



Community Health Action Plan 2016

Designed to address Community Health Assessment priorities (Form updated Jan. 2016)

*Three priorities identified during the 2015 CHA process are required to be addressed. Each priority should have a separate "Community Health Action Plan". Action plans are due by **the first Monday in September following the March submission of the CHA, per consolidated agreement.***

County: Jackson

Period Covered: 2016-2018

Partnership/Health Steering Committee, if applicable: Healthy Carolinians of Jackson County

Community Health Priority identified in the most recent CHA: Injury & Substance Abuse Prevention

Local Community Objective: Injury & Substance Abuse Prevention

New Ongoing

■ **Baseline Data:**

- 2008 Past 30-Day Use of Alcohol (PRIDE): 26.7% of Jackson County 9th graders indicated using alcohol in the past 30 days
- 2012 Cigarette Use Percentage Among Adults (PRC Community Health Survey): 26% of adults smoke cigarettes
- 2012 Smokeless Tobacco Use Percentage Among Adults (PRC Community Health Survey): 6% of adults use smokeless tobacco
- 2010 Unintentional Poisoning Mortality (NC SCHS): 16.7 per 100,000 died as a result of an unintentional poisoning
- 2012 Percentage of Residents Who Have Fallen in the Last Year (PRC Community Health Survey): 22.9% of Jackson County residents have fallen in the past year

■ **For continuing objective provide the updated information:**

- 2013 Past 30-Day Use of Alcohol (PRIDE): 21.9% of Jackson County 9th graders indicated using alcohol in the past 30 days
- 2015 Cigarette Use Percentage Among Adults (PRC Community Health Survey): 22% of adults smoke cigarettes
- 2015 Smokeless Tobacco Use Percentage Among Adults (PRC Community Health Survey): 4% of adults use smokeless tobacco
- 2012 Unintentional Poisoning Mortality (NC SCHS): 17.7 per 100,000 died as a result of an unintentional poisoning
- 2015 Percentage of Residents Who Have Fallen in the Last Year (PRC Community Health Survey): 37.8% of Jackson County residents have fallen in the past year

■ **Healthy NC 2020 Objective** that most closely aligns with focus area chosen below: Injury, Substance Abuse, Tobacco Use

Population(s)

- I. Describe the local population at risk for health problems related to this local community objective: All residents in Jackson County can benefit from strategies that focus on injury and substance abuse prevention. Older adults, age 65+ years, are at greater risk for not only falling but dying from a fall-related injury. Minorities (like Native Americans) and white males are at greater risk of both substance abuse and overdose. Anyone who has a history of substance abuse, history of chronic pain, or is living with mental health problems is also an at-risk population for this behavior. Finally, low-income residents are at greater risk for all unintentional injuries. Three main populations will be targeted in this Action Plan—youth age 5 to 18 years (alcohol), adults age 18 years and older (tobacco and unintentional poisoning), and adults age 65 years and older (falls).
- II. Describe the target population specific to this action plan:
 - A. Total number of persons in the target population specific to this action plan: 41,265
 - B. Total number of persons in the target population to be reached by this action plan:
 - a. Tobacco & Unintentional Poisonings: 34,209
 - b. Alcohol: 4,952
 - c. Falls: 7,304
 - C. Calculate the impact of this action plan:
 - a. Tobacco & Unintentional Poisonings: 82.9%
 - b. Alcohol: 12%
 - c. Falls: 17.7%

Healthy North Carolina 2020 Focus Area Addressed: Each of the two CHA priorities selected for submission must have a corresponding *Healthy NC 2020* focus area that aligns with your local community objectives.

- Check below the applicable Healthy NC 2020 focus area(s) for this action plan.

For more detailed information and explanation of each focus area, please visit the following websites:

<http://publichealth.nc.gov/hnc2020/foesummary.htm>

<http://publichealth.nc.gov/hnc2020/>

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Tobacco Use | <input type="checkbox"/> Maternal & Infant Health | <input type="checkbox"/> Social Determinants of Health |
| <input type="checkbox"/> Physical Activity & Nutrition | <input checked="" type="checkbox"/> Substance Abuse | <input type="checkbox"/> Environmental Health |
| <input checked="" type="checkbox"/> Injury | <input type="checkbox"/> Mental Health | <input type="checkbox"/> Chronic Disease |
| <input type="checkbox"/> Sexually Transmitted Diseases/Unintended Pregnancy | <input type="checkbox"/> Infectious Disease/Foodborne Illness | <input type="checkbox"/> Cross-cutting |
| | <input type="checkbox"/> Oral Health | |

Evidence Based Strategy/Intervention (EBS) Table: Researching effective strategies/intervention

Evidence Based Strategies Used with Like Population(s)	Strategy/Intervention Goal(s)	Implementation Venue(s)	Resources Utilized/Needed for Implementation
<p>Name of Intervention: National Public Health Improvement Initiative- New Mexico Department of Public Health</p> <p>RBA is an evidence-based planning, monitoring, evaluation, and continuous improvement framework that focused on results for communities and individuals.</p> <p>Source: HC Healthy Improvement APP (IMAPP); http://www.ncimapp.org/resources/6-plan/</p> <p>Community Strengths/Assets: External funding source (CDC); Collaboration and support from the University of New Mexico School of Medicine Public Health Program; Collaboration & support from the New Mexico Public Health Training Center</p>	<p>S.M.A.R.T Goals:</p> <p>To improve health and agency business process and to improve performance and quality of internal and external services by the end of year 4 (2013)</p> <p>To build quality and performance improvement competencies by providing 2 RBA trainings for trainers and coaches and workshops for agency leaders and managers and key community partners by the end of year 3 (2012)</p> <p>To identify a minimum for 2 program and system performance improvement opportunities, apply the RBA Performance Accountability process, and implement and track performance using appropriate data to evaluate and sustain improvement by the end of year 3 (2012)</p> <p>To develop, publish, update, and promote public access to the Scorecard by the end of year 3 (2012)</p>	<p>Target Population(s): Agency- New Mexico Department of Health; Population of New Mexico (2.087 million)</p> <p>Venue: New Mexico Department of Health</p>	<p>Resources Needed: RBA training for trainers, coaches, workshops for agency leaders and managers and key community partners; Access to Scorecard</p>
<p>Name of Intervention: Alcohol and tobacco prevention media campaigns</p> <p>Source: Healthy NC 2020 EB Strategies; Guide to Community Preventative Services; http://www.thecommunityguide.org/tobacco/massreach.html</p> <p>Community Strengths/Assets: Good campaigns available through CDC’s Media Campaign Resource Center; Expertise available at local, state, and national level</p>	<p>S.M.A.R.T Goals:</p> <p>To decrease the prevalence of tobacco use</p> <p>To increase cessation and use of available services as Quitlines</p> <p>To decrease initiation of tobacco use among young people</p> <p>To decrease the percentage of adult smokers in a community by 1% by the next CHA cycle</p> <p>To release messages to the media annually</p>	<p>Target Population(s): Tobacco users and susceptible teens</p> <p>Venue: Community</p>	<p>Resources Needed: Media campaigns; Relationship with media to promote campaigns; Funds to run campaigns; Social media accounts</p>

<p>Name of Intervention: Tobacco-free policies</p> <p>Source: Healthy NC 2020 EB Strategies; CDC Community Guide; http://www.thecommunityguide.org/tobacco/smokefreepolicies.html</p> <p>Community Strengths/Assets: Expertise available at local, state, and national level; Interested coalitions in tobacco free policy work</p>	<p>S.M.A.R.T Goals:</p> <p>To reduce exposure to secondhand smoke</p> <p>To increase the number of tobacco users who quit</p> <p>To decrease the percentage of adult smokers in a community by 1% by the next CHA cycle</p> <p>To adopt 1 new policy annually</p>	<p>Target Population(s): The community at large</p> <p>Venue: Workplaces and public places</p>	<p>Resources Needed: Community support; Stakeholder support, Data; Sample policies</p>
<p>Name of Intervention: Project Lazarus</p> <p>Source: Healthy NC 2020 EB Strategies; Pain Med. 2011 Jun; 12 Suppl 2:S77-85. Doi: 10.1111/j.1526-4637.2011.01128.x. Project Lazarus: community-based overdose prevention in rural North Carolina. Albert S, Brason FW 2nd, Sanford CK, Dasgupta N, Graham J, Lovette B; http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6106a1.htm</p> <p>Community Strengths/Assets: Current coalition in place; Connections with providers, law enforcement, and more</p>	<p>S.M.A.R.T Goals:</p> <p>To reduce the unintentional poisoning mortality rate to 16 per 100,000 by the next CHA cycle</p> <p>To hold monthly coalition meetings</p> <p>To offer 2 community presentations throughout Jackson County annually</p> <p>To promote Project Lazarus and the Mobile Crisis Unit Services annually</p> <p>To host 3 Operation Medicine Drop events annually</p> <p>To outfit up to 3 law enforcement agencies with naloxone by 2018</p>	<p>Target Population(s): Patients with pain-management prescriptions and their families; providers; hospital EDs; communities</p> <p>Venue: Physicians' offices; patients' homes; EDs; community; health department</p>	<p>Resources Needed: Project Lazarus print material; Training on naloxone use; Naloxone kits to distribute; Educational campaign materials; Lockboxes</p>
<p>Name of Intervention: Tai Chi Moving for Better Balance</p> <p>Source: Healthy NC 2020 EB Strategies; www.cdc.gov/HomeandRecreationalSafety/Falls/compendium/1.4_tai_chi.html</p> <p>Community Strengths/Assets: Active program in place in the community; Standing relationship with Senior Center</p>	<p>S.M.A.R.T Goals:</p> <p>To reduce the unintentional falls mortality rate</p> <p>To lead 2 Tai Chi Moving for Better Balance programs annually</p> <p>To train 10 participants per program</p>	<p>Target Population(s): Older adults</p> <p>Venue: Community setting like a Senior Center</p>	<p>Resources Needed: Trained leaders; Curricula; Educational materials; Balance equipment; Promotional materials</p> <p style="text-align: right;">Revised July 2015</p>

Interventions Specifically Addressing Chosen Health Priority

<u>INTERVENTIONS: SETTING, & TIMEFRAME</u>	<u>LEVEL OF INTERVENTION CHANGE</u>	<u>COMMUNITY PARTNERS' Roles and Responsibilities</u>	<u>PLAN HOW YOU WILL EVALUATE EFFECTIVENESS</u>
<p>Intervention: Results Based Accountability (RBA) approach to collaborative action planning process</p> <p><input checked="" type="checkbox"/> New <input type="checkbox"/> Ongoing <input type="checkbox"/> Completed</p> <p>Setting: Jackson County Department of Public Health (JCDPH)</p> <p>Target population: Injury Prevention & Substance Abuse Action Team members</p> <p>Start Date – End Date (mm/yy): Mar 2016- Dec 2018</p> <p>Targets health disparities: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N</p> <p>RBA Summary: JCDPH held a Community Meeting, sharing the RBA Basics and completing the Whole Distance Exercise. From there, Action Teams developed based on interest and health priorities. Each Action Team completed the Whole Distance Exercise. Action Teams meet monthly to determine which strategies to implement, which performance indicators to track, and how to communicate this information to the public. Using</p>	<p><input type="checkbox"/> Individual/ Interpersonal Behavior</p> <p><input checked="" type="checkbox"/> Organizational/Policy</p> <p><input type="checkbox"/> Environmental Change</p>	<p>Lead Agency: JCDPH</p> <p>Role: Convener/facilitator</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Target population representative: Kae Livesy</p> <p>Role: Implement RBA principles in programmatic activities</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Partners: Healthy Carolinians of Jackson County, Western Carolina University (WCU) Nursing Department</p> <p>Role: Provide support in RBA implementation, provide access to students to update RBA scorecard</p> <p><input checked="" type="checkbox"/> New partner <input type="checkbox"/> Established partner</p> <p>Include how you're marketing the intervention: Individual conversations with Injury Prevention & Substance Abuse Action Team leadership; Integrate RBA basic ideas into regular meetings; RBA 101 trainings for leadership and/or</p>	<p>Expected outcomes: Injury & Substance Abuse Prevention (ISAP) Action Team members understand and can articulate the difference between population and performance accountability; ISAP Action Team members can talk about their program performance and how it contributes to population indicators; ISAP Action Team members can use RBA in their own work; ISAP Action Team members use Results Scorecard to track program performance</p> <p>Any potential barriers? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N If yes, explain how intervention will be adapted: Learning curve as agencies implement new principles; Gaining support from internal leadership and community at large</p> <p>List anticipated project staff: Melissa McKnight, Jo Bradley, Kae Livesy, WCU nursing students</p> <p>Does project staff need additional training? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, list training plan: _____</p> <p>Quantify what you will do: <u>How Much Did We Do:</u> Attend 1 or more training and/or coaching session with WNC Healthy Impact RBA consultants; Introduce RBA ideas to the ISAP Action Team; Utilize Results Scorecard to develop a publically available e-CHIP <u>How Well Did We Do It:</u> % of ISAP Action Team members who have been exposed to RBA; % of ISAP Action Team members who have participated in a Whole Distance Exercise</p> <p>List how agency will monitor intervention activities and feedback from participants/stakeholders: RBA will be monitored in the web-based platform, Results Scorecard. Feedback will be gathered from participants/members via an annual "Collaborative Group Member Survey" and will be displayed under Story Behind the Curve for the intervention</p>

<p>the RBA framework, each Action Team focuses in on three questions per strategy/program: How much did we do? How well did we do it? Is anyone better off?</p>		<p>members</p>	<p>using the RBA approach.</p> <p>Evaluation Are you using an existing evaluation? <input type="checkbox"/>Y <input checked="" type="checkbox"/>N If no, please provide plan for evaluating intervention: JCDPH plans on using RBA, a planning, monitoring, evaluation, and continuous improvement framework that focused on results for communities and individuals. Performance measures for interventions will be identified and regularly monitored to document the quantity, quality, and participant impact of the intervention. We will track: How much did we do? How well did we do it? Is anyone better off?</p>
---	--	----------------	---

<u>INTERVENTIONS: SETTING, & TIMEFRAME</u>	<u>LEVEL OF INTERVENTION CHANGE</u>	<u>COMMUNITY PARTNERS' Roles and Responsibilities</u>	<u>PLAN HOW YOU WILL EVALUATE EFFECTIVENESS</u>
<p>Intervention: Alcohol and tobacco prevention media campaigns</p> <p><input checked="" type="checkbox"/> New <input type="checkbox"/> Ongoing <input type="checkbox"/> Completed</p> <p>Setting: Community</p> <p>Target population: Tobacco and alcohol users; Susceptible teens; Community at large, age 5 years and up</p> <p>Start Date – End Date (mm/yy): Jan 2016- Dec 2018</p> <p>Targets health disparities: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N</p>	<p><input checked="" type="checkbox"/> Individual/ Interpersonal Behavior</p> <p><input type="checkbox"/> Organizational/Policy</p> <p><input type="checkbox"/> Environmental Change</p>	<p>Lead Agency: JCDPH</p> <p>Role: Develop or release packaged media campaigns; Compile list of prevention activities into a calendar</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Target population representative: Tobin Lee, Tobacco Prevention Manager at MountainWise, and Patti Tiberi, Prevention Specialist at Mountain Projects</p> <p>Role: Support media campaign</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Partners: Safe Kids Jackson County, Law enforcement, TPCB, ABC Commission, Smoky Mountain MCO</p> <p>Role: Support media campaign</p> <p><input checked="" type="checkbox"/> New partner <input type="checkbox"/> Established partner</p> <p>Include how you're marketing the intervention: Press releases, billboards, student activities, social media</p>	<p>Expected outcomes: Increased education on the addictiveness and harms of tobacco use and the harms of exposure to SHS; Decreased prevalence of smokers/smokeless tobacco users; Increase in tobacco cessation program numbers; More parents and children talking about underage drinking; Less traffic accidents due drinking</p> <p>Anticipated barriers: Any potential barriers? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, explain how intervention will be adapted: N/A</p> <p>List anticipated project staff: Melissa McKnight, Patti Tiberi, Tobin Lee</p> <p>Does project staff need additional training? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, list training plan: _____</p> <p>Quantify what you will do: <u>How Much Did We Do:</u> Release tobacco and alcohol media messages quarterly (focus on e-cigs, Talk It Out NC, and QuitlineNC); Offer tobacco cessation program 2 times a year to assist those who are ready to quit <u>How Well Did We Do It:</u> Reach of media messages; % tobacco cessation program participants who were satisfied with the program; % tobacco cessation program participants who would recommend the program <u>Is Anyone Better Off:</u> % of tobacco cessation program participants who quit</p> <p>List how agency will monitor intervention activities and feedback from participants/stakeholders: Through word-of-mouth; Willingness for media to print press releases; Number of registrants in tobacco cessation program; End of tobacco cessation program surveys</p> <p>Evaluation: Are you using an existing evaluation? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N</p>

			<p>If no, please provide plan for evaluating intervention: JCDPH plans on using RBA, a planning, monitoring, evaluation, and continuous improvement framework that focused on results for communities and individuals. Performance measures for interventions will be identified and regularly monitored to document the quantity, quality, and participant impact of the intervention. We will track: How much did we do? How well did we do it? Is anyone better off?</p>
--	--	--	--

<u>INTERVENTIONS: SETTING, & TIMEFRAME</u>	<u>LEVEL OF INTERVENTION CHANGE</u>	<u>COMMUNITY PARTNERS' Roles and Responsibilities</u>	<u>PLAN HOW YOU WILL EVALUATE EFFECTIVENESS</u>
<p>Intervention: Tobacco free policies (adoption and enforcement)</p> <p><input checked="" type="checkbox"/> New <input type="checkbox"/> Ongoing <input type="checkbox"/> Completed</p> <p>Setting: Community</p> <p>Target population: Adults, age 18 years and older; Community; Disparate workers and public exposed to SHS in the workplace and public places</p> <p>Start Date – End Date (mm/yy): Jan 2016- Dec 2018</p> <p>Targets health disparities: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N</p>	<p><input checked="" type="checkbox"/> Individual/ Interpersonal Behavior</p> <p><input type="checkbox"/> Organizational/Policy</p> <p><input checked="" type="checkbox"/> Environmental Change</p>	<p>Lead Agency: MountainWise</p> <p>Role: Lead data collection, guide making the case for policy, seek out potential organizations to adopt policies</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Target population representative: Tobin Lee, Tobacco Prevention Manager at MountainWise</p> <p>Role: Serve as a liaison with public</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Partners: JCDPH, Smoky Mountain MCO, Mountain Projects, Harris Regional Hospital, Law enforcement</p> <p>Role: Promote policies, provide cessation classes</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Include how you're marketing the intervention: Press releases, radio</p>	<p>Expected outcomes: Fewer residents are exposed to SHS; More tobacco free policies that extend to workplaces; Greater enforcement of existing policies</p> <p>Anticipated barriers: Any potential barriers? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N If yes, explain how intervention will be adapted: Explain that smoking is not a right but a privilege; Pair policy with education</p> <p>List anticipated project staff: Tobin Lee, Melissa McKnight</p> <p>Does project staff need additional training? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, list training plan: _____</p> <p>Quantify what you will do: <u>How Much Did We Do:</u> One new policy will be adopted annually; Quarterly promotion of cessation resources (like tobacco cessation programs & QuitlineNC) and policies in place; Offer tobacco cessation program 2 times a year to assist those who are ready to quit <u>How Well Did We Do It:</u> % of community members who feel the policy is beneficial; Reach of media messages; % tobacco cessation program participants who were satisfied with the program; % tobacco cessation program participants who would recommend the program <u>Is Anyone Better Off:</u> % of community members aware of new policy; % of tobacco cessation program participants who quit</p> <p>List how agency will monitor intervention activities and feedback from participants/stakeholders: Through word-of-mouth; Willingness for media to print press releases; Number of registrants in tobacco cessation program; End of tobacco cessation program surveys</p> <p>Evaluation: Are you using an existing evaluation? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If no, please provide plan for evaluating intervention: JCDPH</p>

			<p>plans on using RBA, a planning, monitoring, evaluation, and continuous improvement framework that focused on results for communities and individuals. Performance measures for interventions will be identified and regularly monitored to document the quantity, quality, and participant impact of the intervention. We will track: How much did we do? How well did we do it? Is anyone better off?</p>
--	--	--	---

<u>INTERVENTIONS: SETTING, & TIMEFRAME</u>	<u>LEVEL OF INTERVENTION CHANGE</u>	<u>COMMUNITY PARTNERS' Roles and Responsibilities</u>	<u>PLAN HOW YOU WILL EVALUATE EFFECTIVENESS</u>
<p>Intervention: Project Lazarus</p> <p><input type="checkbox"/> New <input checked="" type="checkbox"/> Ongoing <input type="checkbox"/> Completed</p> <p>Setting: Community</p> <p>Target population: Adults, age 18 years and older; Patients with pain management prescriptions and their families; Providers who prescribe pain-management medications; Hospitals and EDs</p> <p>Start Date – End Date (mm/yy): Jan 2016- Dec 2018</p> <p>Targets health disparities: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N</p>	<p><input checked="" type="checkbox"/> Individual/ Interpersonal Behavior</p> <p><input checked="" type="checkbox"/> Organizational/Policy</p> <p><input type="checkbox"/> Environmental Change</p>	<p>Lead Agency: JCDPH</p> <p>Role: Host agency for project, provide resources</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Target population representative: Kate Glance, Community Outreach Specialist at Smoky Mountain MCO</p> <p>Role: Support through access to target pop, referral source</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Partners: Law enforcement, Local providers (pharmacies, dentists, veterinarians), Safe Kids Jackson County, Harris Regional Hospital, WCU</p> <p>Role: Support project implementation</p> <p><input checked="" type="checkbox"/> New partner <input type="checkbox"/> Established partner</p> <p>Include how you're marketing the intervention: Mass media, website, community presentations</p>	<p>Expected outcomes: Greater awareness about unintentional poisonings/overdose; Increase in knowledge about where to turn to for help and for resources such as the permanent drop box and naloxone</p> <p>Any potential barriers? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N If yes, explain how intervention will be adapted: Work to reduce the stigma around drug use</p> <p>List anticipated project staff: Melissa McKnight, Patti Tiberi, Charles Easton, Kate Glance</p> <p>Does project staff need additional training? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, list training plan: _____</p> <p>Quantify what you will do: <u>How Much Did We Do:</u> Hold coalition meetings monthly; Hold 2 community presentations annually; Promote Project Lazarus & Mobile Crisis Services in the media quarterly; Hold 1 provider education event; Host 3 Operation Medicine Drop event annually; Outfit up to 3 law enforcement agencies with naloxone <u>How Well Did We Do It:</u> % satisfied with community presentations/provider education session; % who would recommend community presentations/provider education session <u>Is Anyone Better Off:</u> # of community members who are aware of Project Lazarus and the Mobile Crisis Services; # of community members who know where to take unused/unwanted medication; # of community members who know how to access naloxone</p> <p>List how agency will monitor intervention activities and feedback from participants/stakeholders: Through individual conversations; Post-presentation/education session surveys</p> <p>Evaluation: Are you using an existing evaluation? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N</p>

			<p>If no, please provide plan for evaluating intervention: JCDPH plans on using RBA, a planning, monitoring, evaluation, and continuous improvement framework that focused on results for communities and individuals. Performance measures for interventions will be identified and regularly monitored to document the quantity, quality, and participant impact of the intervention. We will track: How much did we do? How well did we do it? Is anyone better off?</p>
--	--	--	--

<u>INTERVENTIONS: SETTING, & TIMEFRAME</u>	<u>LEVEL OF INTERVENTION CHANGE</u>	<u>COMMUNITY PARTNERS' Roles and Responsibilities</u>	<u>PLAN HOW YOU WILL EVALUATE EFFECTIVENESS</u>
<p>Intervention: Balance Classes like Tai Chi for Moving Better Balance, Get Some Balance in Your Lift, Arthritis Exercise Foundation Program, Walk with Ease</p> <p><input type="checkbox"/> New <input checked="" type="checkbox"/> Ongoing <input type="checkbox"/> Completed</p> <p>Setting: Department on Aging</p> <p>Target population: Older adults, age 65 years and older, with identified fall risks</p> <p>Start Date – End Date (mm/yy): Jan 2016- Dec 2018</p> <p>Targets health disparities: <input checked="" type="checkbox"/> Y <input type="checkbox"/> N</p>	<p><input checked="" type="checkbox"/> Individual/ Interpersonal Behavior</p> <p><input type="checkbox"/> Organizational/Policy</p> <p><input type="checkbox"/> Environmental Change</p>	<p>Lead Agency: Jackson County Department on Aging</p> <p>Role: Host and lead classes; Recruit participants</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Target population representative: Laura Rodi, Senior Center Wellness Manager</p> <p>Role: Promote program; Participate in program</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Partners: JCDPH, WCU, Area Agency on Aging, Harris Regional Hospital</p> <p>Role: Lead classes, recruit participants, promote classes</p> <p><input type="checkbox"/> New partner <input checked="" type="checkbox"/> Established partner</p> <p>Include how you're marketing the intervention: Flyers, Senior Center calendar, Radio, Demo classes</p>	<p>Expected outcomes: Fewer older adults experiencing falls</p> <p>Anticipated barriers: Any potential barriers? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, explain how intervention will be adapted: N/A</p> <p>List anticipated project staff: Laura Rodi, Lindsy Cauley, Melissa McKnight, Curt Collins</p> <p>Does project staff need additional training? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N If yes, list training plan: _____</p> <p>Quantify what you will do: Host 2 classes annually of each balance class (Tai Chi for Better Balance, Get Some Balance in Your Life, Arthritis Foundation Exercise Program, & Walk With Ease)</p> <p>List how agency will monitor intervention activities and feedback from participants/stakeholders: Using fidelity requirements of each program; Asking for feedback from participants</p> <p>Evaluation: Are you using an existing evaluation? <input checked="" type="checkbox"/> Y <input type="checkbox"/> N If no, please provide plan for evaluating intervention: _____</p>