



PRIORITY 2 : Promote adoption and integration of evidence-based or consensus guidelines for prevention, screening, diagnosis, and treatment of overweight and obesity from pregnancy through adolescence by primary healthcare providers.

Strategy : Create easy-to-use and easy-to-adopt tools for provider education based on national guidelines, adapted for Alaska. Include similar methods to ‘stages of change’, motivational strategies, and ‘Ask, Advise, Refer’. Conduct outreach to providers to implement toolkit.

Target Audience : licensed healthcare providers who can currently bill for health education services

Action Step What is the concrete task or action needed to carry us closer to the strategy?	Who Who (agency, organization, person) is responsible for carrying out the action?	When When will it happen? Is there a deadline? Immediate, mid-range, long term?	Progress How are we doing? Are we succeeding?
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Assessment Goal : Find out providers’ current practices, resources and create toolkit aligned with their priorities

1	Review existing models and tools: - survey results from AK Center for Pediatrics - 5:2:1:0, Bright Futures (gold standard for preventive care)	Katie Butler, AK Center for Pediatrics (survey results)		
2	Review current practices of providers (medical, pharmacist, etc.)			
3	Survey, conduct focus groups of target audience - What support do providers have? - How much time for an intervention? - How ready are they to adopt guidelines?			
4	Identify more specific target audience(s)			
5	Identify quality measures for alignment, esp. those that providers and practices are most focused on			

6	Develop toolkit materials			
7	Identify and recruit content experts to review toolkit to prepare for outreach			
Outreach Goal : Engage experts, engage target audience in assessment, roll out and evaluation of tool kit				
1	Identify partners and forums for outreach	Grand Rounds, chapter champions, WAAMI and residency programs, APCA, ANPA, School nurses association, PH nurses, UA School of Nursing, Patient Centered Medical Home trainings		
2	Share results with survey respondents and plan for outreach			
3	Develop toolkit with following parameters - Easy to use and easy to train - Quick and efficient technique - Adaptable to different roles - Determine materials and format(s) – print, web, texting reminders, pre-printed prescriptions - Incorporates existing research and reviews re: best practices			
Implementation Goal : disseminate toolkit widely with target providers through online and in-person trainings.				
1	Develop brief intervention provider training (web-based videos) and secure CME for completing training			
2	Identify champions (providers and others) to promote the new practices in grand rounds, incorporated into office			

	procedures, etc.			
3	Deploy toolkit on web and through trainings			
4	Incorporate toolkit into care coordinator certificate program			
5	Design pilot project with mixed cohort of private and public practices			
Evaluation Goal : Track success of toolkit implementation through process outputs and population-based health outcomes.				
1	Identify quality measures providers are most focused on related to child health			
2	Develop evaluation framework			
3	Track process outputs: e.g. provider satisfaction, # of providers trained, # toolkits disseminated, # of times used, increase in knowledge and implementation			
4	Track health outcomes (children and adults, over time): e.g. BMI, blood pressure, inpatient visits, emergency visits, referrals to specialists			