

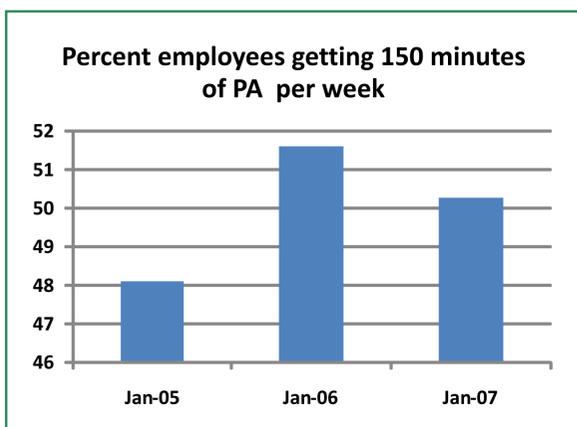
Team Members:

Cindy Green, Health Promotion Program Manager
 Heleen Dewey, Physical Activity Specialist
 Liz Wallace, Epidemiologist
 Mary Holmquist, Human Resource Specialist
 Linda Lillard, Graphic Artist

PLAN

1. Getting Started

Spokane Regional Health District (SRHD) began the Physical Activity (PA) Quality Improvement (QI) wellness program with its own staff based on the results from five years of health risk appraisal data showing that only 50 percent of staff got 150 minutes of physical activity per week.



2. Assemble the Team

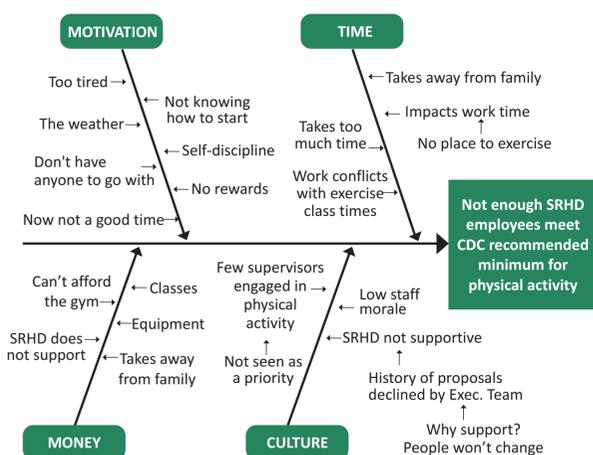
The SRHD team included the agency's QI expert, the lead staff in physical activity, the manager of the physical activity program, two people from the agency's Wellness Committee, a human resource specialist and a graphic artist.

AIM Statement

Increase the percentage of the SRHD employees who participate in physical activity (150 min/wk) from 50.3% to 60.3% by December 2010.

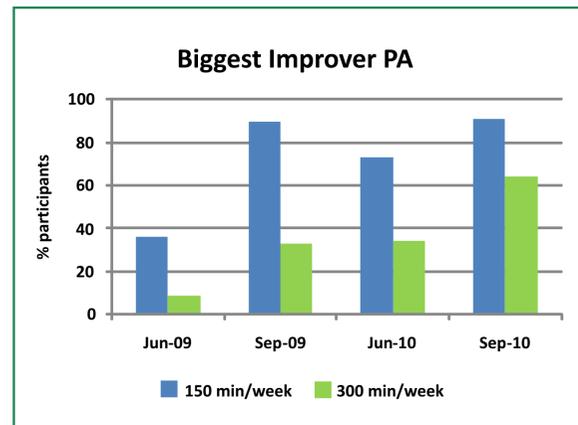
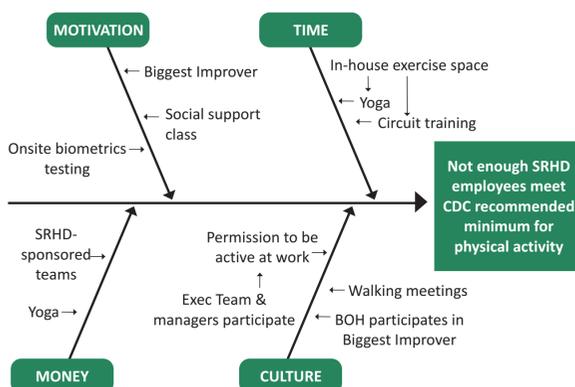
3. Examine the Current Approach

The team used a wellness program assessment tool and found SRHD offered the lowest level of programming. The team held focus groups to hear staff's barriers to physical activity and created a fishbone diagram to organize and categorize the barriers.



4. Identify Potential Solutions

The team researched potential solutions using The Community Guide, Centers for Disease Control and Prevention, and worksite wellness best practices. The team brainstormed a list of solutions using best practices that addressed the barriers to staff meeting the minimum of 150 minutes per week of physical activity.



Improvements noticed in 2010

Survey respondents (n=97)

- 44% Wellbeing
- 44% More energy
- 25% Lowered cholesterol
- 34% Lowered weight
- 22% Lowered blood pressure
- 28% Slept better
- 26% Improved BMI
- 29% Managed stress better

5. Develop an Improvement Theory

By offering multiple types of physical activities for staff to be involved in, stressing social support, convenience, and rewards, more staff would obtain at least 150 minutes of PA each week.

DO

6. Test the Theory

The interventions were implemented in the following timeline.

	2009		2010			
	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec
Positive Environment						
Social support						
Biometric Screening						
Biggest Improver						
Sponsored Teams						
Yoga						
Leadership						
Circuit Training						

STUDY

7. Study the Results

Health risk appraisals were conducted in June and wellness surveys in the fall. Biggest Improver had the highest participation, 103 in 2009 and 97 in 2010 and the greatest physical activity increase. 40% maintained improvement from Year 1 end to Year 2 start. In Year 2, 6 of 12 Board of Health members participated.

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ACT

8. Standardize the Improvement or Develop New Theory

Biggest Improver small team and social support theory showed the most increase in PA. The "game" will need to be changed next year to reach more sedentary staff.

9. Establish Future Plans

The PAQI team is transitioning responsibilities to the SRHD Wellness Committee to increase PA. Best practice provides guidance not to focus on one aspect of wellness too long. Nutrition and stress reduction will be the next target areas.

