

**Quality and Productivity Commission**  
**28<sup>th</sup> Annual Productivity and Quality Awards Program**  
**"Los Angeles County: Ahead of the Curve"**

**2014 APPLICATION**

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

**NAME OF PROJECT: POWER GROUP VISIT COMBATS OBESITY**

**DATE OF IMPLEMENTATION/ADOPTION:** JANUARY 14, 2013  
 (Must have been implemented at least one year - on or before June 30, 2013)

**PROJECT STATUS:**  Ongoing  One-time only

**HAS YOUR DEPARTMENT PREVIOUSLY SUBMITTED THIS PROJECT?**  Yes  No

**EXECUTIVE SUMMARY:** Describe the project in 15 lines or less using Arial 12 point font. Summarize the problem, solution, and benefits of the project in a clear and direct manner.

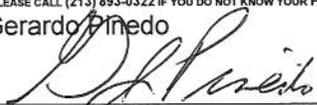
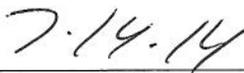
1 Obesity rates in Los Angeles County have soared, climbing from 13.6% in 1997 to  
 2 23.6% in 2011. At MLK, obese patients (BMI>31) struggled to navigate multiple  
 3 appointments distributed between specialty services, including nutrition and  
 4 endocrinology. The volume of patients vying for individual slots generated backlogs that  
 5 delayed treatment. A multidisciplinary team at MLK developed an innovative group visit  
 6 concept to expedite treatment and coordinate care – Preventing Obesity With Eating  
 7 Right (POWER) Group Visit. POWER Patients engage in robust lifestyle modification  
 8 and derive peer support from the group. The group visit includes education, exercise,  
 9 and a cooking demonstration with recipe. Clinicians develop individual treatment plans  
 10 and self-management goals for all participants. The efficient weekly group visit has  
 11 generated substantial service enhancement through improved clinical outcomes,  
 12 expanded access, and increased provider productivity. Thus far, 361 unique patient  
 13 participants have lost a combined 1,110 pounds, and patient satisfaction surveys earn  
 14 consistent high marks. This innovative program was featured on the cover of the LA  
 15 Times in September 2013 as a model for delivering high quality, low cost care.

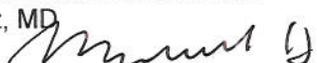
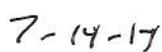
(1) ACTUAL/ESTIMATED ANNUAL COST AVOIDANCE	(2) ACTUAL/ESTIMATED ANNUAL COST SAVINGS	(3) ACTUAL/ESTIMATED ANNUAL REVENUE	(1) + (2) + (3) = TOTAL ANNUAL ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
\$	\$	\$	\$	<input checked="" type="checkbox"/>

ANNUAL = 12 MONTHS ONLY

<b>SUBMITTING DEPARTMENT NAME AND COMPLETE ADDRESS</b> Department of Health Services MLK Outpatient Center 1670 E 120 <sup>th</sup> St; LA, CA 90059	<b>TELEPHONE NUMBER</b>  (424)338-1501
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<b>PROGRAM MANAGER'S NAME</b> Ellen Rothman, MD	<b>TELEPHONE NUMBER</b> (424)338-1501 <b>EMAIL</b> erothman@dhs.lacounty.gov
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<b>PRODUCTIVITY MANAGER'S NAME AND SIGNATURE</b> (PLEASE CALL (213) 893-0322 IF YOU DO NOT KNOW YOUR PRODUCTIVITY MANAGER'S NAME) Gerardo Pinedo 	<b>DATE</b> 7-14-14 	<b>TELEPHONE NUMBER</b> (213) 240-8104 <b>EMAIL</b> gpinedo@dhs.lacounty.gov
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<b>DEPARTMENT HEAD'S NAME AND SIGNATURE</b> Mitchell Katz, MD 	<b>DATE</b> 7-14-14 	<b>TELEPHONE NUMBER</b> (213) 240-8104
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**1<sup>st</sup> FACT SHEET – LIMITED TO 3 PAGES ONLY:** Describe the **Challenge, Solution, and Benefits** of the project.

**CHALLENGE**

- In 2013, the MLK MACC (now the MLK Outpatient Center) referral center had a backlog of patients waiting for endocrine and nutrition visits
- Provision of healthcare was disjointed and uncoordinated. Patients had multiple treatment plans developed separately by the endocrinologist, the primary care clinician, and the nutritionist
- Individual appointments, ranging from 20 minutes in primary care and specialty care to up to 60 minutes in the nutrition setting, limit the number of patients an individual provider could reach in standard clinical session

**SOLUTION: Group Visit for Patients with BMI > 30**

- Develop a group visit that combines all elements of obesity treatment into a single, enhanced visit type
- Gain efficiency by consolidating education that is applicable to all participants
- Maintain individual treatment plans and monitor individual health indicators with pre-visit coordination
- Collaborate with partner organizations to provide innovative lifestyle management skills, such as healthy cooking and exercise. Partner organizations include Champions for Change and Jamie Oliver’s Big Rig Teaching Kitchen
- Accept all individuals with BMI >30 by referral from primary care or specialty care

The POWER Group Visit Format:

- 1) Education: The endocrinologist leads discussion of the physiologic changes of obesity and health consequences, including cardiovascular disease and diabetes. The nutritionist teaches diet and lifestyle modification skills
- 2) Exercise: Group leaders use materials from Instant Recess to guide participants through light calisthenics
- 3) Eating Right: A cooking demonstration offers practical, hands on advice on eating better
- 4) The endocrinologist and the nutritionist provide targeted individual attention to each participant during the course of the session

**BENEFITS**

Benefits to the patient:

- Improved access to endocrinology and nutrition services
- Coordinated, multi-disciplinary treatment plans tailored to each individual
- Empower patients to set achievable self-management goals.
- Peer support from other group members
- Reduce multiple visits to various clinics into one multi-disciplinary session
- Reduce complications of obesity and prolong healthy life

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Benefits to the facility:

- Increased clinic productivity with a decreased cost per visit
- Reduced backlogs to Endocrinology and Nutrition clinic
- Ability to meet managed care access standards through:
  - Increased access to the specialty clinics of Endocrinology and Nutrition thus meeting the standard of access within 15 days of the request.
- High patient satisfaction (see graph II below)
- Improvement in quality health indicators
- Long term benefit of decreased costs by reduction in specialty visits, hospitalizations, ER visits, Urgent Care visit.

Outcomes

- Two key factors were selected for improvement measurement and evaluation:
  - Weight Loss
  - Patient Group Visit Experience Evaluation (**goal:** overall satisfaction rate-90%)
- A comparison of the first visit with the last visit data shows that over 70% of participants achieved weight loss, and that the average weight lost directly correlated with the number of group visits attended (see graph I below)

COST AVOIDANCE, COST SAVINGS, AND REVENUE GENERATED (ESTIMATED BENEFIT): If you are claiming cost benefits, include a calculation on this page.

The POWER group visit generates service enhancement and cost efficiency.

- Patient satisfaction: scores demonstrate that patients enjoy the innovative format of the group visit.
- Productivity: Providers achieve significant improvement in productivity. A nutritionist can evaluate 4-6 patients per session, and the endocrinologist can evaluate 8-10 patients per session. An average POWER Group visit accommodates 20 patients. To see the 20 patients in individual nutrition visits would require 3.3 sessions, and for the endocrinologist to complete 20 individual visits would require 2.5 sessions.
- Improved Clinical Outcomes: The group generates excellent clinical outcomes with participants achieving meaningful weight loss. The average amount lost per patient increases with number of visits attended.

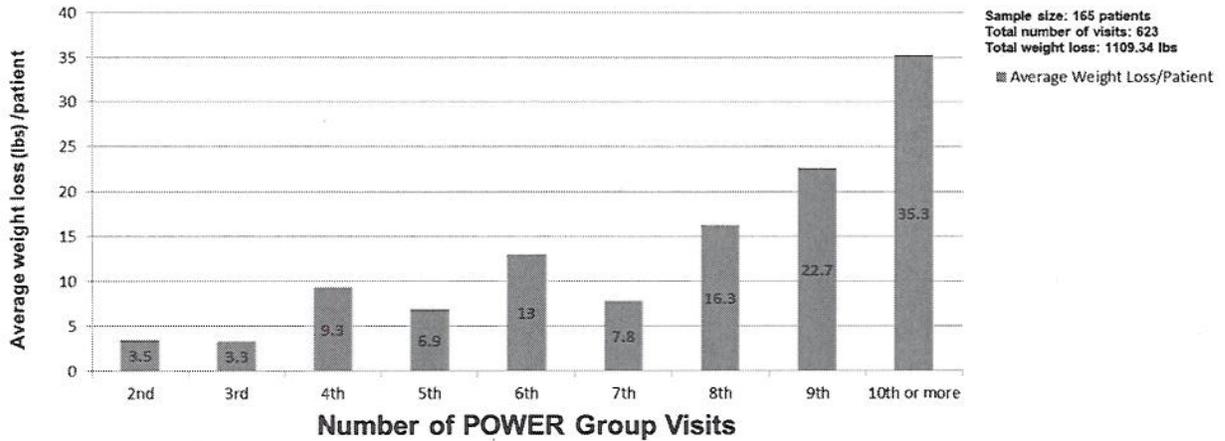
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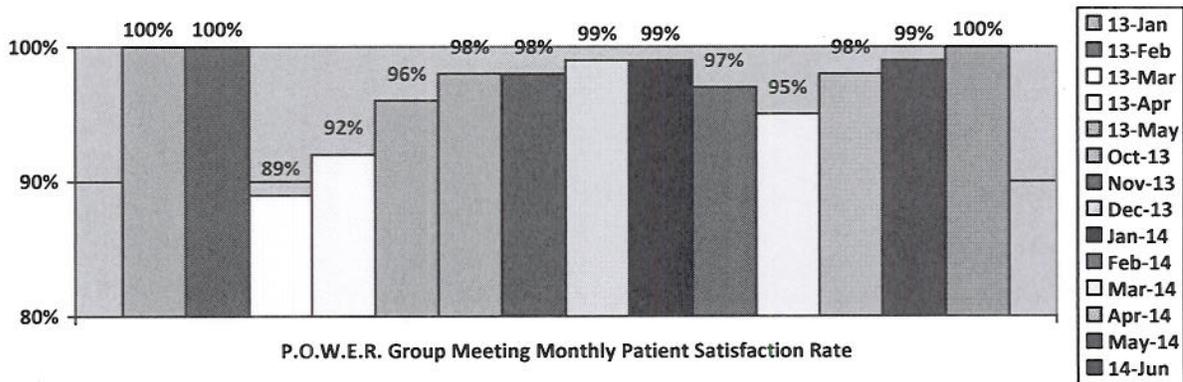
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**Graph I:** Correlation between weight loss and number of POWER Group visits attended per patient.



**Graph II:** Patient Group Visit Experience Evaluation results  
 (Aggregate of patient responses to 5-question survey ranked on a Likert scale)



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**Cost Avoidance:** Costs that are eliminated or not incurred as a result of program outcomes.

**Cost Savings:** A reduction or lessening of expenditures as a result of program outcomes.

**Revenue:** Increases in existing revenue streams or new revenue sources to the County as a result of program outcomes.

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\$	\$0	\$	\$	<input type="checkbox"/>

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