

Quality Improvement and Accountability in Action



Skagit County Health Department
Skagit County, Washington
Population: 117,000

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

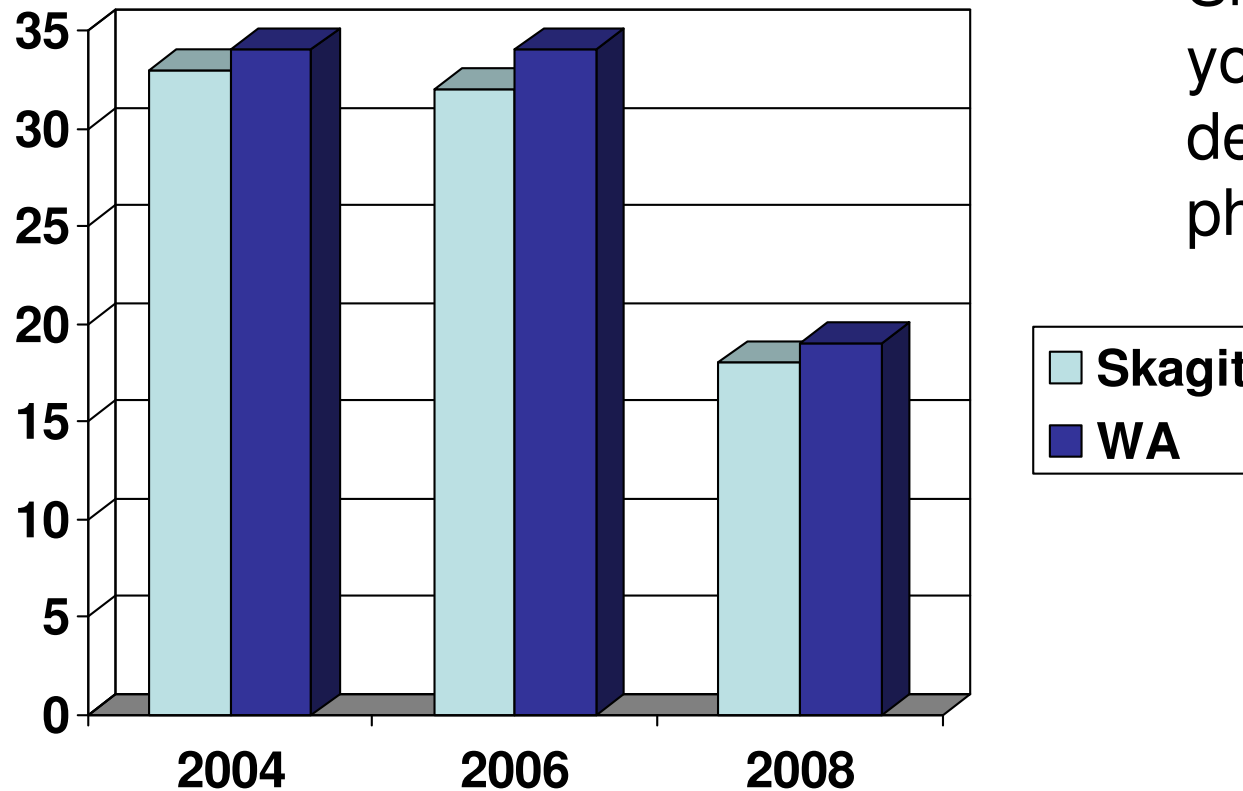
Allison Johnston— United General Hospital

Allison Lindsay and Spencer Goldfish — Student Interns

- Strong community involvement and support
- Project led by Healthy Communities Coordinator

Project Description

Since 2004, Skagit County youth report decreasing physical activity.



- 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%.

Project Description

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.

Short term – Conduct community process to identify at least three evidence based strategies to increase physical activity and nutrition.

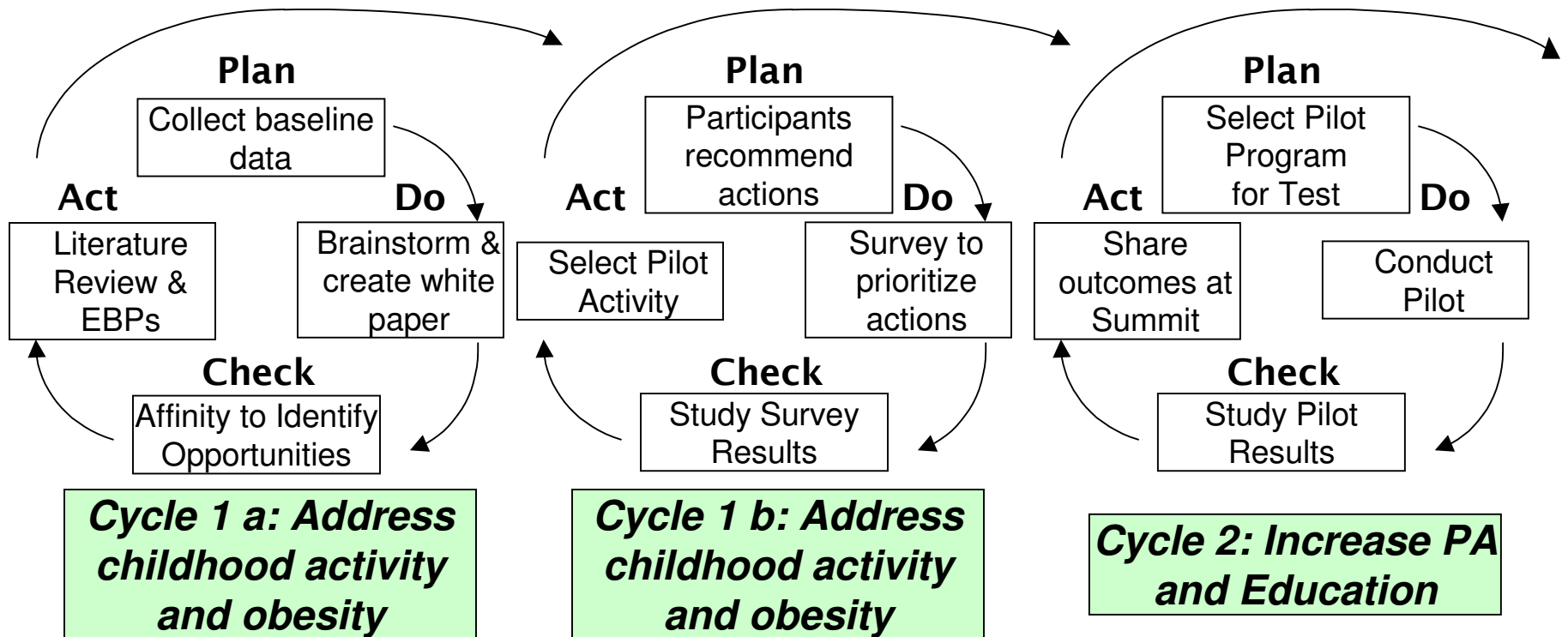
Medium term – Increase daily physical activity that pilot site students engage in by 20% per day by June 2010. Introduce nutrition education and monitor change in awareness of healthy choices.

Long term – Adoption of community action plan and completion of at least one demonstration project that results in at least one environmental or policy change that creates a sustainable increase in physical activity and/or nutrition education for Skagit County school-aged children (June 2011).

QI Method or Tools

- *Structured Brainstorm*
 - What are barriers for children to be physically active [or have access to healthy nutrition]?
 - What are opportunities for children to have access to healthy nutrition [or be physically active]?
- *Quasi Affinity Diagram*
 - Created natural groupings from three summit groups *Brainstorm*
 - Conducted Review of Literature
- *Survey*
 - Ranked recommendations

Skagit Project PDCA Cycles



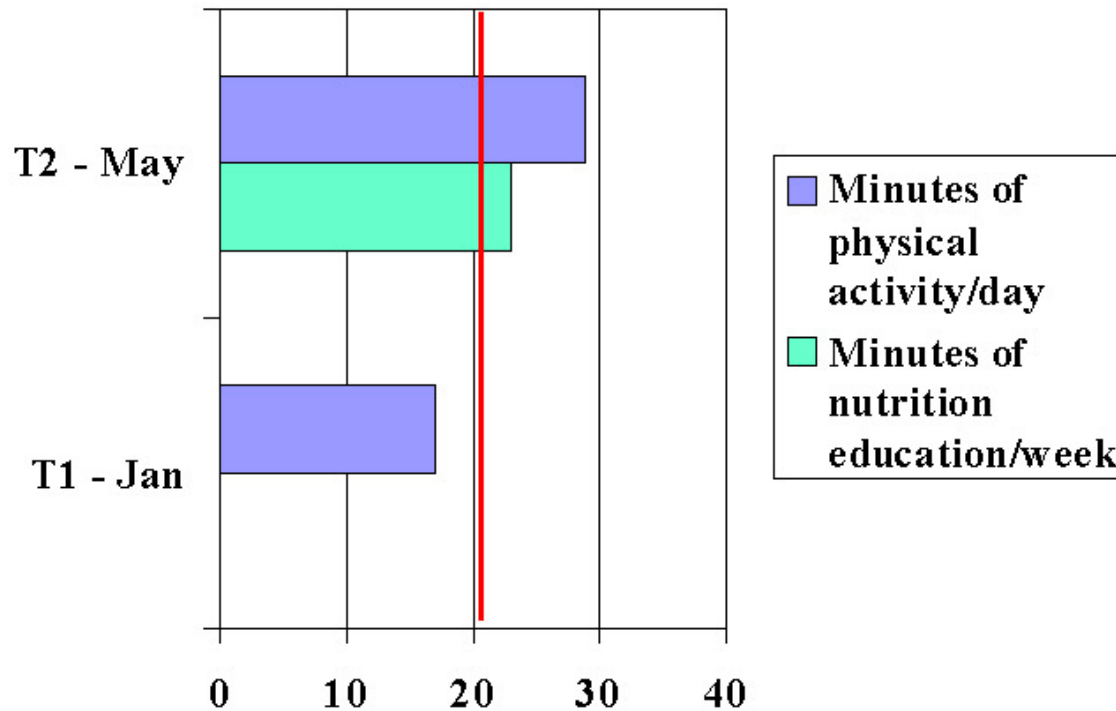
What we did:

- Recruited childcare sites for CATCH pilot
 - Provided training and equipment
 - Established baseline
- Developed evaluation plan
 - Hired consultant for technical assistance
- Pilot implementation and evaluation December 2009 - June 2010



Results

Minutes of PA and Nutrition Education



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

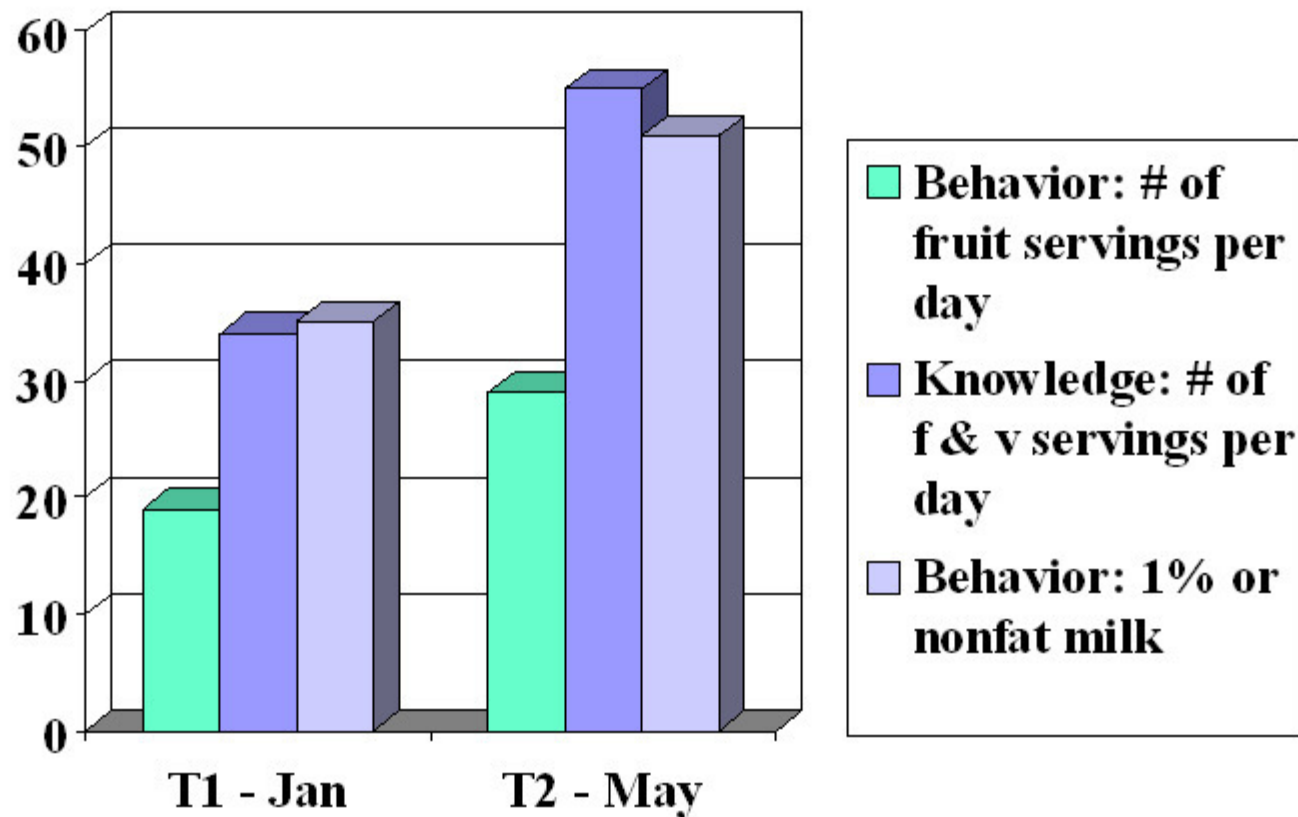
Results: CATCH Student Survey

Knowledge and behavior changes T1 to T2

- % children who had no fruit previous day decreased – 13% to 9%
- % children who correctly indicated they should eat “at least 5” servings of fruit and vegetables each day – 34% to 55%
- % children who reported that they “almost always or always” choose low fat or skim milk over “regular milk” increased – 35% to 51%
- % children who thought “low fat or skim milk” was better for their health than “regular milk” increased from 45% to 73%
- % children who reported they were “very sure they could drink low fat or skim milk instead of regular milk increased: 31% to 51%
- % children who indicated they were “very sure” they had the ability to take the skin off of chicken and not eat the skin increased: 49% to 58%

Results

Nutrition Behaviors and Knowledge



Lessons Learned: What Worked Well?

- Project Team
- Project Partnerships
 - Sustainable
- Hiring technical assistance for evaluation
- CATCH
 - Intended results
 - Site instructors survey:
 - 80% felt kids were more active with CATCH
 - 76% felt kids liked the activity program
 - 88% would recommend the activity program and 93% would recommend the nutrition component

Lessons Learned: What Did Not Work Well?

“Everything went really well for our pilot. We learned a lot and would make only a few changes if we replicated this project or one similar.” Liz McNett Crowl

What would we change?

- More training for staff administering baseline measures and student surveys.
- Ask instructors about which site they represented for trouble shooting and whether they used Screen Time Reduction materials.
- Include a parent component.

Next Steps

- Collect BMI measurements and fitness testing annually
- Share pilot results with partners and community
- Develop and adopt action plan
- Explore opportunities to replicate SNAP in additional settings, such as early learning or for profit childcare centers

