

A. Cover Page

A.1. Title: Increasing capacity to treat tobacco use and dependence
in the Alaska Tribal Health System

Grant ID: 16766717

Collaborators: Alaska Native Tribal Health Consortium (ANTHC); Strength Based Strategies (SBS)

A.2. Abstract

Goal: The goal of this project is to create an online tobacco treatment specialist training program that increases the accessibility and ease for healthcare providers and professionals to be trained on how to help individuals quit tobacco.

Target population: Tobacco use is the number one cause of preventable death among Alaska Native people and American Indian/Alaska Native people have the highest tobacco use rates in the world (ALA, 2011). While overall tobacco use rates among adults in the United States and Alaska are decreasing, since 1996, the tobacco use rate among Alaska Native adults has remained steady and has not decreased significantly (BRFSS, 2012).

Project: This project will develop a comprehensive online Tobacco Treatment Specialist training program based on the current in-person ANTHC Tobacco Treatment Specialist Training program. This training will allow health care professionals to meet the health care system standards for treating tobacco use administered by their organization and the Alaska Tribal Health System (ATHS). This program will include all components of the ANTHC ATTUD accredited in-person TTS training.

Evaluation: The ANTHC Tobacco Prevention and Control Program, in partnership with SBS, will monitor the number of healthcare professionals who successfully complete the TTS online training program using an online database program. National standards and measures required within the ATHS will be reviewed quarterly to ensure tobacco use status and screening for tobacco use improves as more providers in the ATHS are trained.

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C. Main Section of the Proposal

C.3. Overall Goal and Objectives

The goal of this proposal is to develop a sustainable online tobacco treatment specialist training program based on the current ANTHC in-person tobacco treatment specialist (TTS) training that increases accessibility and reduces barriers for healthcare providers and professionals to be trained on how to help individuals quit tobacco. The project will result in more individuals who use tobacco quitting because more health professionals will be competent to treat tobacco use and dependence and have the confidence to talk with patients about quitting tobacco using the knowledge and skills learned in the online TTS training.

Tobacco use is the number one cause of preventable death among Alaska Native people, and American Indian/Alaska Native people have the highest tobacco use rates in the world (American Lung Association, 2013). While overall tobacco use rates among adults in the United States and Alaska are decreasing, since 1996, the tobacco use rate among Alaska Native adults has remained steady and has not decreased significantly (BRFSS, 2012). Alaska Native adults are still twice as likely to smoke as their non-Native counterparts. However, the majority of Alaska adults who currently smoke want to quit; about three out of five try to quit each year (BRFSS, 2012).

The Alaska Native Tribal Health Consortium (ANTHC) Division of Community Health Services commits itself to ensuring that Alaska Native people are the healthiest people in the world by offering strong programs and assisting with the development of policies to prevent disease, premature death and injury. The ANTHC Tobacco Prevention and Control Program supports this mission and vision by providing resources and support for Alaska Native people who use tobacco and are ready to quit using tobacco.

The ANTHC Tobacco Prevention and Control Program provides direct cessation services at the Alaska Native Medical Center (ANMC). ANMC shares a campus with ANTHC and is the hospital that provides tertiary medical care for American Indian/Alaska Native beneficiaries in Alaska. The ANTHC tobacco program works with ANMC to develop policies and protocols that ensure providers and healthcare professionals are using the United States Public Health Service Best Practice Guidelines for Treating Tobacco Use and Dependence as part of their treatment. Systems for the treatment of tobacco use and dependence have been created and implemented into the electronic health record system that follow standards required by Joint Commission and the Centers for Medicare and Medicaid Services. The Tobacco Prevention and Control Program has strong active partnerships with statewide and national organizations, such as the State of Alaska Tobacco Prevention and Control program, the American Lung Association of Alaska, the Association for the Treatment of Tobacco Use and Dependence (ATTUD), the Health Education Council Break Free Alliance, the Smoking Cessation Leadership Center and the Public Health Law Center to reduce the use of tobacco among regional and tribal populations and have been involved in creating a number of culturally sensitive educational materials about the negative health risks of using tobacco and benefits of quitting tobacco that are used statewide and nationally.

Pfizer Independent Grants for Learning and Change (IGLC) and the Smoking Cessation Leadership Center (SCLC) wants to see projects that focus on improving the competence of healthcare professionals and the performance of healthcare systems to help smokers to quit tobacco. According to best practices for treating tobacco use, healthcare providers play an important role in helping individuals quit tobacco. Tobacco treatment programs that assist tobacco users in quitting can produce significant health and economic benefits. Evidence-based clinical practice guidelines outline effective cessation strategies that encourage providers to advise and help patients quit tobacco using both counseling and FDA approved pharmacotherapy. In addition, implementation of care systems that ensure patients are asked about and treated for their tobacco use are critical to the success of cessation interventions.

Tobacco Treatment Specialists and Certified Tobacco Treatment Specialists, or TTSs, are nationally recognized professionals who are trained to provide treatment for individuals seeking to stop using tobacco. A TTS understands the science behind tobacco addiction, nicotine withdrawal symptoms and effective treatments for the use of tobacco. In addition, a TTS can provide clear and accurate information about the causes and consequences of tobacco use through the development of an individualized treatment plan using comprehensive, evidence based assessments and treatment strategies. A TTS provides effective treatment for all types of tobacco use while working closely with a variety of populations including those with specific health issues. A TTS often serves as an educational resource for organizations, other healthcare providers and the general public regarding tobacco use treatment issues. When an individual has completed a TTS certification; it means that the TTS has demonstrated a high level of proficiency in the treatment of tobacco dependence by completing training, passing an examination and depending on professional credentials, demonstrating either 240 or 480 hours of experience providing tobacco treatment.

Five key objectives will be achieved upon completion of this project.

- Adapt the in-person tobacco treatment specialist training curriculum into an online tobacco treatment specialist training program to increase accessibility for healthcare professionals to be educated about tobacco, to explain the risks of using tobacco and how to help individuals quit tobacco based on the USPHS Best Practice Guidelines for Treating Tobacco Use and Dependence.
- Initial pilot of the ANTHC online tobacco treatment specialist training program with preselected ANMC clinics by April 2016.
- Regional pilot of the ANTHC online tobacco treatment specialist training program for at least one healthcare professional in each of the 12 tribal regions of Alaska by October 2016
- Promote the online training program on two statewide and three national websites in order to increase future and sustained participation in the online training program.
- Launch a user-friendly, interactive online learning platform that allows participants to complete all required modules of the training on their own time and at their own pace within a given timeframe by April 2017.

C.4. Technical Approach

C.4.a. Current Assessment of need in target area

The 2008 United States Public Health Service Clinical Practice Guideline: Treating tobacco use and Dependence recommends that when treating tobacco use and dependence, clinicians identify, document and treat every tobacco user presenting in a healthcare setting. Joint Commission and Centers for Medicare and Medicaid Services have identified four core measures to address tobacco use among all hospitalized patients. These four measures are now available for selection by hospitals to meet their six core measure sets for accreditation. As part of its National Tobacco Control Program, the CDC recommends that healthcare centers implement systems to address the use of tobacco among patients. While the Affordable Care Act has influenced more accrediting agencies and healthcare organizations to address the use of tobacco, many healthcare professionals do not have the in-depth knowledge and skills to address and treat tobacco use and dependence.

There has been a demonstrated need in Alaska and the United States for training to be developed that is more accessible for providers. Many healthcare professionals work in settings that make it difficult to attend in-person trainings. Travel, time away from the clinic, finding replacement staff and accommodating training due to staff turnover are all expensive barriers. Online training platforms allow healthcare clinics to meet training needs for staff by increasing accessibility. The Association for the Treatment of Tobacco Use and Dependence (ATTUD) website lists 11 in-person tobacco treatment specialist programs on their website. However, many of the healthcare providers that are required to address the use of tobacco do not participate in these trainings because of the time and resources necessary to attend. The ANTHC Community Health Aide Provider (CHA/P) program, Behavioral Health Aide Training program, Diabetes Educator program and the Healthy Healers program have already developed or are in the process of developing online curriculums and training platforms that allow healthcare professionals to participate in training without having to travel and/or attend in person. The ATTUD website lists zero Tobacco Treatment Specialist trainings that are offered entirely in an online delivery format and the ANTHC Tobacco Prevention and Control Program has had multiple requests from physicians, dentists, pharmacists, nurses, community health aides and other health professionals in Alaska and nationally to develop an online Tobacco Treatment Specialist training to meet accessibility needs.

C.4.a.i. Quantitative baseline data summary

According to the training database that is maintained by the ANTHC Tobacco Prevention and Control Program, since 2006 and through 2014, 196 individuals who work in the Alaska Tribal Health System (ATHS) have been trained as a Tobacco Treatment Specialist through the in-person ANTHC Tobacco Treatment Specialist Training program. While the in-person training has a max attendance capacity of 40 participants, creating the online delivery format would allow more healthcare professionals to be trained each year.

There are 12 main tribal health regions in Alaska with seven (7) hospitals, approximately 36 health centers, 170 community clinics with 550 community health aides/practitioners, and 125 behavioral health aides. The Affordable Care Act, Meaningful Use, Joint Commission and CMS

along with the Government Performance and Results Act (GPRA) and the Indian Health Service, require health organizations to address the use of tobacco. According to GPRA measures, only 37.8% of AHS patients are screened for tobacco use yet 41.9% of these individuals use tobacco. The GPRA goal for the AHS is that there will be a 42.6% tobacco use screening rate and a 12.4% tobacco use rate. This data presents a gap in both the screening of tobacco use and the number of individuals who use tobacco in the AHS. These gaps can be reduced or eliminated by training more providers in the AHS to be tobacco treatment specialists and then help individuals quit tobacco.

C.4.a.ii Primary target audience

Physicians, mid-level providers, nurses, behavioral health clinicians, community health aides and a number of other healthcare professionals have a prime opportunity to intervene with individuals who use tobacco and the USPHS Best Practice guidelines (2008) indicate that these professionals make the most impact in encouraging a tobacco user to make a quit attempt. However, because of the time commitment and funding necessary to participate in an in-person five-day tobacco treatment specialist training, many of these health professionals are not afforded the opportunity for the necessary education to help individuals quit tobacco. An online Tobacco Treatment Specialist training would allow these healthcare professionals to complete the training at their own pace, outside of a classroom setting. More of these healthcare professionals will be able to help their patients who use tobacco quit, while meeting measures established by their healthcare organizations around tobacco use.

There are approximately 146,000 Alaska Native beneficiaries who receive services within the Alaska Tribal Health System. This project will target the 12 main tribal regions in Alaska to support at least one provider or healthcare professional to take the online training during the regional pilot TTS training session in October 2016. Patients receiving services in these clinics will directly benefit from providers addressing tobacco use in the clinical setting; increasing the likelihood these patients will make an attempt to quit tobacco and eventually decreasing the rate of tobacco use among Alaska Native people.

C.4.b Project design and methods

The ANTHC in-person tobacco treatment specialist training is accredited by the Council on Tobacco Treatment Training Programs (CTTTP), which is the TTS training accrediting body of the Association for the Treatment of Tobacco use and Dependence (ATTUD). This means that the training has met standards based on the core competencies for the evidence-based treatment of tobacco dependence established by ATTUD. Accreditation is a key source of external validity for this program and provides an assurance of quality control, making the training program attractive to trainees while also enhancing marketability. ATTUD has given ANTHC their approval to translate the current in-person ANTHC TTS training into an online format and supports development of this online TTS Training to benefit numerous health professionals nationwide who are interested in becoming a TTS.

ANTHC proposes to design a comprehensive online Tobacco Treatment Specialist training program based on the current accredited in-person ANTHC Tobacco Treatment Specialist

Training program. This online program will include components that address the health implications of using tobacco and how tobacco specifically affects Alaska Native people, while focusing on action steps to implement clinical best practices for treating tobacco use and dependence in health systems. This online training program will address the established need to increase the access and affordability of the tobacco treatment specialist training for healthcare professionals in the AHS. In addition, this training will allow healthcare professionals to meet the healthcare system standards for treating tobacco use administered by their organization and the Alaska Tribal Health System.

The online training program will be developed, piloted and published and then made accessible for both providers in the AHS, in the United States and potentially, the world. An outreach plan will be developed in order to market the program to key stakeholders including but not limited to national, state and tribal health systems, behavioral health systems, tobacco prevention and control programs and private hospitals and healthcare professional organizations.

Training development

The development of the online tobacco treatment specialist training will involve adapting the current content of the ANTHC in-person TTS training into a user-friendly, interactive learning format. ANTHC will review the content, while the creative and technical expertise of Strength Based Strategies will be contracted to convert the content into an online learning format.

The current in-person TTS training is a four and a half day training that traditionally includes 30-35 classroom education hours. Learning modules include:

- Prevalence and patterns of tobacco use, dependence and cessation and how these measures vary across demographic (including gender), socio-economic and cultural subgroups in Alaska, nationally and the world;
- The neuroscience of nicotine dependence and its treatment;
- Tobacco treatment strategies that include the basic knowledge about the process of quitting tobacco and the tobacco cessation theory and treatment;
- Pharmacotherapy for treating tobacco use and dependence;
- The incidence, prevalence, patterns and types of smokeless tobacco used in Alaska, the United States and the world;
- Working with tobacco users with substance abuse and mental health conditions;
- Laws and ethics of being a TTS;
- Relapse prevention;
- Motivational interviewing;
- How to intervene with individuals who experience other medical conditions; and the
- The intake, assessment and treatment planning process.

In addition, the ANTHC TTS training provides a module on the prevalence, patterns and types of tobacco used in Alaska with a particular focus on Alaska Native people.

ANTHC and Strength Based Strategies are very aware of the need for cultural diversity within the training components and will strive to make the online TTS training program sensitive and relevant to the needs of the varying tribal and regional subgroups in Alaska.

The training will be developed using a comprehensive, multi-tiered learning approach that reaches all types of learners. Each module will be created separately and in segments to allow for continued modification and improvement as the training progresses through time. Various multimedia including, but not limited to videos, surveys, polls, quizzes and lectures will be used to ensure the learner has an enhanced training experience that utilizes both audio and visual learning activities.

The ANTHC in-person TTS Training has undergone rigorous expert review to ensure the training meets the standards, expectations and criteria of the Alaska Native Tribal Health Consortium, the Alaska Tribal Health System and the Association for the Treatment of Tobacco use and Dependence. Dr. Kathy Koller, Dr. Gary Ferguson and Karen Doster of ANTHC and Dr. Jay Butler, formerly of ANTHC and now with the State of Alaska, have all analyzed the content being shared to ensure the information is correct and culturally sensitive. These same experts critically review the in-person training content each year in order for the training to offer continuing education units to participants through the ANTHC Education Office. All of these individuals, in addition to the physicians and presenters who regularly share information during the in-person TTS Training, have agreed to provide in-kind review of the online version of the training during the development phase of the project.

Eight months have been incorporated into the timeline to ensure a sufficient amount of time is spent reviewing and developing the online training format. ANTHC and Strength Based Strategies will work hand-in-hand to develop an effective training format that is engaging for participants, while presenting all of the knowledge and skills to be a successful tobacco treatment specialist. ANTHC staff who have worked on the Community Health Aide Provider (CHA/P) program, Behavioral Health Aide Training program, Diabetes Educator program and the Healthy Healers program have committed to providing in-kind guidance to assure the online Tobacco Treatment Specialist training is successfully developed.

Initial training pilot

After the training has been modified into an online platform, a group of healthcare professionals from the Alaska Native Medical Center (ANMC) here in Anchorage will complete an initial pilot session of the online TTS Training in April 2016. ANMC is the tertiary medical center that provides healthcare for American Indian/ Alaska Native beneficiaries in the state of Alaska. The ANTHC Tobacco Prevention and Control Program works closely with many of the inpatient and outpatient clinics at the hospital to improve systems to address the use of tobacco. The Surgery, Cardiology and Pulmonology Clinics have committed to have staff members participate in the initial pilot session. Pilot participants will be given a preliminary assessment, or pre-test, that will identify their knowledge of the content to be covered during the training. Pilot participants will be given 30 days to complete the training. ANTHC staff will be available via email to answer questions regarding training content. Strength Based Strategies

will be available via email to address technical issues that may arise. Upon finishing the training, pilot participants will complete an intensive post-pilot evaluation that will include a second content area knowledge assessment in the form of a post-test. This post evaluation assessment will also include questions that help ANTHC and Strength Based Strategies make adjustments to content area, and make technical, performance and navigation improvements to the training, as needed. Pilot participants will not have to pay for the training in appreciation for their dedication to participate in and improve the training.

Regional training Pilot

ANTHC understands that it is important to work with tribal health partners in the Alaska Tribal Health System to increase the accessibility for healthcare providers to address the use of tobacco with their patients. Each of the 12 tribal regions in Alaska have committed to supporting at least one healthcare professional to participate in the online ANTHC TTS regional pilot training in October 2016. Regional pilot participants will complete a revised version of the initial pilot using the same training guidelines. Regional participants will also complete a similar evaluation process as Anchorage pilot participants. This evaluation will also help ANTHC and Strength Based Strategies make improvements to the training, as needed, prior to the official launch in April 2017.

Training launch

The official launch of the ANTHC Tobacco Treatment Specialist training will occur in April 2017. Registration for the training will be completely online and will open two months prior to the training start date. The April 2017 Tobacco Treatment Specialist training session will be advertised on statewide and national tobacco control networks, as described in the training outreach section of this proposal.

Training outreach

The online training program will be marketed to the 12 tribal regions of Alaska prior to the regional pilot, and then will be shared on the ATTUD website, where all tobacco treatment specialist trainings in the United States are listed, prior to the training launch in April 2017. In addition, other statewide and national tobacco control networks will be provided with course information to post on websites and distribute via email list serves. Proposed tobacco prevention and control networks include, but are not limited to the State of Alaska Tobacco Prevention and Control program, the American Lung Association of Alaska, ATTUD, the Health Education Council Break Free Alliance, the Smoking Cessation Leadership Center and the Public Health Law Center.

C.4. Evaluation design

The intent of this proposal is to develop a sustainable training program that increases the accessibility and ease for healthcare professionals to be trained in treating tobacco use and dependence. It is with full intention to create an evaluation that includes both grant period metrics and long-term program metrics.

Data collection and analysis

ANTHC will work with Strength Based Strategies to develop and ensure both quantitative and qualitative components are incorporated into the evaluation design. The current ANTHC in-person TTS Training evaluation will be modified from its original version into a version that is suitable for online attendees. This training evaluation will include a pre-assessment to determine training need and plans for using the materials learned. The post-assessment will include questions that will help ANTHC and Strength Based Strategies make technical, performance and navigation improvements to the training, as needed. It will also include questions regarding the technical platform, support received during the training and timeframe allowed to complete the training. This post assessment will also question whether participants were fully engaged in the training. Training improvements will be made after each pilot assessment is evaluated.

The evaluation will include a quantitative component using a pre-test and post-test assessment, which includes a scored case study in the post-test to determine mastery of the course material. Students must score 70% on the post-test to successfully pass the program and be eligible for TTS certification. Students that do not score above 70% are awarded a certificate of completion, but are not eligible for TTS certification.

Data source

All attendees who register for, participate in, and complete the TTS online training program will be tracked in an online TTS Training Database program that was created by ANTHC in September 2014. This database program has the ability to track attendee registration, participation status and module completion, pre and post-test scores, criteria necessary for TTS certification and CMEs completed. The TTS Training Database includes all attendees who have ever registered and/or participated in every in-person TTS training held since the original 2006 in-person TTS training took place.

Change expected during grant period

Healthcare professionals in the Alaska Tribal Health System who participate in the regional pilot of the online tobacco treatment specialist training in October 2016 will demonstrate that the course strengthened their skills and confidence to treat patients with nicotine addiction and tobacco use disorder. Healthcare professionals who have taken the online training will indicate that this course met their need for increased access to Tobacco Treatment Specialist training and have an understanding of how to utilize the knowledge and skills learned in the online TTS course in their health practice.

Change expected following grant period

The development of the online ANTHC Tobacco Treatment Specialist training during the course of the grant period will have a lasting impact on the Alaska Tribal Health System, the State of Alaska, the United States and the world. There have been 196 participants in the Alaska Tribal Health System who have completed the ANTHC in-person Tobacco Treatment Specialist Training since the training first launched in 2006, nine years ago. The goal of the ANTHC Tobacco Program is that at least 400 additional healthcare professionals will be trained within

ten years of the April 2017 training launch, doubling the number (196) of currently trained tobacco treatment specialists in the ATHS. This would be a 50% increase of healthcare providers trained as tobacco treatment specialists in the ATHS by 2027.

Government Performance and Reimbursement Act (GPRA) measures, which are reported by participating ATHS organizations monthly, will be reviewed quarterly to ensure tobacco use status and screening for tobacco use improves as more providers in the ATHS are trained. ANTHC anticipates that by 2027, or ten years after the after the April 2017 training launch, the Alaska Tribal Health System will screen 42.6% of tobacco users seen in the GPRA system and meet the GPRA goal due in part to the development of the online ANTHC Tobacco Treatment Specialist training.

C.5. Detailed Workplan and Deliverables Schedule (*Table of deliverables can be found in Appendix A*)

The grant is anticipated to be awarded in April 2015. Upon notification of award and through May 2015, the Alaska Native Tribal Health Consortium (ANTHC) will review, modify and enhance the content of the current ANTHC in-person Tobacco Treatment Specialist Training in preparation for distance delivery.

Beginning in May 2015 and through December 2016, ANTHC will also collaborate with Strength Based Strategies to design the online learning platform, continue to revise, modify and enhance content to be developed and packaged as an interactive, self-study program. In July 2016 video and audio talent will be hired and video and audio production will begin. From September through December 2016, a graphic/web designer will be hired and graphics and web design will be created for the online platform. During this same time frame, video and audio development will be placed and an editor will be hired to complete edits of the online learning content and design.

During the development stage from September through December 2015, ANTHC Division of Community Health Services and State of Alaska staff members will provide in-kind expert review of content. The content and platform are anticipated to be completed by December 2015.

Content will be finalized by ANTHC in January 2016 following expert review. In addition, ANTHC will work with Strength Based Strategies to merge the online training platform with the online course registration website that was previously created and used for the in-person ANTHC TTS Training.

The online platform will be merged with the online training content in February 2016. Meanwhile, ANTHC will recruit participants during February and March 2016 for the initial pilot of the online TTS Training program. These participants will be healthcare professionals from the Surgery, Cardiology and Pulmonology clinics at the Alaska Native Medical Center. The pilot participants will have 30 days to complete the training during the month of April 2016.

During May 2016, evaluation of the pilot training will take place through surveys and feedback from Anchorage pilot participants. A review of the training system, learning process, and overall training delivery will be noted during the 30-day pilot and revisions will be completed, as necessary, based on participant feedback.

Review and revision of the training registration website will take place during May and June 2016. During this same time period, marketing plans and promotional materials for the on-line TTS Training will be developed. This expense will be covered using funds not related to this grant.

The second revision of the online training will be completed by July 2016. Beginning in July 2016, the online training will be marketed to the 12 tribal regions in Alaska. From July through September 2016, at least one health professionals from each of the 12 tribal regions will be designated to participate in the regional pilot training in October 2016. Participants will register for the training beginning in August 2016 using the online training registration website.

The regional pilot will begin in October 2016 and be completed by recruited ATHS healthcare professionals. Participants will have 30 days to complete the training.

During November and December 2016, ANTHC will evaluate the course reach, analyze participant feedback and revise the training as needed.

The online TTS Training will be marketed and shared with state and national agencies partners from January through March 2017. During February and March 2017, registration for the online training will be open to statewide and national participants. The first training available to statewide and national participants will be launched in April 2017 and participants will have 30 days to complete the training.

A new online training course will take place the first 30 days of each fiscal quarter (July, October, January, April). ANTHC will continue to monitor, evaluate and revise the online training, as needed, as the course continues in the future.

Appendices

Appendix A: Table of Deliverables

Appendix B: Staff Biosketches

Appendix C: Letters of Commitment

Appendix D: Table of Deliverables

Appendix E: Staff Biosketches

Appendix F: Letters of Commitment

Appendix A – C.5. Table of Deliverables

Year	Timeline	Deliverable
2015	April	Grant awarded
	May	Create and modify content for online viewing capacity
	May – December	Collaborate with Strength Based Strategies to design online platform for training
	July	Hire video and audio talent; begin video and audio production
	September – December	Hire graphic/web design; begin creating web design
	September – December	Incorporate video and audio development into web design/online learning platform
	September – December	Hire editor; complete editing of online learning platform
	September – December	In-kind expert review of content
2016	January	Finalize content
	January	Merge online training platform with online registration website (already created and used by ANTHC TTS Training program)
	February	Finalize online platform and merge with content
	February – March	Recruit internal pilot participants for online training
	April	Internal pilot training session (30 days to complete training)
	May	Evaluate pilot training by surveying internal pilot participants, as well as reviewing system and process performance.
	May – June	Revise and finalize training registration website
	May – June	Create advertisement and marketing materials for training
	May – July	Second revision of online training completed
	July – September	Market online training to 12 targeted tribal regions
	August – September	Open registration for October online training
	October	Launch external pilot training to targeted ATHS organizations
	November – December	Evaluate course reach and analyze participant feedback; revise training as needed
2017	January – March	Market and share training on statewide and national level
	February – March	Registration for the April online training launch will be open to statewide and national participants
	April	Launch first training available to statewide and national participants
	April – beyond	Launch new course at beginning of each fiscal quarter; ANTHC will continue to monitor, evaluate and revise training, as needed