Evidence-Based Health Promotion (EBHP) Programming (Title III-D)

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(DAAS)

- Title III-D funding

- Examples of evidence-based health promotion (EBHP) programming

- Benefits of EBHP programming

- Introduction to the Healthy Aging NC Resource Center

- Steps on how to implement EBHP programming

- Requirements following a completed workshop

- Plans for the future

Title III-D Funding

-Title III-D was established in 1987 through the Older Americans Act of 1965

-Evidence-based Health Promotion and Disease Prevention Services

-It is to be used to support education and implementation activities that support healthy lifestyles and promote healthy behaviors among adults age 60 and older

-In 2012, Congressional appropriations required that III-D funding be used *only* for programs which are demonstrated to be evidence-based

-In 2016, the Administration on Aging (AoA) implemented a highest tier level of programs which were allowed to be used with III-D funding

NC DAAS Health Services Standards/Policies:

https://ncdhhs.s3.amazonaws.com/s3fspublic/documents/files/health_services_standards.pdf

EBHP Programs

-Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability and/or injury among older adults

-Proven effective with older adult population, using Experimental or Quasi-Experimental Design

-Research results published in a peer-reviewed journal

-Fully translated in one or more community site(s)

-Includes developed dissemination products that are available to the public

Falls Prevention

-A Matter of Balance **(AMOB)**   -Walk with Ease
-Tai Chi for Arthritis

Chronic Disease Self-Management Education Programs (Stanford Suite of Programs)

-Chronic Disease Self Management Program **(CDSMP)/Living Healthy**
-Diabetes Self Management Program **(DSMP)**
-Chronic Pain Self Management Program **(CPSMP)**
-Tomando Control de Su Salud **(Spanish CDSMP)**
-Positive Self-Management Program **(PSMP)**

- Powerful Tools for Caregivers

- Home Meds

- Geri-Fit

- Arthritis Foundation Exercise Program

- Fit and Strong

- And others

- **Full list: https://www.ncoa.org/resources/ebpchart/**

- **Benefits of EBHP:**

- Proven return on investment (ROI)

- Improves the health of older adults

- Offers new classes

- Expands classes offered for SCOPE

- Attracts funding

- Attracts new members

- Infrastructure in place to support each other across North Carolina

- EBHPs are proven to be the best programs at achieving outcomes

Measurable Outcomes

(1) Increased public and stakeholder awareness of programs and services

(2) Increased organizational capacity to provide evidence-based programs and services

(3) Increased Health Care provider knowledge of falls and fall risks

(4) Clinical/Community partnerships to establish referral systems

(5) Older Adults & Adults with Disability will increase self-efficacy.

Our Partners

16 Area Agencies on Aging (AAAs)

Senior Centers

Parks and Recreations/YMCAs

UNC System Schools (UNCA)

Federally Qualified Health Centers (FQHCs)

Community Care of NC (CCNC)

Communities of Faith

NC and Regional Falls Prevention Coalitions

NC Division of Public Health

NC Office on Disability and Health

NC Office on Minority Health and Health Disparities

Healthy Aging NC Resource Center

Thanks to the ACL Falls Grant from 2014, a statewide website and resource center was created. This center originally referred to as the HUB, has expanded the services available to individuals across the state. The website is the central location for individuals to post about upcoming trainings, find information on how to become a trainer in CDSME and Falls Prevention programs and learn about resources available.

http://healthyagingnc.com/

Nicolle Miller: Director of State and Community Collaborations

Jeanne Dairaghi: Project Manager, oversees CDSME Program

Ayden Jones: Project Manager, oversees Falls Prevention

Janice Self: Data Administrator

Implementing EBHP

- Each AAA throughout the state is given Title III-D funds which are to be used specifically for EBHP programing as mentioned earlier.

- The AAA can choose to keep the money and provide EBHP workshops or they can disperse the money out to their provider network. There are benefits for both options.

- If the AAA keeps the money they are essentially responsible for offering EBHP workshops throughout their region.

- If the AAA disperses the money the AAA will monitor the funds and will ensure that programs/workshops are being offered by their providers.

- Each AAA is responsible for sending in a quarterly report to the III-D coordinator for the state. This report will provide a quick overview of numbers of programs offered, participants attend, etc.

- The Healthy Aging NC Resource Center enters data information for 3 programs:

  - *Chronic Disease Self-Management Education (CDSME),*

  - *A Matter of Balance (AMOB),*

  - *Tai Chi for Arthritis*

- After a workshop is finished: cover sheets, attendance logs, and participant information surveys should be:

  - scanned to: healthyagingncinfo@gmail.com **OR**

  - mailed to: NC Center for Health & Wellness, **Attention: Janice Self**, UNC Asheville, 1 University Heights, CPO 4010, Asheville, NC 28804.

How to become an EBHP trained instructor

- Leaders are required for each workshop (some require 2) and there are set time frames and information that has to be provided.

- The NCOA chart which lists all III-D programs available also lists requirements for becoming trained in each program.

- There are Master Trainers and Lay Leaders for A Matter of Balance and Chronic Disease Self Management Education Programs. NC DAAS and the Resource Center can assist with answering additional questions on how to be trained in each program.

<u>Future plans and strategies</u>

Webinars

Regional Meetings

Healthy Aging Summit

Reaching out to Senior Centers

Partnerships with the YMCAs

Outreach to medical providers

Coalition building

Medicare reimbursements

Business planning

Online training

"I am only one, but I am one. I cannot do everything, but I can do something. And I will not let what I cannot do interfere with what I can do."

— Edward Everett Hale

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