Table 2. Most frequently reported factors/themes influencing primary care referrals and sample quotes

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| Factors/Themes | Categories | Sample Quotes |
| Lack of clarity regarding a community health dietitian’s role in chronic disease management | Community health vs specialty dietitians | *MD: as an internal medicine practice we’re seeing people with multiple co-morbidities that not only have diabetes, but they also have kidney disease. So for me in my head, the best person for that -- the best dietitian for that is someone who’s well versed in diabetes and heart disease and kidney disease. So for me that’s where I tend to go to.* |
| Insurance imposed constraints | Lack of MNT coverage  Long term support for MNT counseling | *Excerpt 1*  *MD: What I have gotten in the past, and it’s been a while to be honest when I’ve referred to [the hospital], and it’s been a long time is when they would call and say they couldn’t see them because it wasn’t paid by insurance and the person wasn’t willing to pay whatever it is.*  *Except 2*  *NP: It’s not -- I mean, maybe one meeting is helpful, but most of these people need long-term like, following. So I’m not sure. I mean, yeah maybe with diabetics you can do some carb counting and that can help them. But -- so I guess maybe cost wise maybe their insurance will cover for one meeting with a dietician, but is that really gonna help them. I mean this is a lifestyle change. It’s gonna happen over months to years*. |
| Perceived patient readiness to follow through to MNT referral | Rapport  Rapid solution (quick fix) | *It’s not -- I mean, maybe one meeting is helpful, but most of these people need long-term like, following. So I’m not sure. I mean, yeah maybe with diabetics you can do some carb counting and that can help them. But -- so I guess maybe cost wise maybe their insurance will cover for one meeting with a dietician, but is that really gonna help them. I mean this is a lifestyle change. It’s gonna happen over months to years.* |
| Service inaccessibility | Scheduling/time conflicts  Distance/Transportation | *Excerpt 1*  *Sometimes I think it’s accessibility. I mean, some of our patients -- it seems to be more and more don’t have -- they pick location based on accessibility…tthat kinda thing to their physician home, much less getting to any other referrals. You know, it’s kind of -- it’s a barrier for them. Or they just simply, “I’ve already spent an hour going to a doctor. I don’t have another hour to go now to a dietician and then follow up with them.” It’s just the accessibility of having to go multiple places for…*  *Excerpt 2*  *RN Manager:: Ease of access, too. Knowing they could do it online as opposed to I have to set up an appointment, ‘cause I feel they already are trying not to, you know, come to appointments with us because it affects their work schedule. It affects their life schedule. So something that would fit easily into their daily schedule.*  *NP: And a lot this population is an older population so there’s transportation issues. There’s weather. Any time it’s bad, I’m not going out of the house. You know, so if they could get it online through more phone calls or something. You know.* |