Imagine the future of healthcare for aging adults…

Is it possible to re-invent health and aging? Can evidence-based educational programs lead the way? This project is a collaboration involving Oregon State University Extension and hospitals, healthcare organizations and senior service programs in southern Oregon. It will instruct up to 500 older adults in Chronic Disease Self-Management using an evidence-based Stanford University curriculum (Living a Healthy Life with Chronic Conditions). Evaluation of impact will be rigorous. Results will demonstrate individual and community-wide impacts on disease self-management and increased health provider referral to chronic disease self-management programs. The six-week curriculum uses a targeted educational offering as the centerpiece for innovatively addressing the health-related needs of aging adults with chronic conditions.

PROJECT TEAM
Principal Investigators:
Sharon Johnson M.S., Extension Faculty, Jackson and Josephine Counties, Certified Program Leader and Master Trainer, Chronic Disease Self Management, Stanford University
Patty Case, R.D. C.D.E., Extension Faculty, Klamath County, Certified Program Leader, Chronic Disease Self-Management
John Irwin B.S., Stanford-trained Master Trainer, Chronic Disease Self-Management; Jackson Community Informatics Consultant; RVCOG Senior Advisory Council (SAC) member. John will act as the coordinator of the project, arranging classes, matching program leaders to classes and tracking evaluation activity. He will also develop the application and the database(s).

Consultant to the Project:
Molly Engle Ph.D., Program Evaluation specialist; Consultant to the evaluation process and the analysis of the data

Collaborators:
Don Bruland, Director, and select RVCOG/SDS staff, Rogue Valley Council of Governments’ Senior and Disability Services (RVCOG/SDS)

The Advisory Group (AG) to this project includes administrative representatives of the Asante/Rogue Valley Medical Center, Providence Hospital, Ashland Community Hospital, La Clinica de Valle (a safety net community clinic system in Jackson County, serving Latino families), Jackson County Public Health, the Retired Senior Volunteer Program (RSVP) of Jackson and Josephine Counties and the Medford Senior Center.

PROJECT PLAN
Target audience
Individuals with chronic disease conditions in Jackson, Josephine and Klamath counties

Justification for Project's Importance and Need
A "silver tsunami" is the term used to portray the increasing presence of aging adults in Oregon and the nation. In many areas of southern Oregon, older adults exceed 30% of the population. One local prediction forecasts within the next eight years over fifty percent of the population of the Rogue Valley will be over age fifty-five.

Chronic disease conditions are inevitable companions to the aging process. The National Governor's Association's (NGA) publication, Measuring the Years: State Aging Trends and Indicators concludes that 80% of people over age sixty-five have one chronic condition, and 50% have two or more. These realities couple with an over-stretched health care delivery system and combine to create a situation that deserves innovative attention. In response to the challenges of 1) aging demographics, 2) chronic disease prevalence and 3) the compelling need for innovative approaches to address disease management, a collaboration of individuals and organizations in southern Oregon, (public and private, university and community) intend to use chronic disease self-management as a centerpiece for managing health-related issues in aging populations.

Beginning in 1994, Stanford University researchers (Kate Lorig et al) introduced chronic disease self-management training (a Stanford-designed, highly-structured six-six class series taught by certified trainers) and demonstrated it was effective in improving health-related behaviors and health status. A 1,000 person clinical trial of adults over age sixty received the training and were followed for one year. They exhibited:
increased self-efficacy i.e. measurably greater confidence about self-managing their individual disease conditions
improved health status, as determined by their health provider
decreased emergency room use and fewer physician visits

Project Goals and Objectives

Goal 1. Institutionalize chronic disease self-management programs in Jackson, Josephine and Klamath counties

Objectives
a. Deliver the workshop series on a constantly occurring basis in all three counties
b. Evaluate the results of the instruction using a multi-tiered evaluation system
c. Demonstrate measurable impact in knowledge gains and changed behaviors

Goal 2. Engage the health care delivery system in embracing chronic disease self-management

Objectives
a. Initiate regular physician referrals to the program
b. Maintain, increase the involvement of community health care organizations
c. Demonstrate the effective use of chronic disease self-management materials (Tomando Control de su Salud) with Spanish-speaking populations

Goal 3. Develop a computerized database to systematize the delivery of the chronic disease self-management program (which will include the training of additional program leaders in Spanish and English and the coordination of the evaluation process)

Objectives
a. Put database(s) in place
b. Assure the development of information that is easily transportable into Extension’s OAT (Outcomes Assessment Tool)
c. Refine an instructional program, and accompanying evaluation system which can be readily adopted by Extension faculty throughout the state

Anticipated Project Outcomes

250-500 individuals in Jackson and Josephine Counties receive training in chronic disease self-management (May 2006-June 2007)

6-12% of the above individuals trained in chronic disease self-management are Spanish speakers

30-60 individuals in Klamath County receive training in chronic disease self-management

12-16 additional new program leaders are trained (currently there are 14 leaders in Jackson County, 3 of whom are Spanish speakers; there are 2 program leaders in Klamath County)

Evaluations at the end of each 6-class training series demonstrate knowledge gains

Telephone follow-up (three weeks and three months following the end of a series) demonstrate continuing behavior change(s); the reference is action plans completed on the last day of training

A focus group at the end of the demonstration year reflects the use of self-management approaches, improved health status and behavior change(s) and explores the “reach” of the training’s impact (current and potential)

A minimum of five physicians will have referred individuals to the training series

Abbreviated Chronic Disease Self-Management informational presentations are regularly offered on community cable television

Family and Community Development (FCD) Extension adopts these approaches statewide
Proposed Project Activities
Oregon State University Extension faculty Sharon Johnson and Patty Case, both certified in the Stanford University curriculum, *Living a Healthy Life with Chronic Conditions* and John Irwin, also a certified master trainer and program leader will deliver classes, as will the recently trained (March 2006) program leaders. John and Sharon, in their roles as certified master trainers, will also train additional workshop program leaders.

Each workshop leader is teamed with another certified program leader to deliver the structured six-class series to classes of 10-18 participants with chronic conditions that range from arthritis and osteoporosis to diabetes and heart disease. The instruction provides: 1) techniques to deal with frustration, fatigue, pain and depression 2) exercises for maintaining and improving strength, flexibility and endurance 3) medication management 4) nutrition information and 5) approaches for improving communication with family, friends, and health care professionals.

Evaluation Plan
This chronic disease self-management approach has been piloted in Jackson and Josephine counties with encouraging results. The project will formally launch regularly-occurring chronic disease self-management classes and evaluate the results against a logic model framework. All of the six-class series will use a tiered evaluation involving: 1) written post-class evaluations using the Stanford University evaluation tool 2) follow-up telephone calls using scripted queries that reference the goal-setting and action planning completed during and at the end of the classes and 3) a final focus group facilitated by an individual independent of the project. All evaluation results will be incorporated into the final report.

Timelines
- **March 2006**: Program leaders trained in Jackson County (12) and Klamath County (2)
  - Note: activity completed
- **April/May 2006**: Workshop series launched in Jackson and Klamath counties
- **June 2006**: Additional program leaders trained in Jackson County and initial leader training held in Josephine County; workshop series continues in all three counties; post workshop follow-up calls initiated
- **July 2006**: All databases in place and tested; workshop series with accompanying tiered evaluation process continues in all three counties
- **August 2006**: Physician referrals initiated; community cable television presentations promote the project
- **September/October 2006**: Spanish speaking program leaders (3) attend Stanford University to become master trainers
- **November 2006-March 2007**: Workshops continue in English and Spanish; classes start bi-monthly in Jackson, Josephine and Klamath Counties; evaluation process underway
- **April 2007**: Focus group held
- **May/June 2007**: Workshops are on-going in all three counties; a talent pool of 20-24 volunteer program leaders is in place across all three counties; television presentations on chronic disease self-management regularly occur
- **July 2007**: Final report submitted to Extension leadership

Summary
Using a logic model as its frame of reference, this University-community collaboration will generate:
1. clearly-identified outputs i.e. a 3-county talent pool of workshop leaders/volunteers and up to 500 trained chronic disease self-managers.
2. individually-relevant outcomes for those who complete the training i.e. increased self-efficacy, measurably improved health status and evidence of an ability to modify risky health-related behaviors
3. long-term community impacts i.e. active physician referral, via prescription, to Chronic Disease Self-Management programs; introduction and integrated use of chronic disease self-management in improving the health of limited income Spanish speakers; early indications of reduced use of unnecessary emergency room visits and health provider visits

After a full year of demonstration, fees for the 6-class series will be established ($30-$50/series, with a sliding scale assumption). The overarching vision of this project is to make Chronic Disease Self-Management a self-sustaining, community-based program that maximizes the use of disease-management education and vividly demonstrates how to “live a healthy life with chronic conditions.”

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Budget:

**Materials and Supplies**

Texts for workshop participants (*Living a Healthy Life with Chronic Conditions*) 500 copies ($18.95 each; 40% discount for 500 copy order). Cost to be equally split with RVCOG/SDS. $2,891

Program Leader teaching manuals -- 12 manuals @ $10.00 each Binder and copying of the Stanford materials provided via CD. 120

Copying costs (.03/copy), postage (mailings to leaders/participants). 370

**Equipment**

Workshop Teaching Kits (7 kits @ $266/kit) Each portable dolly-cart kit contains two easels; 2 flip charts, markers, signage, two training CDs, nametags, etc. (6 kits for Jackson/Josephine Counties; 1 for Klamath County). 1,862

**Communications and Technology**

Application/Database development (MS-Access application design and development; reports development and testing); PC export capacity -- 140 hours @ $50/hour 7,000

**Salary and benefits**

Telephone follow-up by support staff funded by Jackson County resources; 67 hours, including OPE ($17.76/hour) 1,200

**Subcontracts**

Focus Group facilitation/analysis of responses/report 600

**Other**

Stipends to workshop leaders to cover travel and extraneous costs related to the workshop delivery; $50 stipend for teaching a 6-class series; 35 workshops projected across three counties, two leaders/workshop. 3,500

Workshop leader training – onsite lunch, refreshments and beverages for 15 for 4 days. 400

**Promotion**

Newspaper, TV and radio promotion 1,200

Total: $19,143

Note:

- Project coordination (scheduling workshops, registering participants, matching leaders to workshops, fielding queries regarding program) will be donated by John Irwin, Master Trainer/Program Coordinator, and/or funded by RVCOG/SDS.
- Cost of license to provide Stanford training is funded by RVCOG. Recruitment and promotion efforts by Advisory Group (AG) members and space for the training are in-kind donations.
- Funding for Spanish speaker Master Leader training funded by the Elwood Foundation.
- John Irwin, Stanford Certified Chronic Disease Self-management Program Master Trainer will donate his time for workshop leader training. Sharon Johnson, Patty Case and Molly Engle have built this project into their respective Work Plans.