

# Manchester Wellness Coalition | Plan Year 7

<b>NAME OF THE INTERVENTION</b>	MMLB – 2000 Pound Community Challenge
<b>5HF Element to Impact: Eat Better, Move More, Connect with Others in Healthy Ways, Avoid Unhealthy Substances (select minimum of 1)</b>	Eat Better, Move More
<b>Fiscal Agent</b>	5 Healthy Towns Foundation
<b>Tax I.D</b>	
<b>Implementation Contacts (2 or more required)</b>	Ruth VanBogelen, Gayla Martin
<b>Contact phones and emails</b>	<a href="mailto:Ruth.vanbogelen@gmail.com">Ruth.vanbogelen@gmail.com</a> , 734-323-4640; <a href="mailto:gsmartin56@gmail.com">gsmartin56@gmail.com</a> , 734-395-5577
<b>Date Funding Required</b>	
<b>Implementation Date</b>	September 1, 2018
<b>Estimated Completion Date</b>	August 31, 2019
<b>Total Amount Requested from 5HF</b>	\$11,000

Criteria	Descriptions
<p><b>1. Please provide a brief description for the intervention program you are proposing and indicate the target population.</b>  <i>Typically one paragraph (3-5 sentences)</i>  <i>Target population options: youth, adult, seniors, disabled, etc.</i></p>	<p>Losing weight is really difficult and research has shown that the most successful weight loss stories are related to regularly attending a weight loss support group. In the 3<sup>rd</sup> year of MMLB, we are getting even more focused on providing weight loss support groups to area residents. While some people decide on their own that they need to lose weight, often a doctor gives a person some medical news which is a wake-up call that they need to lose weight. Being told you are pre-diabetic with high risk of becoming diabetic, that you are diabetic, that your blood pressure is too high, your total cholesterol is too high are good examples of wake up calls. This intervention provides funding for two different highly successful weight loss support groups – Diabetes Prevention Program and TOPS (Take Off Pounds Sensibly). The target population for this intervention is over weight or obese individuals age 7 and up for TOPS and 18 years and older for DPP. Both of these support groups also work aggressively to help people keep off the weight they lose.</p>
<p><b>2. How does this intervention address the needs identified by your community and the coalition?</b>  <i>Please be specific and refer to local data (i.e. HIP, MiPHY, PAC, NEAT, etc.) and/or the coalition strategic plan. Should include specific health/wellness indicators.</i></p>	<p>2015 BRFSS data for Manchester suggests 68% of area residents are overweight or obese. This is higher than 2010 data and more than 10% higher than data for Washtenaw County.</p>

<p><b>3. What are the specific goals for the intervention?</b>  <i>Specific goals: For each goal address these 5 points so that the goals are SMART goals</i></p> <ul style="list-style-type: none"> <li>• <i>State what you are trying to accomplish,</i></li> <li>• <i>How you will measure progress toward and accomplishment of your goal</i></li> <li>• <i>Who is responsible for collecting the data?</i></li> <li>• <i>Why you think the goal is attainable</i></li> <li>• <i>Describes how the goal is relevant to the coalition and community wellness related needs.</i></li> <li>• <i>What is the timeframe for achieving the goal?</i></li> <li>• <i>See <a href="http://www.wikihow.com/Set-SMART-Goals">http://www.wikihow.com/Set-SMART-Goals</a></i></li> </ul>	<p>1. Register 15 people for a new session of Diabetes Prevention Program starting in September 2018. Those registering must be at risk for developing diabetes as determined by the person's doctor, results of an A1C test, or score on the pre-diabetes survey. The primary goal is for participants to lose 7% of their starting weight in 6 months and then keeping it off. A secondary goal is for participants to get at least 150 minutes of exercise per week. Participants are expected to attend weekly meetings for 6 months, then bi-weekly meetings, then monthly meetings – total time is 1 year. These goals for DPP have been established by the CDC and this program is run all around the USA including twice before in Manchester. If any of the 15 have health insurance that pay for the DPP class, more people can be enrolled. Max is 20 people.</p> <p>2. Maintain an active chapter of TOPS in Manchester by retaining many members and enrolling up to 15 new members between Sept 2018 and Aug 2019. By hosting 2 meetings a week, the goal is for members to get to a healthy weight as determined by their health care provider and then to maintain the healthy weight. The percentage of weight loss varies from person to person. The rate of weight loss will vary but the goal is that on average participants lose 5% of their body weight in 6 months and 10% in a year. Exercise/activity are also encouraged in the TOPS support group. Individuals set activity goals and are rewarded each week when they achieve their goal</p> <p>3. Host a A1C testing free at a Farmers market in Manchester likely during August. A1C is a good indicator if someone is at risk for diabetes (pre-diabetic) or diabetic. The results are only shared with the individual, but everyone gets a sheet explaining results and follow-up recommendations.</p>
<p><b>4. What key data will be collected, analyzed, and used to evaluate the intervention?</b>  <i>Should include:</i></p> <ul style="list-style-type: none"> <li>• <i>Units of Engagement</i></li> </ul> <p><i>Might also include survey data, and other measures such as number of participants, pounds of produce grown, miles of trail maintained, number of books distributed, etc.</i></p>	<p>Pounds lost          Number of people who lost 5, 7 or 10% of their weight          Number of people who achieve activity goals          Number of people who attend meetings every week (or at the frequency of the meetings for DPP)</p>
<p><b>5. What are the estimated Units of Engagement for the intervention?</b>  <i>Unit of engagement = number of people per event * number of events * timeframe for the event (e.g., 30 minutes would be 0.5 hours)</i>  <i>Example : 100 people * 6 events * 1 hour per event =</i></p>	<p>Units of engagement          15 people x 1 hour meeting (DPP) x 32 meetings = 480          15 x 150 min/60min x 52 weeks = 1950          Plus          53 people x .70 (70% attend a meeting each week) x 30 min x 50 week = 927.50          53 x 150 min/60 x 52 weeks = 6,890</p>

<p><i>600 units of engagement.</i></p> <p><i>UNITS OF ENGAGEMENT DO NOT NEED TO BE CALCULATED FOR INFRASTRUCTURE (i.e. parks, sidewalks, trails, etc).</i></p> <p><i>Note- if participation is not part of the key data, describe how you will measure engagement of community members.</i></p>	<p>Total estimated Units of Engagement = 10,250</p>
<p><b>6. Who (specifically) will be responsible for what aspects of intervention implementation?</b></p> <p><i>Please provide names for those responsible for:</i></p> <ul style="list-style-type: none"> <li>• <i>Obtaining all required permits and permissions and all other communication required</i></li> <li>• <i>Deciding on dates, times, locations</i></li> <li>• <i>Marketing – both developing and distributing marketing materials</i></li> <li>• <i>Recruiting necessary volunteers</i></li> <li>• <i>Developing tools to collect data and pictures</i></li> <li>• <i>Analyzing data collected</i></li> <li>• <i>Developing plans for how to improve the intervention (on-going and for subsequent years)</i></li> <li>• <i>Preparing and presenting presentations and reports</i></li> <li>• <i>All other specific tasks for this intervention to be successful.</i></li> </ul>	<p>DPP – coach is Gayla Martin who will coordinate with the NKF, data collection for this group is done by Gayla and NKF.</p> <p>TOPS – Leader is Ruth VanBogelen, there is a co-leader who helps lead the meetings, a secretary who takes minutes, etc., a treasurer who keeps track of finances and pays invoices, weight recorders who weigh in members at the meetings. Currently these officers are Ruth VanBogelen, Kim Mahrle, Char Stewart, Anita Hermin, Chris Scilzo, but leader elections are in July of each year. Data collection is done by these officers.</p> <p>TOPS provides materials for the meetings or we develop our own material</p> <p>Ruth and Gayla will recruit new members and write the final report and presentation.</p>
<p><b>7. Does implementation of this intervention require approval from an organization other than the fiscal agent or organization implementing the intervention?</b></p> <p><i>Yes or No. If yes, please indicate all organizations requiring approval and indicate if approval has already been granted. If it hasn't been granted, when will this be done. Include the name(s) of the approver(s).</i></p>	<p>National Kidney Foundation (NKF) and discussions have already happened.</p> <p>TOPS is a non-profit organization with a 70 year history of being a weight loss support system for local chapters.</p>
<p><b>8. With whom will you collaborate on this</b></p>	<p>5 Healthy Towns Foundation – serves as the fiscal agent</p>

<p><b>intervention including assistance with implementing the program, assistance with financing the program and organizations which might financially support this intervention (long term sustainability).</b>  <i>Please include names of people in the collaborating organization that will be involved with this intervention. Indicate in the budget below – the contribution from the organization(s).</i></p>	<p>NKF – serves as oversight for DPP, will bill insurance, collect data, Crystal Moy is our contact at NKF, Manchester Wellness Center is used as the location for the DPP meetings                  Village of Manchester Conference Room is used as a free location for TOPS meetings.</p>
<p><b>9. If this is a continuing intervention:</b>                  A. How many years has this intervention been funded by the coalition?                  B. Have the outcome(s) been presented to the coalition and the report(s) been submitted to 5HF?  <i>If no, when will the presentation to the coalition be done and when will the written report and expense report be submitted to 5HF?</i>                  C. Describe how the intervention will be improved (also include past improvements if this is the 3 or more year of funding).                  D. Has the amount requested from the coalition increased or decreased? Why?                  E. How many more years will this intervention request funds from the coalition?</p>	<p>This is the 3<sup>rd</sup> year of this intervention and we continue to modify the plan to focus on the most successful weight loss                  Year 1 weight loss total was 412 pounds                  Year 2 weight loss Sept – end of March (half way through the program) was 889 pounds                  Year 1 has been reported to the coalition and the report has been sent in.                  Year 2 presentations and report will be in Oct 2018</p> <p>Year 1 offered no support system – weight loss was on your own.                  Year 2 we offered 2 different support systems so the cost was higher                  Year 3 – we are dropping the groups that are losing weight on their own and walking only to focus completing on weight loss support so the cost has dropped some</p> <p>We are hoping the 2020 BRFS shows a dramatic drop in the number of people who are overweight or obese – if the numbers are similar to county numbers, likely we can stop MMLB.</p>
<p><b>10. Does your intervention have a sustainability plan?</b>  <i>How the intervention will be sustained if the coalition does not grant/renew funding?</i></p>	<p>Health insurance companies are beginning to pay for the DPP class so it is possible we will no longer need funds to run this program.                  The TOPS chapter should be self –sustaining after this next year</p>
<p><b>11. Provide citation(s) of similar programs used as a model in developing this intervention.</b></p>	<p>Both DPP and TOPS are well documented programs for weight loss.</p>

**Budget**

Description	Cost	
DPP class managed by NKF, coach Gayla Martin. Note – if person registering has health insurance that covers the DPP class, their insurance will be charged by NKF . Class will be limited to 15 members who do not have insurance coverage and an overall maximum of 20 people.	<b>\$6500</b>	
A1C testing at the Farmers Market (done by Dr. Eccles staff and A1C machines)	<b>\$ 900</b>	

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TOPS – costs will cover registration for up to 58 (43 existing and 15 new) people and provide Real Life books to all new members 55 x \$32 = \$1856 + 15 x \$17 (book) = \$255	<b>\$2000</b>	
Activity Trackers for 20 people @ \$55 each	<b>\$1100</b>	
<b>TOTAL</b>	<b>\$11,000</b>	

**Also provide the information in the two tables below**

<b>Budget Summary</b>	<b>Amount</b>	<b>Percentage</b>
Amount of funds from Coalition	<b>\$11,000</b>	
Total funds from other sources	<b>Estimate some will come from insurance but will not know amount until people register</b>	
Marketing/Advertising	<b>\$0</b>	
Compensation – to one or more people	<b>?? amount of \$6500 that is compensation</b>	
Infrastructure (structure that lasts 5 years or more)	<b>\$0</b>	
Other expenses		

Plan Year	Amount granted	Amount Spent	Amount carried over	Amount returned to 5HF
Year 1				
Year 2				
Year 3				
Year 4				
Year 5	<b>\$5600**</b>		<b>231</b>	
Year 6	<b>\$13400</b>	<b>In progress</b>		

**\*\* also used \$2000 left over from a previous walking program – funds at the Wellness Center – from Year 1 Plan**