Bite To Balance

A novel approach to group pediatric obesity care

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Highland Hospital
Alameda Health System
Oakland California
30% of Highland pediatric population meet criteria for obesity
Average family income $18K
Average walk to corner store = 1 block or 2 minutes
Average walk to grocery store = 10 blocks or 20-30 minutes
Current State at AHS

Poor show rates for nutrition visits (<50%)

“One provider – One patient” paradigm suboptimal
  • Inconsistent messaging
  * Limited “value time”
  * Provider frustration

Poor patient (and provider) care experience
Bite To Balance: Goal

Key: Fresh produce at visits as incentive and intervention
Bite To Balance: Project Description

- Patent pending
- 7 group visit curriculum
- Weekly produce for 6 months
- Cohorts of 5-15 families
- Team:
  - ✓ REGISTERED DIETICIAN
  - ✓ PEDIATRIC PROVIDER
  - ✓ COORDINATOR
  - ✓ PEER FACILITATOR
Bite To Balance: Project Description

Group Visit Advantages:

• 2 hours of value time = full family interaction, deeper relationship
• Seen by medical provider
• Fresh produce at visit
• Community experience
Bite To Balance: Community

- Groups offered in English & Spanish
- Each with slightly different activities
- Text message reminders and incentives
Outcome 1: Patient Engagement
  • Enrollment
  • Engagement = “show rates”

Outcome 2: Health measures
  • BMI
  • Serum obesity markers
Outcome 1: Patient Engagement

- 86 obese children participated
- 76.2% “show rates”
- Questionnaires
Outcome 2: Health measures

BMI:
- Improved in 68%
- 89% maintained or improved BMI%

Serum obesity markers:
- No statistically significant change
Profit:
8 x $234 x (7 visits) = $13,104

Expenditures/Investments:
* Staffing/other = $878.50 x (7 visits) = $6149.50
* Veggie bags = 12 x 24 weeks x $20/bag = $5760

Total = $11909.50 net per cohort (10% ROI)

* Assumes 66% show rate average (8 of 12 participants)
Bite To Balance: Pay Off

- Positive ROI for program
- Expenses = value to patients
- Innovation
  - Population-specific
- Population Health standpoint
  - *Salutogenesis:*
    Concept of total health -- as opposed to disease treatment/prevention
An effective food assistance policy would recognize that diseases related to food insecurity are diseases of inequity.
Future Directions

- New grant from USDA looking at mixed groups – adults, children, diabetics, gestational diabetics
- Group visit model
- Opt-out rather than in
Incentives matter: barriers to care are significant
Create ways to increase engagement
Positive ROI key for sustainability
Relationships matter

“I liked how the nutrition labels were broken down and explained. I liked meeting new people.”
Bite To Balance: Thank you!

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