

## 2017-2018 Bright Spot Award Nomination Form

The Bright Spot Awards are an effort to recognize examples of meaningful Primary Prevention initiatives taking place across our state. Here are the steps to nominate your initiative:

- 1.) All nominations must be submitted by July 1, 2018. One nomination form must be completed per initiative nominated. Email completed nominations to Matt Coleman ([Matthew.Coleman@TN.gov](mailto:Matthew.Coleman@TN.gov))
- 2.) All nominations received are redacted so that the review committee will not know the exact location and persons involved with the initiative. The review committee is made up of individuals from each region of the state. They will review, score, and discuss each submission. An average of the final scores given by the review committee will be used to determine the award level earned.
- 3.) Award levels include Platinum, Gold, Silver, Bronze, and Honorable Mention.
- 4.) Awardees will be announced in the fall of 2018.
- 5.) Each nomination will be presented with a comprehensive feedback report from the committee, which will include strengths of the initiative and opportunities for improvement.

**Application:**

**County:** Sevier

**Initiative Name:** Minority Outreach Committee: ESL Classes

**Primary Prevention Focus Area(s):** Other: Minority Health

**Primary Contact Name, Email, Phone:** Kristen Gentry, [Kristen.Gentry@tn.gov](mailto:Kristen.Gentry@tn.gov), 865-453-1032

## Bright Spot Award Questions

**Please explain why you think this initiative should be considered for the TDH Bright Spot Awards.** (150 words max); (10 points available)

The Minority Outreach Committee and the subcommittee focusing on English as a Second Language (ESL) have leveraged community partners and resources to drive an effective, community-driven initiative. The Minority Outreach Committee, consisting of fifteen community partners, has come together with the goal of identifying and addressing specific minority health needs. The Committee was formed following the Gatlinburg wildfires. A review of the effectiveness of emergency systems determined a gap in communication with the non-English speaking population. Key partners were invited to an initial meeting and the identified first step involved conducting surveys, which identified communication as a primary barrier to accessing resources. This contributed to the focus on new channels of communication and the initiation of ESL classes. This initiative is working to help us achieve our vision of being a recognized and trusted leader, in the nation's top ten, partnering and engaging to improve health.

**Is this initiative contributing to a policy, systems, and/or environmental change<sup>1</sup> in the community?** (300 words max); (75 points available)

This initiative is contributing to systematic and environmental change through focusing on access for any individual with limited English proficiency. Currently 20% of those seeking services at the Sevier County Health Department have limited English proficiency. The approach is bringing organizations together to ensure that information is presented in a culturally competent way, striving to make it standard practice to ensure that materials and information are available in other languages. The Committee developed a community resource guide in Spanish, and members of the committee also offer translation services. Each representative is working to create systematic changes within their own organization to allow the population to feel more comfortable seeking services by providing them with gatekeepers and safe individuals at the various organizations in the community. Through this committee the number of safe individuals available in the community has expanded to include those who may only speak English.

**What are the SMART objective goals and major purpose(s) of this initiative? (SMART objectives are Specific, Measurable, Attainable, Relevant, and Time Bound. Example: By May 2019; all soft drink**

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<sup>1</sup> Policy, systems and environmental change is a way of modifying the environment to make healthy choices practical and available to all community members. By changing laws and shaping physical landscapes, a big impact can be made with little time and resources. By changing policies, systems and/or environments, communities can help tackle health issues like obesity, diabetes, cancer and other chronic diseases (<http://www.cookcountypublichealth.org/files/PPW/PSE%20Change.pdf>)

**machines in Lauderdale County Schools will be turned off during the school day, per school board policy.)** (300 words max); (10 points available)

The mission of the ESL subcommittee is: To improve access to health care services and build a stronger community by providing non-English speaking adults with the English language skills needed to successfully advance towards vocational and personal goals. The SMART goal is: To increase by 25% the ability of ESL (English as a Second Language) class participants to utilize needed resources by September 30, 2018. The teachers recognize that each group may have individual definitions of needed resources. The classes are made to be practical and adaptable, with students working with the teachers to determine the most effective use of their time.

One avenue for access to be addressed is by removing barriers. The barrier of communication is addressed by not only teaching the classes, but also by spending the last few minutes of class time promoting various events and opportunities available in the community. Another barrier to access is fear. Classes are occurring in a safe space and teachers are coming to where the participants and their children already feel comfortable. The goal is to allow students to feel comfortable asking questions, both in class and at the organizations that the volunteers represent.

Cycles of learning and evaluation have allowed for the primary leaders to adapt the goals for the next set of classes. Future goals will be related to knowledge and grasp of the English language with an evidence-based measure that was not available for the initial class, but will be available with funding from the Minority Health Grant. Another future measure will be the number or percentage of students who progress to the next level, to intermediate or advanced classes.

**What is the annual budget and funding source for this initiative? If no funding is available, how have you implemented or sustained the initiative?** (150 words max); (5 points available)

Initially \$109 of the money allocated by the state to be withheld for PPI from the local county appropriation to the state was used to purchase a curriculum and craft items to use with the children. Using the PDCA (Plan-Do-Check-Act) model for process improvement, it was identified that a different curriculum needed to be purchased to allow for testing of change in knowledge/skills. This would also support a SMART goal statement that with better measures. The team then applied for and received a \$5,000 Minority Health Grant through the Tennessee Department of Health to purchase a new curriculum and other supplies to use for participant recognition and with the children.

**Have community partners helped with the initiative? What are the roles of these partners?** (300 words max); (20 points available)

As mentioned previously, the Minority Outreach Committee is made up of representatives from 15 different agencies, organizations, and businesses. The roles of facilitator, co-facilitator, and secretary of the Minority Outreach Committee are currently filled by TDH staff. The roles of website development, social media ambassador, and primary newsletter ambassador are performed by external organizations

and individuals. The website domain was donated by a private donor. In the classes, the role of administrative director/lead teacher is filled by the Walter State Community College (WSCC) representative. WSCC also identified the original curriculum and provided the training for those assuming the role of teacher. The roles of site coordinators are filled by the pastor and assistant pastor of Christiania Iglesias Le Luz de Jesus, the church providing the facility where the classes are held. A majority of partners serves in the role of teacher or check-in worker. Students from WSCC receive extra credit and practice by acting in a teaching role. One partner provides announcements in Spanish at the end of each class session. The role of child care worker is primarily filled with students from the local high schools and Health Department Staff. These students can receive community service credit hours toward Tennessee Promise requirements. All those working childcare over the age of 18 are required to have a background check. All those working under the age of 18 are supervised by an adult.

**What is the timeline for the initiative? (When does planning occur? When is/was the initiative implemented? When is the initiative evaluated?)** (250 words max); (5 points available)

Initial planning occurs during the Health Department annual strategic planning process to determine interest of the part of staff identification of a PPI Team to assume responsibility for developing the action plan. The PPI Team then shares the action plan with the Minority Outreach Committee for input. Once the action plan is approved, implementation of specific action steps is begun. Annual training is provided by the WSCC liaison prior to fall classes beginning. In addition, all perspective teachers are invited to sit in on classes at the Adult High School at any point during the semester. Classes are implemented in two, twelve-week long semesters and a once-a-month summer semester. Following each semester, the PPI Team and Committee use the PDCA model to evaluate the identified measures, discuss barriers and opportunities for improvement, and determine what adaptations, if any, need to be made prior to the next semester.

**In what way is this initiative especially innovative? How is this initiative different from other similar programs? Is there a specific idea tested with this approach? Is this work informed by relevant literature or research studies?** (400 words max); (20 points available)

One of our core strengths in relation to innovation is leveraging strategic partnerships. This is a unique community of academia, healthcare, government, and religious organizations coming together to work towards the goal of building community and improving access to community resources. One area in which this initiative is innovated is by allowing students from WSCC who are in higher level Spanish classes to act as a teacher or co-teacher, giving them hands-on teaching experience. This also allows high school students the opportunity to receive community service hours towards the Tennessee Promise requirements. A majority of the initial participants was from the local church providing the facility for holding the classes, but has since expanded to include more participants from outside the local congregation. Participants (adult students) attending the ESL classes come from Sevierville, Pigeon Forge, and Gatlinburg. Based on the initiative survey done with the minority population, it was determined that transportation was a primary issue among respondents. and access issues, as there are

currently ESL classes provided at the Adult High School in Sevierville that require students to participate in a certain number of classes, and child care is not provided.

Another primary innovation is that most ESL classes do not provide child care. Providing childcare improves access to language classes, primarily for but not limited to the women. Of the seventy-six originally enrolled 43% indicated that they were in need of the child care services during class time. This is an opportunity for the children to play, do art, and receive homework assistance. The children have varying levels of English language knowledge as well and have the opportunity to improve their skills. Children who attend the classes develop positive relationships with the community partners, for example, nurses who may be providing immunizations during visits to the Health Department.

**Are the measures clearly listed describing what makes the program effective? Is data provided or referenced that supports the conclusion? What makes this program effective? How is the program evaluated? Does this initiative achieve its stated goals?** (350 words max); (20 points available)

This class has been determined to be effective by surveys provided at the end of each semester. The primary goal is to increase by 25% the ability of ESL (English as a Second Language) class participants to utilize needed resources by September 30, 2018. This was originally defined as access to the resources of banking, healthcare, and teachers. Cycles of learning allowed for us to determine that a majority of our population do not bank in the traditional sense, so this question was removed during the second semester. Regarding healthcare, initial class results indicated that 81% felt more comfortable calling and making appointments to see a doctor, and 100% responded positively the second semester. The third measure was related to communication with the participant's children's teachers. Results indicated that a majority of those who had children indicated that they felt more comfortable talking with a child's teacher, and second semester data indicated that all of those with children are better able to communicate with teachers. A final question was added about overall interactions with the community; with 93% indicate that they are better able to interact with their community. The remaining 7% of respondents did not answer the question. The second semester data indicated that all students were better able to interact with their community. Additional questions were included on the survey related to what the teachers could do to help participant learning and what additional learning topics the participants would like. Another measure of success is related to participation. A question was included addressing the participant's willingness to come back another semester. The waitlist grew throughout the classes to a high of thirty participants, which we attempted to integrate into classes as current participants dropped out. One hundred and seventeen individuals filled out a registration form indicating that they were interested in classes.

**What limitations or obstacles might be expected if others wished to replicate this initiative?** (300 words max); (50 points available)

Potential limitations may be present if the community is not accepting or embracing of minority populations. This project requires a level of commitment that requires dedication and passion. Having volunteer job descriptions mitigated the potential obstacle of unreliability of volunteers. It was found

that students and teachers bonded and formed relationships that kept the volunteers accountable as well. The role of teaching is a substantial time commitment, but only a few lead teachers are needed. Those who want to assist without that commitment may act as a co-teacher or in the role of childcare worker. Recruitment of volunteers may be an obstacle, but providing service documentation assisted to reduce that obstacle. Another potential limitation is lack of those whose speak the language. While it is not necessary to have a volunteer speak the language, it is helpful to have an advisor. Also, child care rules and regulations should be provided in the primary language.

Working with a religious organization was successful in the area of recruitment. The participants already had a network that reduced fear and apprehension. This also allowed the committee to provide childcare under the organization's liability insurance.

In Sevier County, a representative from the church, WSCC, and Health Department, meet more regularly to plan and address problems that arise. An optimal teacher to student ratio would be no more than one to ten, with the ideal scenario being one teacher, a co-teacher, and no more than ten students. The Sevier County classes saw a decrease of around 20%, which is due to increased work hours during certain seasons. Wednesday nights do not appear to be a good night, due to potential religious programming. An additional recommendation would be to have classes last between one and a half and two hours, leaving the last fifteen minutes for announcements.

**Is this initiative sustainable without the resources of the local health department being involved?** (250 words max); (20 points available)

Building a strong Minority Outreach Committee with active multiple community partner participation and gradually transferring the leadership of this committee to non-Health Department staff will ultimately lead to this project being sustainable without resources from the Health Department after an initial period. A majority of teachers and the lead teacher are not Health Department staff. A majority of childcare is provided by Health Department staff; however, volunteers from the church or youth groups and sports teams are an avenue for those who are unable to make the commitment to teaching. The Health Department provides copies of each handout in the curriculum for each student; however, individuals and organizations often bring their own homework assignments and copies. The organization of teachers and assignment of childcare workers and additional volunteers can be accomplished by anyone with experience in organization. The major expense was the purchasing of a new curriculum. Funding to sustain the program would be minimal and could be obtained by seeking sponsorship through local businesses or organizations that work with or employ members of the minority populations.