



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: Healthy Eating & Physical Activity

Local Community Objective: Healthy Eating & Physical Activity

- <u>New X</u> Ongoing
- Baseline Data:
 - 2012 Prevalence of Adults at a Healthy Weight (PRC Community Health Survey): 37.6% of Jackson County adults are at a healthy weight
 - 2005 Adult Diabetes Prevalence (CDC BRFSS): 9.2% of Jackson County adults have diabetes
 - 2012 Weekly Fruit Consumption (PRC Community Health Survey): Jackson County adults consume 6.8 servings of fruit weekly
 - 2012 Weekly Vegetable Consumption (PRC Community Health Survey): Jackson County adults consume 8.5 servings of vegetables weekly
 - 2012 Physical Activity Recommendations (PRC Community Health Survey): 50.8% of Jackson County residents meet the physical activity recommendations
- For continuing objective provide the updated information:
 - 2015 Prevalence of Adults at a Healthy Weight (PRC Community Health Survey): 30.3% of Jackson County adults are at a healthy weight
 - 2012 Adult Diabetes Prevalence (CDC BRFSS): 13.4% of Jackson County adults have diabetes
 - 2015 Weekly Fruit Consumption (PRC Community Health Survey): Jackson County adults consume 6.8 servings of fruit weekly
 - 2015 Weekly Vegetable Consumption (PRC Community Health Survey): Jackson County adults consume 8.2 servings of vegetables weekly
 - 2015 Physical Activity Recommendations (PRC Community Health Survey): 52.2% of Jackson County residents meet the physical activity recommendations
- Healthy NC 2020 Objective that most closely aligns with focus area chosen below: <u>Physical Activity & Nutrition</u>, <u>Cross-cutting</u>

Population(s)

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 physical activity and nutrition; however, the lives of at-risk populations can be improved even greater. **Low income** and **food insecure residents** often

deal with a lack of full-service grocery store, are less likely to have their own vehicle for regular food shopping, have greater availability of fast food restaurants, and cycle between deprivation and over-eating. Low income residents also often live in neighborhoods with fewer physical activity resources, are less likely to participate in organized sports, and **students of lower-income** schools spend less time being active during physical education. **Adults, age 18 years and up, and youth, K-12, will be the target for this Action Plan.**

- I. Describe the target population specific to this action plan:
 - A. Total number of persons in the target population specific to this action plan: <u>41,265</u>
 - B. Total number of persons in the target population to be reached by this action plan:
 - a. Strategies pertaining to adults: <u>34,209</u>
 - b. Strategies pertaining to youth: <u>4,952</u>
 - C. Calculate the impact of this action plan
 - a. Strategies pertaining to adults: <u>82.9%</u>
 - b. Strategies pertaining to youth: <u>12%</u>

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

| 🗌 Tobacco Use | Maternal & Infant Health | Social Determinants of Health |
|-------------------------------|------------------------------|-------------------------------|
| Physical Activity & Nutrition | Substance Abuse | Environmental Health |
| 🗌 Injury | Mental Health | Chronic Disease |
| Sexually Transmitted | Infectious Disease/Foodborne | Cross-cutting |
| Diseases/Unintended | Illness | |
| Pregnancy | 🗌 Oral Health | |

| Evidence Based Strategies Used with Like Population(s) (Include source) | Strategy/Intervention Goal(s) | Implementation Venue(s) | Resources Utilized/Needed for Implementation |
|---|--|---|--|
| Name of Intervention: National Public Health | S.M.A.R.T Goals: | Target | Resources Needed: |
| Improvement Initiative- New Mexico Department of Public Health | 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) | Population(s): Agency- New Mexico | RBA training for trainers, coaches, workshops for agency |
| RBA is an evidence-based planning, monitoring, | | Department of | leaders and managers |
| evaluation, and continuous improvement framework | To build quality and performance improvement | Health; | and key community |
| that focused on results for communities and | competencies by providing 2 RBA trainings for trainers and | Population of | partners; Access to |
| individuals. | coaches and workshops for agency leaders and managers | New Mexico (2.087 million) | Scorecard |
| Source: HC Healthy Improvement APP (IMAPP); | and key community partners by the end of year 3 (2012) | (2.087 11111011) | |
| http://www.ncimapp.org/resources/6-plan/ | To identify a minimum for 2 program and system | Venue: New | |
| | performance improvement opportunities, apply the RBA | Mexico | |
| Community Strengths/Assets: External funding source | Performance Accountability process, and implement and | Department of | |
| (CDC); Collaboration and support from the University | track performance using appropriate data to evaluate and | Health | |
| of New Mexico School of Medicine Public Health | sustain improvement by the end of year 3 (2012) | | |
| Program; Collaboration & support from the New | | | |
| Mexico Public Health Training Center | To develop, publish, update, and promote public access to the Scorecard by the end of year 3 (2012) | | |
| Name of Intervention: Promote the adoption of food | S.M.A.R.T Goals: | Target | Resources Needed: |
| service guidelines/nutrition standards, which include | To increase the number of local education agencies that | Population(s): | Facility; Food; Recipes; |
| sodium, in public schools | receive professional development and TA on strategies to | School-age | Chef; Cooking |
| | create a healthy school nutrition environment | youth in public | equipment |
| Source: Healthy NC 2020 EB Strategies; The Guide to | | schools | |
| Community Preventative Services; | To hold 1 training for Child Nutrition staff on recipe | | |
| http://www.thecommunityguide.org/obesity/schoolb | modification by the end of school year 2017-2018 | Venue: Schools | |
| <u>ased.html</u> | To offer continuing training appually to Child Nutrition stoff | | |
| Community Strengths/Assets: Strong partnership | To offer continuing training annually to Child Nutrition staff on recipe modification | | |
| between Health Department and local schools; Many | | | |
| healthy eating initiatives already going on in schools; | To try out 1 new recipe per month at the schools that abide | | |
| ASAP Farm to School Program; Growing Minds | by the new standards | CHA Action Pl | an Form – Revised 8/10/16 |

| Name of Intervention: Worksite health promotion | S.M.A.R.T Goals: | Target | Resources Needed: |
|---|---|----------------------------------|--|
| | To reduce health risks and improve quality of life | Population(s): | Educational material; |
| Source: The Guide to Community Preventative | | Employees | Tobacco free policy |
| Services; | To ensure that 6 existing worksite wellness programs | | templates; Input from |
| http://www.thecommunityguide.org/worksite/index. html | include evidence-based components | Venue: Worksite or through | topic experts |
| | To offer consultative services to 6 existing worksite | employee health | |
| Community Strengths/Assets: Some worksites already participating; Partners in place (hospital, public | wellness programs annually | benefits plans | |
| schools, government, private businesses, ODHDSP) | To connect 6 existing programs to opportunities | | |
| | throughout the community for collaboration annually | | |
| Name of Intervention: Provide educational programs | S.M.A.R.T Goals: | Target | Resources Needed: |
| at the Jackson County Library (JCPL) | To offer 6 programs annually at the Jackson County Public Library | Population(s): Community at | Incentives; Promotional |
| Source: N/A | | large, especially those that use | materials; Curricula |
| Community Strengths/Assets: Existing partnership in | | Library services | |
| place with library; Library has adopted health and | | | |
| wellness into their strategic plan; Existing programs in | | Venue: Library | |
| place at library | | , | |
| Name of Intervention: Active Routes to School (ARTS) | S.M.A.R.T Goals: | Target | Resources Needed: |
| | To decrease the percentage of youth, K-8, who are | Population(s): | Incentives; |
| Source: The Guide to Community Preventative Services; | overweight or obese | Youth, K-8 | Promotional materials; Bike safety |
| http://www.thecommunityguide.org/pa/environmen tal-policy/index.html | To increase the percentage of youth, K-8, who are meeting daily physical activity recommendations | Venue: Schools | equipment; Curricula; Pedometers; Engaged stakeholders and |
| Community Strengths/Assets: Existing program in place; Partnerships with 7 counties in WNC; Many | To support 3 schools annually by coordinating Walk/Bike to School Day events | | policymakers |
| schools in Jackson County already participate | To support 2 bike and/or pedestrian education events annually | | |
| | To create/improve policy that supports or addresses walking/biking to or at school annually | CHA Action Pla | n Form – Revised 8/10/16 |

| Name of Intervention: Get Fit Challenge | S.M.A.R.T Goals: | Target | Resources Needed: |
|---|--|-----------------|-------------------------|
| | To promote public and personal health through increased | Population(s): | Website; Challenge |
| Source: N/A | physical activity | Community | Runner; Teams; |
| | | | Promotional |
| Community Strengths/Assets: Existing program in | To implement 1 Challenge annually, reaching 500 | Venue: | materials; Incentives; |
| place with multiple partners | participants | Community | Media |
| Name of Intervention: Healthy Living Festival | S.M.A.R.T Goals: | Target | Resources Needed: |
| | To ensure residents are aware of existing health resources | Population(s): | Applications; |
| Source: N/A | in the community | Community | Promotional |
| | | | materials; Evaluations; |
| Community Strengths/Assets: Existing program in | To offer 1 Festival annually, reaching 30 exhibitors and 150 | Venue: | Tables; Chairs; Road |
| place with multiple partners | participants | Community site | signs; Media |
| | | like the Rec | |
| | | Center | |
| Name of Intervention: Tuesdays to Thrive | S.M.A.R.T Goals: | Target | Resources Needed: |
| | To promote public and personal health | Population(s): | Promotional |
| Source: N/A | | Adults, 18-55 | materials; Evaluations; |
| | To offer 6 Tuesday to Thrive events annually | years | IT; Incentives |
| Community Strengths/Assets: Existing program in | | | |
| place with multiple partners | | Venue: | |
| | | Community sites | |
| | | like Hospital, | |
| | | WCU, Health | |
| | | Department | |

Interventions Specifically Addressing Chosen Health Priority

| INTERVENTIONS: | LEVEL OF INTERVENTION CHANGE | COMMUNITY PARTNERS' | PLAN HOW YOU WILL EVALUATE EFFECTIVENESS |
|-------------------------------------|---------------------------------|--|---|
| SETTING, & TIMEFRAME | INTERVENTION CHANGE | Roles and Responsibilities | |
| Intervention: Results Based | Individual/ | Lead Agency: JCDPH | Expected outcomes: HEPA Action Team members |
| Accountability (RBA) approach to | Interpersonal Behavior | Deles Convener/facilitator | understand and can articulate the difference between |
| collaborative action planning | | Role: Convener/facilitator | population and performance accountability; HEPA Action |
| process | Organizational/Policy | New partner Established | Team members can talk about their program performance and |
| | | partner | how it contributes to population indicators; HEPA Action Team |
| New Ongoing Completed | Environmental Change | | members can use RBA in their own work; HEPA Action Team |
| | | Target population representative: | members use Results Scorecard to track program performance |
| Setting: Jackson County | | Kae Livesy | |
| Department of Public Health | | Role: Implement RBA principles | Any potential barriers? XY IN |
| (JCDPH) | | in programmatic activities | If yes, explain how intervention will be adapted: Learning curve |
| | | | as agencies implement new principles; Gaining support from |
| Target population: Healthy Eating & | | New partner Established | internal leadership and community at large |
| Physical Activity Action Team | | partner | List antisingted preject staff. Malices Maknight to Dradlay |
| (HEPA) members | | | List anticipated project staff: Melissa McKnight, Jo Bradley, Kae Livesy, WCU Nursing students |
| | | Partners: Healthy Carolinians of | Rae Livesy, web Nursing students |
| Start Date – End Date (mm/yy): Mar | | Jackson County, Western | Does not isot staff need additional training $2 \Box V \Box N$ |
| 2016- Dec 2018 | | Carolina University Nursing | Does project staff need additional training? Y N If yes, list training plan: |
| | | Department | |
| Targets health disparities: Y | | Role: Provide support in RBA | Quantify what you will do: |
| RBA Summary: JCDPH held a | | implementation, provide access | How Much Did We Do: Attend 1 or more training and/or |
| Community Meeting, sharing the | | to students to update RBA | coaching session with WNC Healthy Impact RBA consultants; |
| RBA Basics and completing the | | scorecard | Introduce RBA ideas to the HEPA Action Team; Utilize Results |
| Whole Distance Exercise. From | | scorecard | Scorecard to develop a publically available e-CHIP |
| there, Action Teams developed | | New partner Established | How Well Did We Do It: % of HEPA Action Team members who |
| based on interest and health | | partner | have been exposed to RBA; % of HEPA Action Team members |
| priorities. Each Action Team | | | who have participated in a Whole Distance Exercise |
| completed the Whole Distance | | Include how you're marketing the intervention: Individual | |
| Exercise. Action Teams meet | | conversations with HEPA Action | List how agency will monitor intervention activities and |
| monthly to determine which | | Team leadership; Integrate RBA | feedback from participants/stakeholders: RBA will be |
| strategies to implement, which | | basic ideas into regular | monitored in the web-based platform, Results Scorecard. |
| performance indicators to track, | | meetings; RBA 101 trainings for | Feedback will be gathered from participants/members via an |
| and how to communicate this | | leadership and/or members | annual "Collaborative Group Member Survey" and will be |
| information to the public. Using | | | displayed under Story Behind the Curve for the intervention |

| the RBA framework, each Action | | using the RBA approach. |
|--|--|--|
| Team focuses in on three questions | | |
| per strategy/program: How much | | Evaluation: |
| did we do? How well did we do it? | | Are you using an existing evaluation? Y |
| did we do? How well did we do it? Is anyone better off? | | Are you using an existing evaluation? Y 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? |
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| INTERVENTIONS: SETTING, & TIMEFRAME | LEVEL OF INTERVENTION CHANGE | COMMUNITY PARTNERS' Roles and Responsibilities | PLAN HOW YOU WILL EVALUATE EFFECTIVENESS |
|--|---------------------------------------|---|--|
| Intervention: Promote the adoption of food service guidelines/nutrition standards which include sodium, in | Individual/ Interpersonal Behavior | Lead Agency: Jackson County Public Schools (JCPS) | Expected outcomes : Fewer students in Jackson County will be obese or overweight; Fewer adults in Jackson County will be obese or overweight |
| public schools | Organizational/Policy | Role: Adopter of standards | Any potential barriers? XY IN |
| New Ongoing Completed | Environmental Change | New partner Established | If yes, explain how intervention will be adapted: Working with Child Nutrition staff to improve taste of menu items with herbs |
| Setting: Public schools | | Target population representative: Laura Cabe, | vs. salt; Seeking fresh options (when finances allow) vs. canned or processed |
| Target population: Students; Staff; Parents | | Child Nutrition Director Role: Adopter of standards, | List anticipated project staff: Laura Cabe, Krystle Holt, Melissa McKnight |
| Start Date – End Date (mm/yy): August 2016- December 2018 | | Access to students and staff | Does project staff need additional training? |
| Targets health disparities: XY N | | partner | Quantify what you will do: |
| | | Partners: Harris Regional Hospital, Highlands-Cashiers Hospital, JCDPH, WCU, SWCC, ASAP, Cooperative Extension, Local chefs | <u>How Much Did We Do:</u> Hold 1 training annually for Child Nutrition staff on recipe modification; Try out 1 new recipe per month at the schools that abide by the new standards <u>How Well Did We Do It:</u> % of Child Nutrition staff who would recommend the annual trainings; % of students and staff who |
| | | Role: Connecting schools with chefs, reviewing recipes, demonstrating new menu items | were satisfied with the new recipes <u>Is Anyone Better Off:</u> % of Child Nutrition staff with new knowledge and skills gained from the annual trainings; % difference in sodium consumed per meal (prior to and after recipe modifications) |
| | | New partner Established | List how agency will monitor intervention activities and |
| | | Include how you're marketing the intervention: Press release, school nutrition | feedback from participants/stakeholders: Word-of-mouth from students and staff; Feedback from nutrition staff on recipe implementation |
| | | menu, SHAC meetings | Evaluation: Are you using an existing evaluation? Y 🕅 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? |
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| INTERVENTIONS: SETTING, & TIMEFRAME | LEVEL OF INTERVENTION CHANGE | COMMUNITY PARTNERS' Roles and Responsibilities | PLAN HOW YOU WILL EVALUATE EFFECTIVENESS |
|--|---------------------------------------|---|---|
| Intervention: Worksite health promotion | Individual/ Interpersonal Behavior | Lead Agency: Harris Regional Hospital (HRH) | Expected outcomes : Fewer residents in Jackson County will be obese or overweight; More residents in Jackson County will consume fruits and vegetables |
| New Ongoing Completed | Organizational/Policy | Role: Developer and implementer of worksite | Any potential barriers? □Y ⊠N |
| Setting: Various worksites | Environmental Change | health program | If yes, explain how intervention will be adapted: |
| Target population: Adults employed at Jackson County businesses | | New partner Established partner | List anticipated project staff: Melanie Batchelor, Krystle Holt, Melissa McKnight, Danielle Wittekind, Jenifer Pressley, Laura Rodi |
| Start Date – End Date (mm/yy): Jan 2016- December 2018 | | Target population representative: Melanie Batchelor & Krystle Holt, HRH | Does project staff need additional training? Y N If yes, list training plan: |
| Targets health disparities: X N | | dietitians | Quantify what you will do: |
| | | Role: Program host | How Much Did We Do: Ensure that 6 existing worksite wellness programs include a health risk assessment, onsite vaccinations, |
| | | New partner Established partner | obesity prevention, POD prompts, enhanced access to places for PA, and/or smoke free policies; Offer consultative services to 6 existing programs that focus on enhancing access to PA services |
| | | Partners: JCDPH, MountainWise, ConMet, | and smoke-free policies; Connect 6 programs to opportunities throughout the community for increased community |
| | | Jackson County Gov't, SCC, | collaboration |
| | | Mainstreet Sylva Association, | <u>How Well Did We Do It:</u> % of program participants that report satisfaction with wellness programs; % of program participants |
| | | Chamber of Commerce, Town of Sylva, WCU, Healthy Eating | that report satisfaction with consultative services offered to |
| | | & Physical Activity Action | wellness programs <u>Is Anyone Better Off:</u> % of program participants who report |
| | | Team, JCPS | increased knowledge regarding wellness opportunities in Jackson |
| | | Role: Implement and promote program | County; % of program participants who report a positive change in health status |
| | | New partner Established partner | List how agency will monitor intervention activities and feedback from participants/stakeholders: Word-of-mouth |
| | | Include how you're marketing | from employees; End-of-program surveys |

| | the intervention: Press release, flyers, radio, listserv | Evaluation: Are you using an existing evaluation? Y 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? |
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| INTERVENTIONS: SETTING, & TIMEFRAME | LEVEL OF INTERVENTION CHANGE | COMMUNITY PARTNERS' Roles and Responsibilities | PLAN HOW YOU WILL EVALUATE EFFECTIVENESS |
|---|---------------------------------------|--|---|
| Intervention: Provide educational programs at the Jackson County Library (JCPL) | Individual/ Interpersonal Behavior | Lead Agency: Jackson County Department of Public Health (JCDPH) | Expected outcomes : Fewer residents in Jackson County will be obese or overweight; Residents in Jackson County will consume more fruits and vegetables |
| Library (JCPL) New Ongoing Completed Setting: Jackson County Public Library Target population: Community Start Date – End Date (mm/yy): August 2016- December 2018 Targets health disparities: Y N | Crganizational/Policy | (JCDPH) Role: Creator of programs New partner Established partner Target population representative: Jessica Philyaw, JCPL Librarian Role: Setting for implementation; Access to patrons New partner New partner Established partners: Harris Regional Hospital, Public Library, ARTS, Local exercise facilities, Cooperative Extension, WCU Role: Providing materials for programs, Implement programs New partner Established partner | Any potential barriers? ⊠Y □N If yes, explain how intervention will be adapted: Recruiting people to attend the programs List anticipated project staff: Melissa McKnight, Melanie Batchelor, Krystle Holt, Jessica Philyaw Does project staff need additional training? □Y ⊠N If yes, list training plan: Quantify what you will do: How Much Did We Do: How Well Did We Do: How Well Did We Do: Y is of participants who were satisfied with the programs offered; % of participants who would recommend the programs to others List how agency will monitor intervention activities and feedback from participants/stakeholders: Word-of-mouth from participants; Feedback from library staff Evaluation: Are you using an existing evaluation? □Y ⊠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? |
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| INTERVENTIONS: SETTING, & TIMEFRAME | LEVEL OF INTERVENTION CHANGE | COMMUNITY PARTNERS' Roles and Responsibilities | PLAN HOW YOU WILL EVALUATE EFFECTIVENESS |
|---|---------------------------------------|---|--|
| Intervention: Active Routes to School (ARTS) | Individual/ Interpersonal Behavior | Lead Agency: Jackson County Department of Public Health (JCDPH) | Expected outcomes : Fewer students in Jackson County will be obese or overweight |
| New Ongoing Completed | Organizational/Policy | Role: Lead person to influence | Any potential barriers? X N If yes, explain how intervention will be adapted: Perceived notion |
| Setting: Public schools, Community | Environmental Change | change | that walking to school is associated with poverty must be addressed |
| Target population: Students (K-8); School staff; Parents | | partner Target population | List anticipated project staff: Jackie Moore |
| Start Date – End Date (mm/yy): Jan 2016- December 2018 | | representative: Jackie Moore, ARTS Coordinator | Does project staff need additional training? |
| Targets health disparities: XY N | | Role: Adopter of programs and policies, Access to students and staff | Quantify what you will do: Support 3 schools by coordinating Walk/Bike to School Day events annually; Support 2 bike and/or pedestrian education event annually; Create/improve policy that supports or addresses walking/biking to or at school at 1 school district |
| | | partner Partners : WCU, Parks and Rec Department, Bicycling clubs, , Safe Kids Jackson County, Healthy Eating & Physical Activity Action Team | List how agency will monitor intervention activities and feedback from participants/stakeholders: Word-of-mouth from students and staff; Feedback from staff and volunteers; SRTS tallies; Parent and teacher surveys; Environmental scans Evaluation: |
| | | Role: Assist in program implementation, program promotion | Are you using an existing evaluation? X N If no, please provide plan for evaluating intervention: |
| | | New partner Established partner | |
| | | Include how you're marketing the intervention: Press release, social media, radio | |

| INTERVENTIONS: SETTING, & TIMEFRAME | LEVEL OF INTERVENTION CHANGE | COMMUNITY PARTNERS' Roles and Responsibilities | PLAN HOW YOU WILL EVALUATE EFFECTIVENESS |
|---|---------------------------------------|--|--|
| Intervention: Get Fit Challenge | | Lead Agency: Healthy Eating | Expected outcomes : Fewer residents in Jackson County will be |
| | Individual/ Interpersonal Behavior | & Physical Activity (HEPA) | obese or overweight; More residents in Jackson County will meet |
| N ew Ongoing Completed | Interpersonal Denavior | Action Team | physical activity recommendations |
| Setting: Community Target population: Adults, age 18 | Organizational/Policy | Role: Plan, promote, implement, and evaluate the Challenge; Handle scoring | Any potential barriers? □Y ⊠N If yes, explain how intervention will be adapted: List anticipated project staff: HEPA Action Team |
| years and older, in Jackson County | | New partner Established | List anticipated project stail. HEPA Action ream |
| Start Date – End Date (mm/yy): Sept- 2016- Nov 2018 | | partner | Does project staff need additional training? Y N If yes, list training plan: |
| 2010- 100 2018 | | Target population representative: Liz Cochran, | |
| Targets health disparities: Y N | | Health Educator | Quantify what you will do: <u>How Much Did We Do:</u> Implement 1 Get Fit Challenge open |
| | | Role: Participate in Challenge, Provide feedback | annually, reaching 500 participants per Challenge <u>How Well Did We Do It:</u> % of participants who were satisfied with the Challenge; % of participants who would recommend the |
| | | New partner Established | Challenge to others <u>Is Anyone Better Off:</u> % of participants who reported a positive |
| | | Partners: Harris Regional Hospital, WCU, Parks and Rec | behavior change during the Challenge; % of participants who would participate again |
| | | Department, Department on Aging, JCDPH, JCPS | List how agency will monitor intervention activities and |
| | | Aging, JCDPH, JCP3 | feedback from participants/stakeholders: Word-of-mouth |
| | | Role: Recruit participants, promotion; Communication | from participants; "Contact Us" option through the website Evaluation: |
| | | | Are you using an existing evaluation? $\Box Y \boxtimes N$ |
| | | New partner Established | If no, please provide plan for evaluating intervention: JCDPH |
| | | Include how you're marketing the intervention: Press release, | plans on using RBA, a planning, monitoring, evaluation, and continuous improvement framework that focused on results for |
| | | social media, radio; weekly newsletter | 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? |
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| INTERVENTIONS: SETTING, & TIMEFRAME | LEVEL OF INTERVENTION CHANGE | COMMUNITY PARTNERS' Roles and Responsibilities | PLAN HOW YOU WILL EVALUATE EFFECTIVENESS |
|--|---------------------------------------|--|--|
| Intervention: Healthy Living Festival | Individual/ Interpersonal Behavior | Lead Agency: Healthy Eating & Physical Activity (HEPA) Action Team | Expected outcomes : More residents in Jackson County will be aware of community health resources |
| Setting: Community Target population: Community | Organizational/Policy | Role: Organize and plan the Festival; Recruit exhibitors, Advertise | Any potential barriers?Y NIf yes, explain how intervention will be adapted:List anticipated project staff:Melissa McKnight, Liz Cochran, |
| Start Date – End Date (mm/yy): April 2017- April 2018 | | New partner Established partner | Laura Rodi, Jenifer Pressley Does project staff need additional training? Y N If yes, list training plan: |
| Targets health disparities: Y | | representative: Jenifer Pressley, Parks & Rec Wellness Manager | Quantify what you will do: <u>How Much Did We Do:</u> Host 1 Festival annually reaching 150 participants and 30 exhibitors |
| | | Role: Provide feedback on the Festival; Coordinate with vendors and participants | <u>How Well Did We Do It:</u> % of participants and vendors who were satisfied with the Festival; % of participants and vendors who would recommend the Festival to others <u>Is Anyone Better Off:</u> % of participants who reported learning |
| | | New partner Established partner | something new during the Festival; % of participants and vendors who would participate again |
| | | Partners: Harris Regional Hospital, WCU, Parks and Rec Department, Department on Aging, JCDPH | List how agency will monitor intervention activities and feedback from participants/stakeholders: Word-of-mouth from participants and exhibitors; Feedback from staff and volunteers; End of Festival Evaluation from participants and |
| | | Role: Organize and plan the Festival; Recruit exhibitors, Advertise | vendors Evaluation: Are you using an existing evaluation? YXN |
| | | New partner Established partner | 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 |
| | | Include how you're marketing the intervention: Press release, social media, radio, flyers | 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? |
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| INTERVENTIONS: SETTING, & TIMEFRAME | LEVEL OF INTERVENTION CHANGE | COMMUNITY PARTNERS' Roles and Responsibilities | PLAN HOW YOU WILL EVALUATE EFFECTIVENESS |
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| Intervention: Tuesdays to Thrive | Individual/ Interpersonal Behavior | Lead Agency: Harris Regional Hospital (HRH) | Expected outcomes : More residents in Jackson County will be aware of community health resources |
| Setting: Community | Organizational/Policy | Role: Plan, organize, and implement events | Any potential barriers? □Y ⊠N If yes, explain how intervention will be adapted: |
| Target population: Adults, age 18 years and older, in Jackson County | Environmental Change | New partner Established partner | List anticipated project staff: Melanie Batchelor, Krystle Holt, Melissa McKnight |
| Start Date – End Date (mm/yy): Jan 2016- December 2018 | | Target population representative: Laura Cabe, Child Nutrition Director for Jackson Co. Public Schools | Does project staff need additional training? Y N If yes, list training plan: Quantify what you will do: |
| Targets health disparities: Y | | (JCPS) Role: Attend events; Earn wellness points for wellness program | How Much Did We Do: Implement 6 Tuesdays to Thrive annually How Well Did We Do It: % of participants who were satisfied with the events; % of participants who would recommend the events to others Is Anyone Better Off: % of participants who reported learning something new during the events; % of participants who would participate again |
| | | Partners: Healthy Eating & Physical Activity (HEPA) Action Team Role: Assist in program implementation, program promotion | List how agency will monitor intervention activities and feedback from participants/stakeholders: Word-of-mouth from participants; Feedback from staff and volunteers Evaluation: Are you using an existing evaluation? \Box Y \boxtimes N |
| | | New partner Established partner Include how you're marketing the intervention: Press release, social media, radio, flyers | 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? |
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