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COMMENTARY

Building Physician Competency in Lifestyle Medicine: A Model for Health Improvement



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magine for a moment that you are the leader of a self-insured Fortune 500 manufacturing company and are in charge of keeping thousands of workers healthy and productive. Every year you watch as healthcare costs rise and many in your corporate family struggle with obesity, diabetes, and other preventable chronic conditions. As rising healthcare costs threaten your bottom line and ability to compete globally, what would you do?

For the Cummins Corporation, a manufacturer of large engines, the answer was to look at the root causes of poor health in their large employee population and begin a partnership with the American College of Preventive Medicine (ACPM) to improve the type of care their inhouse physicians and clinicians provide. Instead of walking away from a medical visit with a drug script in hand, an employee might walk away with a food prescription, an exercise prescription, and a sleep prescription, along with a specific action plan for adhering to the regimen jointly developed with their provider. Sound far-fetched?

In September 2016, ACPM and our partner the American College of Lifestyle Medicine released the Lifestyle Medicine Core Competencies program, a culmination of more than 4 years of work to create a first-of-its-kind evidence-based curriculum for physicians. The program teaches physicians how to incorporate lifestyle medicine into practice and establishes a new standard for primary care focused on disease prevention, health promotion, and care coordination.

Although these aims have long been the focus of preventive medicine, the release of the curriculum is particularly timely as healthcare delivery systems accelerate their transformation toward value-based care and payment reform. For example, the Medicare Access and Children's Health Insurance Program Reauthorization Act of 2015 introduced new reimbursement rules that will require physicians to redefine their role in health—much like the Cummins providers did—and lead to more upstream practice interventions, such as increased counseling and behavior coaching.

The new course provides a basic grounding in lifestyle medicine, a branch of evidence-based medicine in which comprehensive lifestyle changes are used to help prevent, treat, and reverse the progression of many chronic diseases by addressing their underlying causes—such as poor nutrition, sedentary lifestyle, smoking, alcohol abuse, stress, and poor sleep, to name a few. The core competencies of lifestyle medicine were identified by a blue ribbon panel of medical specialty societies and published in the *Journal of the American Medical Association* article "Physician Competencies for Prescribing Lifestyle Medicine" in 2010. The panel was jointly led by ACPM and the American College of Lifestyle Medicine and included representatives from the American College of Physicians, American Academy of Family Physicians, American Academy of Pediatrics, American Osteopathic Association, American College of Sports Medicine, and American Medical Association.

The 15 core competencies from the following five domains address aspects of care related to patient-physician interactions, clinical best practices, and the use of health resources:

- **Leadership**—Promote healthy behaviors and environments as a foundation of care
- **Knowledge**—Reinforce the value of positive lifestyle changes and sustained support
- Assessment Skills—Identify and monitor behaviorlinked health outcomes
- Management Skills—Establish effective relationships and develop evidence-based action plans to sustain healthy lifestyle behaviors and environments
- Use of Office and Community Support—Utilize team care models and community resources to deliver care, measure health outcomes, and improve interventions

This care philosophy, advanced through continuing medical education, is desperately needed if we expect to

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effectively address ongoing national health epidemics. On the front lines of this battle, doctors cite inadequate confidence and lack of knowledge and skill as major barriers to counseling patients about lifestyle interventions. In addition, medical students and residents are not getting formal training in major concepts that are known to influence health, such as nutrition. Efforts are under way to incorporate the lifestyle medicine curriculum into medical school teaching, but such standardizations and impacts are years from becoming a reality.

Physicians caring for patients today, and their trainees learning by example, should pick up lifestyle medicine immediately to fight ongoing health epidemics and keep pace with reimbursement reform that is emphasizing prevention, sustained wellness, and coordinated care models. Addressing all of these aspects, the new Lifestyle Medicine Core Competencies Program helps practitioners enhance patient-centered care, invest in behavior modification and lifestyle prescriptions, and conform to new value-based performance measures. Engaging patients to take responsibility for their care, via an effective physician–patient collaboration, can have a substantial impact on health outcomes.

The goal of the curriculum is to raise the bar for all practicing physicians so that basic lifestyle medicine becomes a part of core medical practice and culture. Participants who complete the 30 hours of Continuing Medical Education will have a well-rounded training on the major topics in lifestyle medicine—including clinic processes—and will receive a certificate of completion. The course covers a wide variety of topics and focuses on practical skills practitioners can implement immediately. Program modules cover:

- Core competencies of lifestyle medicine
- Coaching behavior change
- Alcohol use risk reduction
- Nutrition
- Sleep health

- Emotional wellness/stress reduction
- Physical activity
- Tobacco cessation
- Diabetes and prediabetes
- Electives

ACPM is also in the process of developing new electives to be launched over the next 4–12 months, including a module on Medical Nutrition Therapy, four modules on reducing cardiovascular disease risk factors among high-risk women, and an Introduction to Culinary Medicine.

The American College of Lifestyle Medicine and ACPM are partnering with integrated health systems, medical societies, health plans, corporations, and medical education programs to integrate lifestyle medicine into the culture of American medicine and ensure that it is considered a first-line therapy, not an afterthought. Innovative employers, such as Cummins, are embracing lifestyle medicine as a relatively low-cost way to improve health outcomes by addressing the root cause of illness. Their new 28,000-square-foot LiveWell Center in Columbus, Indiana—designed to serve a population of 17,000—provides guidance on adopting healthier habits from lifestyle coaches and offers classes on how to prepare quick and healthy whole food, plant-based meals. To effectively administer lifestyle medicine, the physician/provider staff is undergoing training in the Lifestyle Medicine Core Competencies Program. Their efforts are already resulting in a healthier, more productive workforce with lower absenteeism and lower rates of chronic illness.

Lifestyle medicine is a collective journey that providers, health officers, employers, insurers, and patients must all travel together. To join this movement and learn more about the Lifestyle Medicine Core Competencies Program, contact Danielle Pere, ACPM Associate Executive Director, at lmccinfo@acpm.org or (202) 466-2044 x105, or go to www.acpm.org/page/lmprogram.