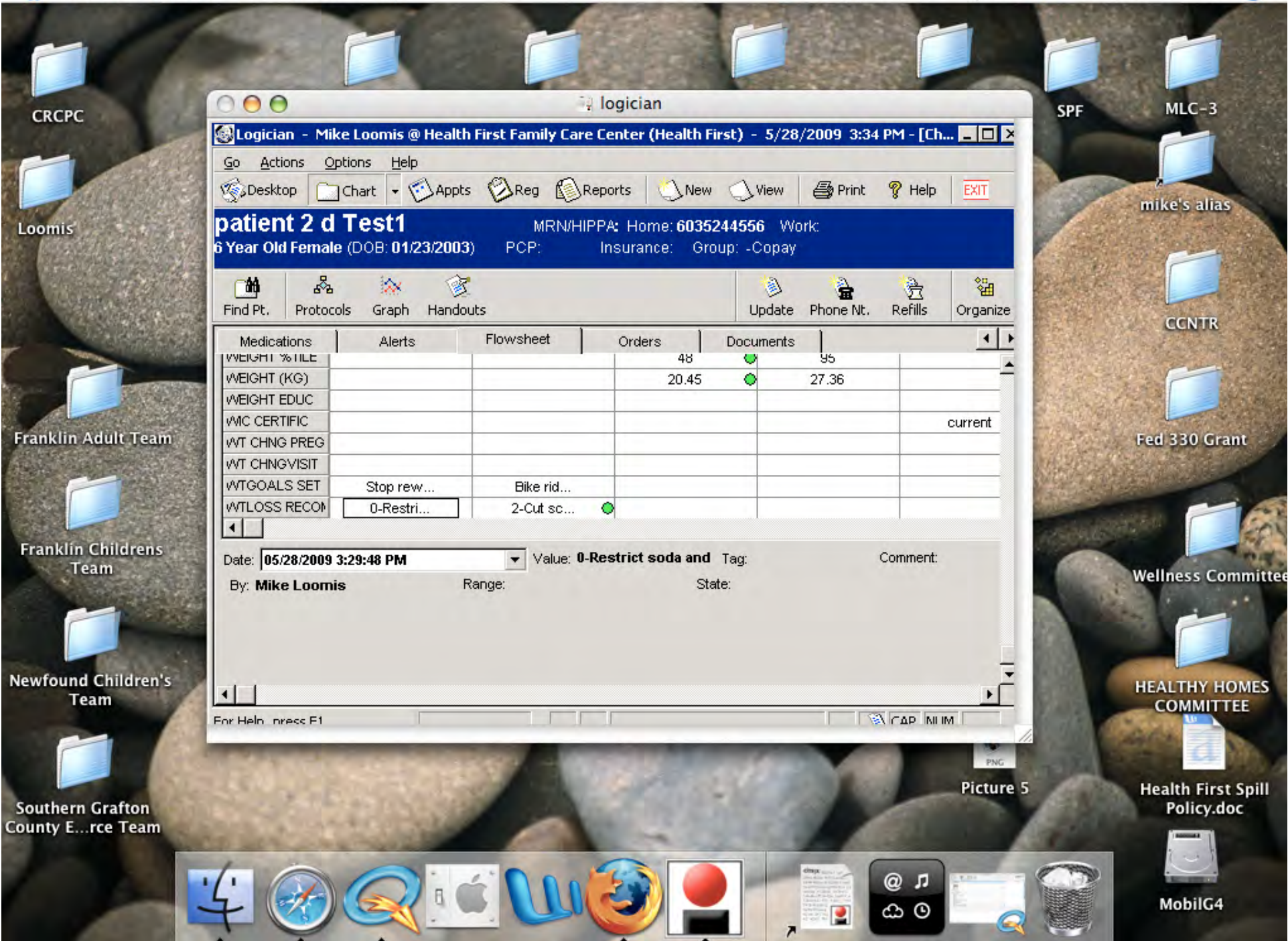
Referred to:  
 behavioral specialist  
 nutritionist  
 exercise  
 physical therapy

**Add Orders**

**5-2-1-0 Survey + Handout - English** | **5-2-1-0 Survey - Spanish** | **Additional Handouts**

CC/HPI-Peds | Ped Vital Signs | Ped HM 6-11yrs | In-house Labs | Ped Pt Ed | Histories  
 Ped PE 6-11yrs | Impression & Plan | Prescriptions | M Documentation \

Prev Form (Ctrl+PgUp) | Next Form (Ctrl+PgDn) | Close



- CRPC
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logician

Logician - Mike Loomis @ Health First Family Care Center (Health First) - 5/28/2009 3:34 PM - [Ch...]

Go Actions Options Help

Desktop Chart Appts Reg Reports New View Print Help EXIT

**patient 2 d Test1** MRN/HIPPA: Home: 6035244556 Work: 6 Year Old Female (DOB: 01/23/2003) PCP: Insurance: Group: -Copay

Find Pt. Protocols Graph Handouts Update Phone Nt. Refills Organize

Medications	Alerts	Flowsheet	Orders	Documents
WEIGHT % ILE			48	95
WEIGHT (KG)			20.45	27.36
WEIGHT EDUC				
WMC CERTIFIC				current
WT CHNG PREG				
WT CHNG VISIT				
WTGOALS SET	Stop rew...	Bike rid...		
WTLOSS RECOM	0-Restri...	2-Cut sc...		

Date: 05/28/2009 3:29:48 PM Value: 0-Restrict soda and Tag: Comment:

By: Mike Loomis Range: State:

For Help, press F1



Name: \_\_\_\_\_ Date: \_\_\_\_\_

## Rx: Physical Activity Prescription

Commit to improving your health by:

*Make  
the  
Move,  
Three Rivers!*

At least \_\_\_\_\_ minutes per day \_\_\_\_\_ times a week

Provider Signature: \_\_\_\_\_



Caring Community Network of the Twin Rivers

441 Central Street, Franklin, NH 03219 (603) 934-0177

Brought to you by the CCNTR Health and Wellness Committee funded by the New Hampshire Charitable Foundation.

# Make the Move

## Physical Activity Guide

*for the Three Rivers Area*



Healthy Heart for Life

*Make the Move!*

*Get Active!*

Spring 2009 Edition

# Walking Guide



*Make  
the  
Move,  
Three Rivers!*

**for the Three Rivers Area**

# STUDY

## GOAL REACHED!

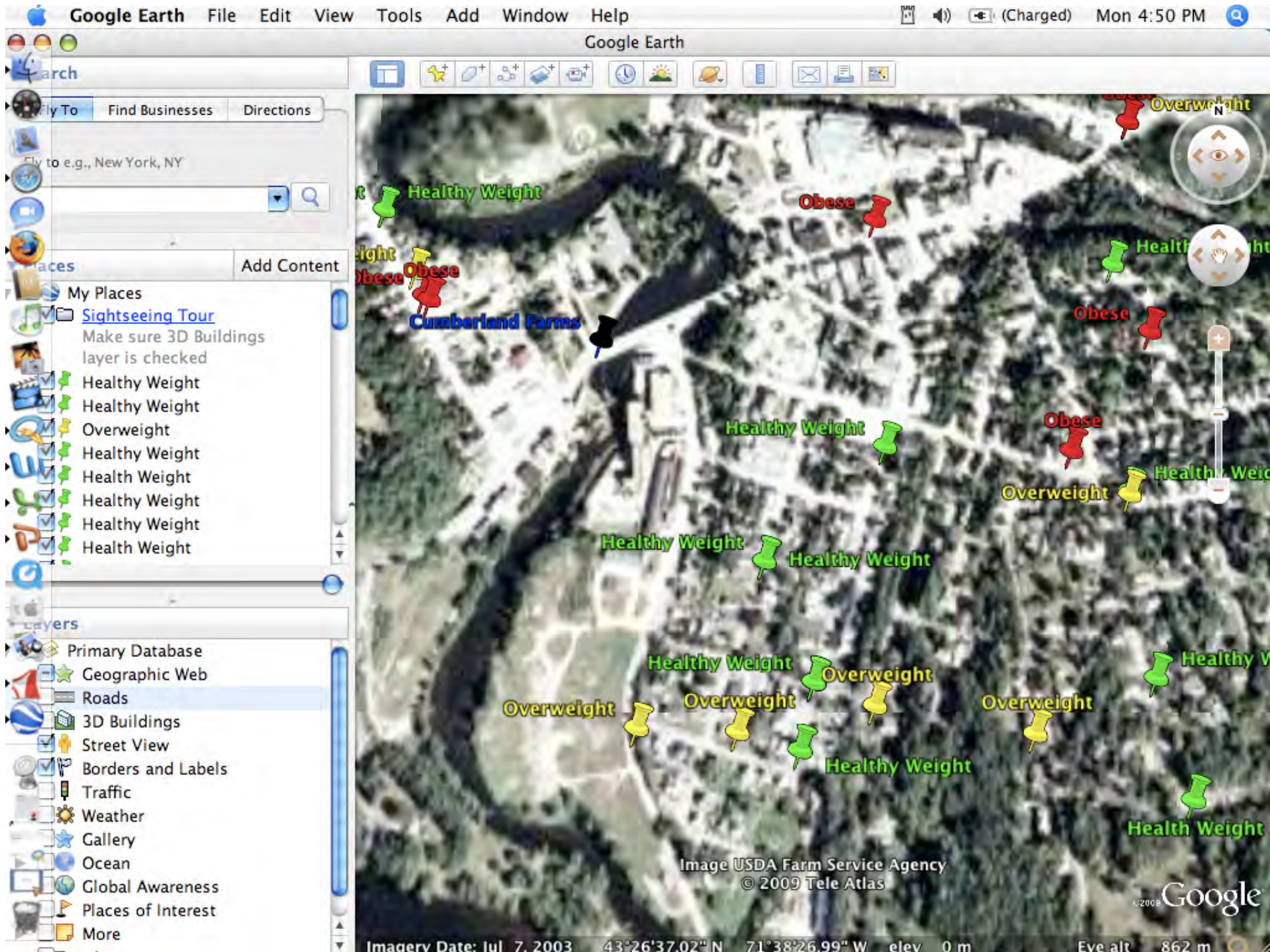
- After 1 year of new EMR applications and provider education, all three Primary Care Clinics were documenting at least 65% of children's BMI and using EMR 5210 tab to discuss weight related health by focusing on preventing the risk factors (72%, 75%, 89%, 92%)
- Promote routine calculation of BMI risk rating at each clinical encounter as a **VITAL SIGN** to encourage weight-related health and its impact on the patient's overall health and well being as well as its impact on public health

# ACT

- Continue to educate and promote the importance of daily behaviors related to 5210 Healthy NH
- Continue to foster collaboration between CCNTR and local PCP about referral for local nutritional and physical activity resources
- Continue to utilize QI tools in day-to-day activities
- Continue broad community outreach to target population

## Establish Future Plans:

- Continue familiarizing CCNTR staff with QI concepts, tools and methods with particular evidence on evidence-based interventions
- Relay obesity statistics, trends and health indicators to health care partners to further develop QI echoing community efforts
- QI will be expanded to other Healthy Eating Active Living (HEAL) sectors in the region (worksites & workplaces, schools, food & recreation industries, communities & municipalities)



Search  
Fly To Find Businesses Directions  
Fly to e.g., New York, NY  
Places Add Content  
My Places  
Sightseeing Tour  
Make sure 3D Buildings layer is checked  
Healthy Weight  
Healthy Weight  
Overweight  
Healthy Weight  
Health Weight  
Healthy Weight  
Healthy Weight  
Healthy Weight  
Layers  
Primary Database  
Geographic Web  
Roads  
3D Buildings  
Street View  
Borders and Labels  
Traffic  
Weather  
Gallery  
Ocean  
Global Awareness  
Places of Interest  
More

Google Earth  
[Navigation icons: Home, Fly, Rotate, Tilt, Street View, History, Layers, Print, Full Screen, Help]

