

Improving the office environment

Summary

Obese patients commonly report that their weight is a barrier to receiving good quality health care. This can result in decreased quality and satisfaction with care. Specific and practical steps are outlined that can improve the physical environment and make care more accessible and comfortable in office environments.

Obese patients frequently are embarrassed by their weight, report being shamed by their health care providers because of their weight, and report discomfort at the process of being weighed and receiving common office based procedures. As a result, obese patients delay care, cancel visits, and have lower rates of receiving appropriate prevention oriented examinations. This problem can be attributed to many factors, such as personal shame related to weight gain or failure of weight loss, physician reluctance to perform pelvic exams in reluctant patients, inappropriate communication skills of staff performing weighing procedures, and prior experiences of stigma in health care settings. In a recent study, 46% of obese women reported small gowns, narrow exam tables, and inappropriately sized equipment were barriers to receiving care.¹ In addition, 35% reported embarrassment about being weighed as a barrier to care. Only one in eleven physicians reported having scales that can measure patients over 350 pounds.

According to this study, many health care settings simply do not have equipment to accommodate obese patients. The following table highlights the percentage of health care providers who reported that these supplies are readily accessible to accommodate large patients.

MEDICAL EQUIPMENT	% AVAILABLE
Scales for patients above 350 pounds	9%
Gowns for very large patients	21%
Armless waiting room chairs	46%
Longer speculum for pelvic exams	80%
X large blood pressure cuffs	83%

Furthermore, when patients were asked to indicate why they avoided gynecological cancer screening visits, inadequate equipment and weighing procedures were frequent barriers. The following table highlights these findings.

REPORTED BARRIER TO SCREENINGS	BMI LEVEL			
	25-35	35-45	45-55	> 55
Embarrassment at being weighed	20%	39%	45%	44%
Small gowns, equipment	21%	45%	60%	75%

¹Amy NK, Aalborg A, Lyons P, & Keranen L. Barriers to routine gynecological cancer screening for White and African-American obese women. *Int J Obesity & Related Metabolic Disorders*. 2006; 30: 147-155.

The purpose of this module is to assist health care providers and office managers to provide safe, accepting and suitable environments for delivering healthcare to large patients. Providing proper seating, medical equipment, and accommodations for obese patients is an ethical responsibility.

Several steps are key in efforts to improve the office environment for obese patients:

1. *Assess the environment*

Use the checklist provided in this module to assess the office environment, and determine whether existing equipment is suitable for patients of large size.

Walk through your office from the perspective of a heavier patient with disability. Is the office welcoming to a heavy patient?

2. *Plan ahead*

Obtain necessary equipment for obese patients including large size blood pressure cuffs, exam specula, and gowns.

Request that your staff use specific scripts to promote sensitive practices when weighing patients.

3. *Promote sensitivity*

Encourage all staff and clinicians to be sensitive to the needs of obese patients. Provide sensitivity training (e.g., motivational interviewing) where needed.

4. *Obtain feedback from patients*

Ask for assistance from a patient advocate or from a patient advocacy organization regarding the suitability of the office environment for obese patients.

When performing patient satisfaction surveys, ask about comfort of the office environment.