# SUMMARY OF PREVIOUS AWARDS
## Evidence to Implementation (E2I) RFA
## 2018-2021

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| **2021** | N2PH: New to Public Health Residency | Susan J. Zahner, DrPH, RN, FAAN | 1 |
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| **2020** | MOVIN: Mobilizing Older adults Via a systems-based INtervention | Barb King, PhD APRN-BC FAAN Linsey Steege, PhD | 1 |
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**2021 Award**

PI: **Susan J. Zahner, DrPH, RN, FAAN**
Title: ***New to Public Health Residency Program (N2PH Residency)***

The New to Public Health Residency Program (N2PH Residency) is a residency program for public health practice professionals who are in their first year of employment in a public health setting. It is designed to supplement state and local orientation programs and uses evidence and best practices from the literature on nurse residency programs. The curriculum for this training is based on the Foundational Public Health Services model and focuses on leadership, professional development, specific role formation, and competency for public health practice.

Components of the program include an online accredited professional development course, monthly facilitated synchronous virtual presentation/discussion sessions conducted with enrolled residents, 3) a N2PH Hub website for marketing and communications, registration, information, and links to curated supplementary resources for residents, and 4) support of residents by experienced mentors.

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**2020 Awards**

PI: **Yao Liu, MD MS, Department of Optometry**
Title: ***I-SITE: Implementation for Sustained Impact in Teleophthalmology***

**Summary:** This program aims to increase diabetic eye screening rates and prevent blindness among working adults with diabetes. Teleophthalmology can address limited access to eye care, especially in rural settings. It reduces barriers by allowing patients to get evidence-based, convenient, low-cost diabetic eye screening using eye cameras in primary care clinics. This program, called I-SITE, guides primary care clinics through the complex implementation process (through coaching facilitation, technical assistance, and an online toolkit) to maximize the effectiveness of teleophthalmology programs.

PI: **Barb King, PhD APRN-BC FAAN and Linsey Steege, PhD, School of Nursing**
Title: ***MOVIN: Mobilizing Older adults Via system-based INtervention***

**Summary:** This intervention aims to improve opportunities for patient ambulation events by decreasing barriers in hospitals that prevent nursing staff from getting patients up to walk. The intervention includes five components that target barriers including nurse knowledge and self-efficacy for mobility assessment and walking ill patients, sufficient resources (human and equipment), improved communication and documentation, and ambulation pathways. Ultimately this intervention results in changing nursing staff behavior and a shift in unit culture from mobility restriction to mobility promotion. Testing of the intervention has demonstrated significant increases in patient ambulation events and distances that have been sustained for up to 4 years. The team is currently measuring patient and healthcare utilization outcomes, including patient functional status like gait, speed, and independence, patient perception of value, physical therapy consults, patient discharge destination, length of stay, and readmission.

PI: **Kara Hoppe**, **DO MS**, **Department of Obstetrics and Gynecology**
Title: ***Staying Healthy After Childbirth: A Program to help new moms with high blood pressure***

**Summary:** You may already be familiar with the postpartum telehealth/remote patient monitoring intervention that targets caring for women with postpartum hypertension. Women are discharged with education about the problems they may have with hypertension, and then are given equipment to monitor their blood pressure and weight at home. The collected vital sign data is submitted back to a central remote monitoring service. Women are advised as needed regarding individualized treatment plans to maintain adequate blood pressure control. Dr. Hoppe supervises a team of trained nurses as a centralized managing team helps to standardize and improve overall care. Their team has cared for over 900 women since starting the first feasibility study, and of those, 700 specifically since January of 2019. They currently serve up to 95 women at all times. This program has demonstrated a significant reduction in hospital admission compared to standard of care. In addition, it is cost effective and saving for UnityPoint Health-Meriter

## 2018 Awards

PI: **Betty Chewning, PhD, School of Pharmacy**
Title: ***Tai Chi Prime for Community-based Falls Prevention***
- **UW Program Partners: Community Academic Aging Resource Network (CAARN)**
- **Community Partners: Aging & Disability Resource Centers (ADRC), Wisconsin Institute for Healthy Aging (WIHA)**

**Summary**: One-third of older Wisconsin adults fall each year and the state's mortality rate from unintentional falls is twice that of the national average. While there is evidence that tai chi programs can improve balance, few have been adapted for older adults who have limited mobility and are at a high risk for falls. In addition, most programs adapted for older adults do not emphasize the need for daily home practice and many run longer than most senior centers' schedules permit, limiting adoption. Dr. Betty Chewning and her team developed Tai Chi Prime (TCP), an abbreviated program that more easily fits into senior center schedules, is adaptable for those with mobility issues, and promotes social interaction and home practice habits. TCP has demonstrated results including significant improvements in mobility, leg strength, and confidence about stability during activities that require balance. Dr. Chewning and her team will conduct market research, develop business and marketing plans, and develop and beta-test a Master Trainer package, TCP course manual, and implementation guide in collaboration with the Launchpad team.