Module 4: Developing and Monitoring Interventions

Winston Liaw, MD, MPH







This work is supported by NACHC's Cooperative agreement from the Health Resources and Services Administration, Bureau of Primary Health Care (HRSA/BPHC).

Disclosures for Continuing Medical Education (CME)

The Robert Graham Center and Virginia Commonwealth University adhere to the conflict-of-interest policy of the American Academy of Family Physicians as well as to the guidelines of the Accreditation Council for Continuing Medical Education and the American Medical Association.

Current guidelines state that participants of continuing medical education (CME) activities should be made aware of any affiliation or financial interest that may affect an author's article. Disclosures do not suggest bias but provide readers with information relevant to the evaluation of the contents of these recommendations.

Winston Liaw, MD, MPH has reported no conflicts of interest relative to this program.

Jennifer Rankin, PhD, MPH, MS, MHA has reported no conflicts of interest relative to this program.

Andrew Bazemore, MD, MPH has reported no conflicts of interest relative to this program.

Agenda

- Resources for selecting the intervention
- Considerations for intervention implementation
- Considerations for intervention evaluation

Objectives

- Name two resources that can be used to learn more about community level interventions
- List two types of measures that can be tracked in an evaluation
- State two reasons why it is important to perform an evaluation
- State why it is important to develop the evaluation concurrently with the intervention



Daily screen time: 4 hours



Selecting Interventions

- Few safe areas for children to exercise
 - Obtaining community specific information
 - Examining the literature and experience for existing interventions
 - Selecting the intervention

Places for Physical Activity



Vision: The District of Columbia will be a city in which all residents have access to safe, affordable, high-quality opportunities to be physically active on a regular basis in their neighborhoods.

Working Iowards a Healthy DC
The District of Columbia's
Overweight and Obesity Action Plan



< Back

Service Delivery Innovation Profile

Recreation "Prescriptions" Increase Use of Free Community Exercise Programs by Low-Income Patients Who Are Overweight or Obese

Innovation Comments (0)

☐ Print E-mail Link

☐ Print E-mail Link

Snapshot

Summary

A physician-developed program called Recreation Rx promotes healthy weight by facilitating partnerships between physicians and recreation providers in underserved communities to increase access to safe and structured activities. Area physicians discuss healthy lifestyles with overweight and obese patients, and then use preprinted pads to write a "prescription" for recreational activities within the local community. These customized pads (with separate versions for children, adults, and seniors) list recreational activities such as swimming, yoga, and other exercise programs that local providers (e.g., the county recreation department) have agreed to offer free of charge to prescription holders. The program has generated increased physician awareness of and referrals to community programs, and hundreds of patients have redeemed prescriptions at these programs.



<u>Display Settings:</u>

✓ Abstract

Send to:

✓

Clin Pediatr (Phila). 2008 Sep;47(7):693-7. Epub 2008 Apr 30.

YMCA program for childhood obesity: a case series.

McCormick DP, Ramirez M, Caldwell S, Ripley AW, Wilkey D.

Department of Pediatrics, University of Texas Medical Branch at Galveston, Galveston, Texas 77555-1119, USA. David.mccormick@utmb.edu

Abstract

Family-based behavioral interventions for treatment of childhood obesity have rarely been tested for effectiveness in community settings. The aim of the study was to evaluate the effectiveness of a community-based program for obese children designed to stabilize or reduce body weight. Obese children from our pediatric practice who were active in the program were evaluated. Weight gain during the time of the study was compared with mean weight gain for a group of obese-matched controls who did not participate in the program. Mean weight gain for subjects was 0.28 kg/mo compared with a weight gain for controls of 0.62 kg/mo. Between the first and last visits, 43% (15/35) of the subjects experienced clinically significant differences in weight gain compared with controls. Eight patients lost weight. A YMCA weight management program, which included group counseling, nutrition education, physical activity, and gift card incentives, resulted in favorable changes in overweight children.

PMID: 18448625 [PubMed - indexed for MEDLINE]

- Publication Types, MeSH Terms, Grant Support
- + LinkOut more resources



U.S. Preventive Services Task Force

Search USPSTF

Search



USPSTF Home Resource Links K E-mail Updates

You Are Here: U.S. Preventive Services Task Force > Topic Index > Screening for Obesity in Children and Adolescents > Recommendation Statement

Screening for Obesity in Children and Adolescents

Recommendation Statement

Date: January 2010

Summary of Recommendation and Evidence

 The USPSTF recommends that clinicians screen children aged 6 years and older for obesity and offer them or refer them to comprehensive, intensive behavioral interventions to promote improvement in weight status.

Grade: B recommendation.

Select for a Clinical Summary of this recommendation.

This Recommendation Statement was first published in Pediatrics in January 2010 (Pediatrics 2010;125:361-367, http://www.pediatrics.org), Select for copyright and source information.

Contents

- Rationale
- Clinical Considerations
- Other Considerations
- Discussion
- Recommendations of Other Groups
- Members of the USPSTF
- References



Community Preventive Services

Community Guide O CDC.gov.

Home

Task Force Findings ▼

Topics -

Use The Community Guide •

Methods -

Resources •

News •

About Us ▼

Text Size: SMLXL

Home » Topics » Physical Activity » Environmental & Policy Approaches

Physical Activity

- Campaigns & Informational **Approaches**
- **Behavioral & Social** Approaches
- Environmental & Policy Approaches

Summary of Findings

Community-Scale Urban Design & Land Use Policies

Enhanced Access to Places for Physical Activity.

Street Scale Urban Design/Land Use **Policies**

Transportation & Travel Policies & Practices:

Point-of-Decision Dromote to

Promoting Physical Activity: Environmental and Policy **Approaches**



Environmental and policy approaches are designed to provide opportunities, support, and cues to help people be more physically active. They may involve:

- The physical environment
- Social networks
- Organizational norms and policies
- Laws
 - Public health professionals, community organizations, legislators, departments of parks, recreation, transportation, and planning, and the media

Task Force Recommendations & Findings

This table lists interventions reviewed by the Community Guide, with Task Force findings for each (definitions of findings). Click on an underlined intervention title for a summary of the review, and where available, Research-tested Intervention Programs (RTIPs),

Community-scale urban design and land use policies	Recommended
Creation of or enhanced access to places for physical activity combined with informational outreach activities	Recommended

Get Email Updates

Submit your email address to get updates on The Community Guide topics of interest.

Submit

What's this?

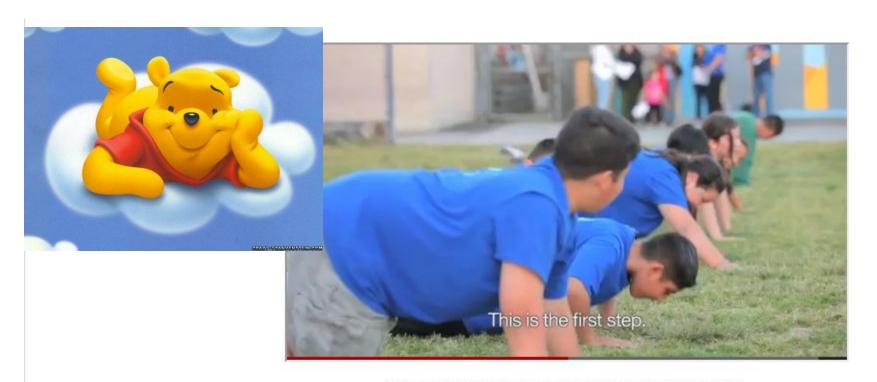
The Guide to Clinical Preventive Services

Together, the Community Guide and the Clinical Guide provide evidencebased recommendations across the prevention spectrum.

More >>

Contact Us

- Email
- Address



*Video not for distribution without express permission. Courtesy of Bite Size.

Childhood Obesity

Obesity (2010) **18**, S62-S68, doi:10.1038/oby.2009.433

Randomized Controlled Trial of the MEND Program: A Family-based Community Intervention for Childhood Obesity

Paul M. Sacher 1 , Maria Kolotourou 1 , Paul M. Chadwick 2 , Tim J. Cole 3 , Margaret S. Lawson 1 , Alan Lucas 1 and Atul Singhal 1

¹MRC Childhood Nutrition Research Centre, UCL Institute of Child Health, London, UK ²Cancer Research, UK Health Behaviour Unit, University College London, London, UK ³MRC Centre of Epidemiology for Child Health, UCL Institute of Child Health, London, UK

Correspondence: Paul M. Sacher (p.sacher@ich.ucl.ac.uk)

Implementing the Intervention

- Referral process
- Tracking and follow up
- Logistical hurdles
 - Licensing
 - Payment

Months	<u> </u>	2	co.	4	υı	6	7	8	9	10	11	13	14	15	16	17	18	19	20	21	22	23	24
Planning																							
Program implementation																							
Evaluation																							

Months	<u> </u>	2	w	4	σı	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24
Planning																								
Program implementation																								
Evaluation planning and implementation																								

Evaluation

• Steps:

- Determine the purpose of the evaluation
- Identify the goals and objectives
- Identify stakeholders
- Determine the central questions
- Set standards to determine success

SMART Objectives

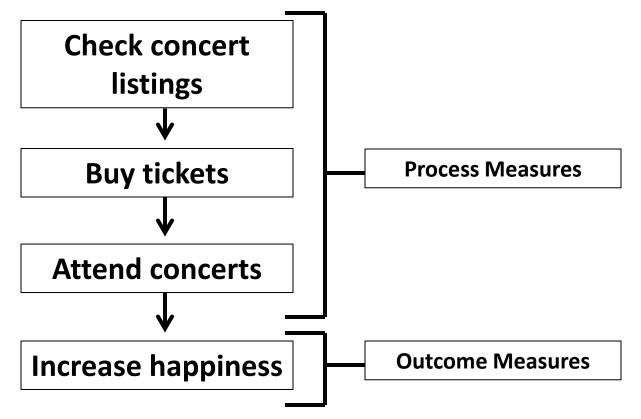
- Specific
- Measurable
- Attainable
- Realistic
- Timely



http://www.iom.edu/About-IOM/Making-a-Difference/Community-Outreach/~/media/Files/About%20the%20IOM/SmartBites/Planning/P1%20SMART%20Objectives.ashx

Evaluation

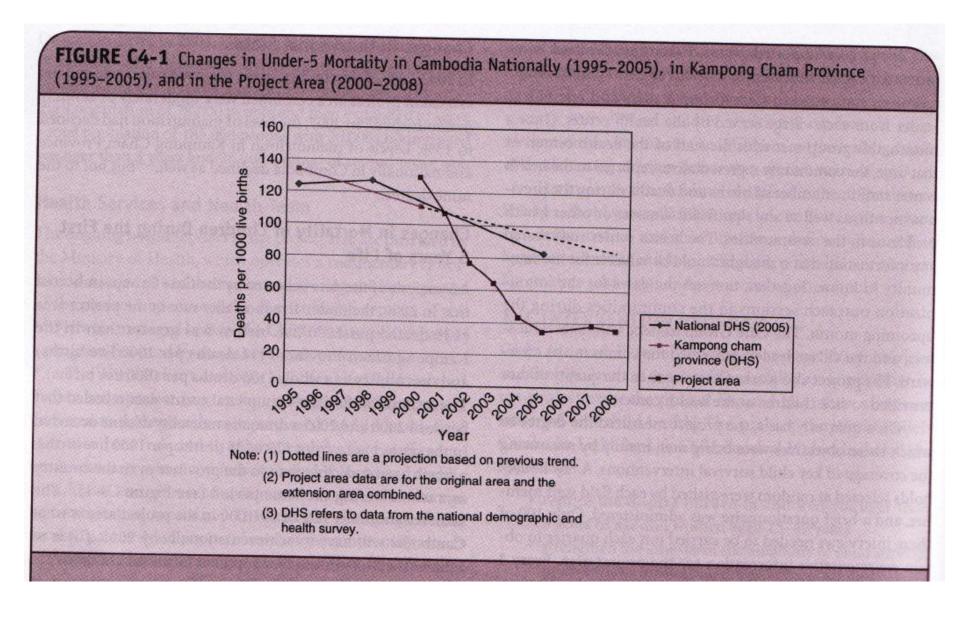
- Determining the central questions
 - Outcome measures
 - Process measures



Evaluation

- Reasons to evaluate
 - Provide feedback
 - Efficient allocation of resources
 - Uncover areas of future intervention
 - Obtain funding

Involving the community in the evaluation



Gofin J, Gofin R. Essentials of global community health. Sudbury, MA: Jones and Bartlett Learning, 2011.

Take Home Messages

- Don't re-invent the wheel. Look at what is already happening in your community and what others have already done.
- Start planning the evaluation while you are planning the intervention
- Outcome measures represent where you want to go while process measures represent how you will get there. Looking at both measures is important when evaluating your project.

Thank you for completing the module.

Please complete this evaluation survey to help us make it better!

https://www.surveymonkey.com/s/5BP3MT6

To obtain, CME credit, you must complete these two additional surveys (complete CME instructions are on the next slide):

1) Continuing Medical Education Form:

https://www.surveymonkey.com/s/53NGY5S

2) Module 4 Quiz:

https://www.surveymonkey.com/s/5GMXB5V

To Obtain CME Credit

- In order to obtain CME credit, you must complete the following tasks:
 - Complete the module(s) or case study.
 - Complete the post-activity quiz (There are quizzes for each module and case study).
 - The last question of the quiz provides a prompt to indicate your email address.
 If you want to receive CME credit, you must provide your email address so that we can document the score of your quiz appropriately.
 - Score at least 75% on the quiz (For quizzes with 4 questions, you must answer at least 3 questions correctly. For quizzes with 5 questions, you must answer at least 4 correctly).
 - Complete the CME certification form.
 - In order to match the CME certification form with your quiz, you must provide the same email address that you provided during the post-activity quiz.