

Our Cog in the Wheel

Building a successful community wellness program in your area

Corvallis, Or



- Oregon State University
- 60-100,000 people, depending on the time of year
- “fitness forward”
- Community centers
- Parks and Recreation

Mitchell, SD



- Corn Palace
- 15,000 residents
- “fitness backward”
- Community centers
- Parks and Recreation
- Dakota Wesleyan University

Community Health Needs Assessment

- CHNA requirements
- Our stats (2016, 19, 22) in Mitchell
 - Behavioral health and substance abuse
 - Healthy lifestyle choices for weight management and chronic disease
 - Access to physical activity opportunities/physical inactivity rates
 - Affordable housing
 - Public transportation

Funding sources

- Necessary to get started
- DOH
- GOOD & Healthy
- Wellmark
- Cooperatives
- RWJF
- CDBG (Governor's grants)
- RTP/LWCF

Healthcare partnerships

- Legitimacy to programming
- Support in areas outside expertise
- Built-in referral base
- Financial considerations
- Politics

BCBH

- Evidence-based programming with multiple sectors
 - Chronic pain
 - Diabetes management
 - Cancer
 - Chronic disease
 - Worksite chronic disease
 - Cost is \$150 per certification unless volunteering

Each an opportunity to create relationships with possible customers
NSCA CSPS

SDSU- Extension

- Walk With Ease
- Fit & Strong
- Virtual options
- Perfect for older adults with no gym experience
- Promote promote promote
- Cost is \$150 per certification unless volunteering

NDPP

- Lifestyle Modification training
- Certification process
- Cohorts
- Program length
- Marketing
- Qualifications
- CDC recognition- worth it?
- Cost to get certified is \$650.00 unless covered by grant funding
- Medicaid/Medicare reimbursement

Cardio Index

- DOH funded through stroke/heart attack prevention
- SMBP- non clinical version
- Screening for hypertension
- New member intake program
- Referrals
- Ties into additional programming
- Next steps for the program

Healthy Community Collective

- Health Improvement Innovation grant
- Food pantry, culinary arts program, Sanford Health of Mitchell
- Cooking demonstrations
- Pantry availability
- CHW
- Health education
- Free Rec Center memberships
- Enrollment into programming
- Non-threatening environment for communication between professionals and the people they serve. Podium for service groups/providers

Evolution of the Healthy Community Collective

- Elementary and middle school assemblies
- Cooperation with PHW teachers along with nutrition and dietetics teachers
- Messaging is consistent and focused on prevention of obesity and type-2 diabetes, hyperlipidemia and hypertension
- Wraps in counselor at events to address mental health services in our community
- Also creates screening opportunities for BP and Cholesterol, where we will promote visiting their PCP

Community based classes

- Run at a community or recreation center
- Focus on trades and skills
- Partner with local professionals
- Promotion for their business
- Technology, home improvement, lawn care, cooking, etc.

Stepping stones and free access

- Turned into a social experiment
- Was started because of the 2016 CHNA
- Member reaction
- Staff reaction
- True appreciation
- Relationship development
- Opportunities for all classes to learn

Youth space expansion

- 3500 sq ft to convert into youth area
- Usable all day, emphasis on after school programming and adaptive PE classes
- Technology integration
- Engagement with weekend snack pack program
- Pay it forward mentality
- Sanford *fit*

Q and A

- Next steps?
- Failures
- Successes

Collaboration with local centers

- Youth centers
- Senior centers
- Libraries
- Worship spaces
- Low-income housing developments/apartments

Medically underserved populations/areas

- MUA: has a shortage of primary care health services within a geographic area such as:
 - County
 - Group of neighboring counties
 - Group of urban census tracts
 - Group of county or civil divisions

This would be the area of underservice

Medically underserved populations/areas

- MUP: have a shortage of primary care health services for a specific population subset within a geographic area. These groups may face economic, cultural or language barriers to health care
 - Examples:
 - People who are homeless
 - People who are low-income
 - People who are eligible for Medicaid
 - Native Americans
 - Migrant farm workers
 - This would be the who of underservice

Weight Management Program

- CHNA told us what we needed
- Wraps everything together
- By 2030, 50% of the world will be overweight/obese
- 30% of Davison county obese, 24% self-report inactivity
- 3rd and 4th answers on health risk assessment were “being overweight” and “poor eating habits”
- Enroll in Cardio Index, NDPP, BCBH Diabetes management, HCC for cooking demonstration

Motivation (or something like that)

- Prevention as a means of motivation doesn't work.....
 - (But it should)
 - Big scares....
 - Little scares....
 - Path of least resistance
 - Engagement of mental health professionals
 - Incentives (workplace wellness)

PHIT Act

- Proposed and passed originally in 2018
- New act calls for up to \$2000 per household
- Fitness memberships, equipment and services covered
- FSA/HSA
- 20-30% savings
- Foundation for future fitness and wellness program funding and insurance reimbursement

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