

Skagit County Public Health

47 employees
Population: 103,000
Northwest Washington



Team Members:

Liz McNett Crowl - Skagit County Healthy Communities
Peter Browning— Skagit County Public Health
Karen Westra— Westra Research
Linda Wright— Skagit Valley Hospital
Dr. Rick Levine— Pediatrician
Karen Rose— Skagit Valley YMCA, Child Care Director
Flora Lucatero— Children of the Valley, Director
Allison Johnston— United General Hospital
Allison Lindsay and Spencer Goldfish — Student Interns

Quality Improvement Story Board

Skagit Childcare Nutrition and Activity Project (SNAP)

Plan

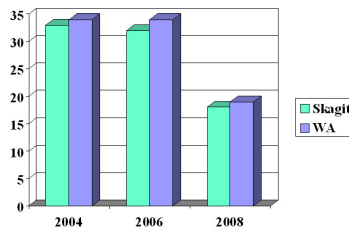
Identify an opportunity and Plan for Improvement

1. Getting Started

Since 2004, Skagit County youth report decreasing physical activity.

Sufficient Moderate Activity

Average percent of students in grades 8, 10 and 12 who meet recommendations for moderate activity*



* Question wording changed from "meet recommendation" (2004, 2006) to "being physically active 60 minutes per day" (2008).

According to the 2008 Healthy Youth Survey grades 8, 10 and 12 combined average 12% obese compared to WA average of 11%. Average risk of overweight and obesity in 2006 was 29% in Skagit County compared to state average of 25%.

2. Assemble the Team

The team consists of members of the Health Department, Healthy Communities Project Advisory Team, community partners participating in the project, Westra Research and student interns.

AIM Statement

By June 2010 increase physical activity for school age children through a community process that identifies and prioritizes evidenced base strategies, and conducts one pilot project that addresses one of the priority strategies.

3. Examine Current Approach

Several data sources were used to create a current overview of obesity, activity and nutrition for children in Skagit County. In 2009 held three summits inviting educators, health-care professionals, and community members to brainstorm a list of strategies and priorities for addressing the issue of chronic disease and obesity among children in Skagit County.

4. Identify Potential Solutions

A literature review was performed to help inform the "next steps" in addressing these issues. The literature review was a systematic exploration of strategies suggested by the summit participants to determine if similar programs or strategies have been developed in other communities and have been found to be successful. Based on this information some strategies were eliminated.

Stakeholders received the Review of Literature and participated in a survey to prioritize nutrition and physical activity recommendations for future project focus.

5. Develop an Improvement

If a nutrition and physical activity program is offered within the structure of before and after school childcare settings elementary-aged children will increase the amount of physical activity that they accumulate and increase the number of fruit and vegetable servings students consume.

Do

Test the Theory for Improvement

6. Test the Theory

In 2009, the Skagit County Healthy Communities Project (HCP) partnered with the Skagit Valley Hospital (SVH), Skagit Valley Family YMCA, United General Hospital (UGH) and Children of the Valley (COV) to implement the Skagit Childcare Nutrition and Activity Pilot (SNAP), utilizing the CATCH (Coordinated Approach to Child Health) Kids Club Program (CKC) for Kindergarten through fifth graders at 15 YMCA childcare sites and one faith-based childcare site in Skagit County.

HCP, SVH and UGH provided funding to provide training for staff and CKC materials and equipment to each site. Baseline data consisted of documentation of the number of minutes of physical activity in December 2009 before CKC implementation, height and weight for each child at all sites, fitness testing utilizing the YMCA Youth Fitness Testing protocol for selected sites and administration of the CKC survey to grades 3-5 in January 2010.

YMCA site leaders kept daily records of attendance and program implementation to document what program elements were used and minutes of activity and were asked to participate in a process evaluation. An instructor survey was administered in May.

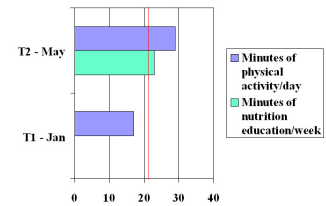
Study

Use Data to Study Results of the Test

7. Study the Results

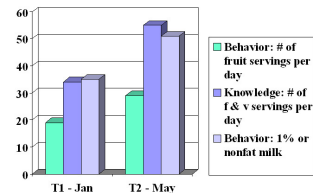
Following implementation of the program, children participated in an average of 29 minutes of activity; a 71% increase in physical activity. Prior to CKC no nutrition education; with CKC 23 minutes avg./week.

Minutes of PA and Nutrition Education



Goal: 20% increase in PA minutes
Achieved: 71% increase

Nutrition Behaviors and Knowledge



Ninety-three percent (93%) of staff surveyed agreed or strongly agreed that they would recommend the program.

Act

Standardize the Improvement and Establish Future Plans

8. Standardize Improvement or Develop New Theory

The Y and COV programs have adopted CKC into their curriculum. We recommend continuing to collect BMI measurements and conducting fitness testing annually to further evaluate program results over time.

HCP will be working with our leadership team and stakeholders to develop and adopt an action plan. Utilizing the lessons learned from this pilot and our action plan we will explore opportunities to replicate this pilot program in different settings, such as early learning or for profit childcare sites. As well as look at new project ideas.