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Authors and Acknowledgments

NRPA — Colleen Pittard, Tiff Cunin and Allison Colman. NRPA is the leading not-for-profit organization dedicated to building strong, vibrant and resilient communities through the power of parks and recreation. With more than 60,000 members, NRPA advances this mission by investing in and championing the work of park and recreation professionals and advocates — the catalysts for positive change in service of equity, climate-readiness, and overall health and well-being.

For more information, visit <u>www.nrpa.org</u>. For digital access to NRPA's flagship publication, *Parks & Recreation*, visit parksandrecreation.org.

RTI International — Jenna Brophy, MPH, and Michael Hayes. RTI International is an independent, nonprofit research institute dedicated to improving the human condition. We combine scientific rigor and technical expertise in social and laboratory sciences, engineering and international development to deliver solutions to the critical needs of clients worldwide.

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MBM CONSULTING

Meaghan McMahon

CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) PROJECT OFFICER

Michele Mercier

REMOTE PILOT AGENCIES

Tualatin Parks and Recreation — Active Living Every Day

Liberty Parks and Recreation — Active Living Every Day

Patterson Parks and Recreation — Enhance®Fitness

City of Riverside Parks and Recreation — Enhance®Fitness

Southgate Recreation and Park District — Enhance®Fitness

City of Mustang — Fit & Strong!

Manchester Parks and Recreation — Fit & Strong!

City of Fort Payne — Walk With Ease

Shreveport Public Assembly & Recreation — Walk With Ease

PROGRAM DEVELOPERS

Arthritis Foundation — Walk With Ease

Human Kinetics — Active Living Every Day

University of Illinois at Chicago — Fit & Strong!

Sound Generations — Enhance®Fitness

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At the National Recreation and Park Association (NRPA), we believe parks and recreation are vital to community health and well-being. Access to these spaces, programs and services remains essential to community vitality and is a key factor in advancing health equity, improving individual and community-level health outcomes and enhancing quality of life. Park and recreation professionals and their agencies protect and promote health for all people, including older adults, in the communities where people live, learn, work and play.

As one of the leading community-based providers of older adult services, park and recreation agencies play a crucial role in supporting the health and wellness of older adults. Many older adults rely on these evidence-based programs to maintain and improve their quality of life. To meet this need, NRPA has been supporting the expansion and implementation of Arthritis Appropriate Evidence-Based Interventions (AAEBIs) through local park and recreation agencies since 2013. AAEBIs are effective interventions that help people with arthritis and adults with other chronic conditions improve their health, wellness and overall quality of life.

With a rapidly growing aging population and the continued impact of chronic disease, it is critical that these interventions are equitable, accessible and available in a variety of delivery formats that meet the needs of all people. With the onset of the coronavirus (COVID-19) pandemic in March 2020, there was an opportunity to test new methods of delivering AAEBIs to older adults to meet the evolving needs and wants of this population. This resource summarizes lessons learned and best practices from nine park and recreation agencies that took part in a remote delivery pilot of four different AAEBIs in 2021. While the interventions were specific to AAEBIs, the lessons learned can be applied to the design and implementation of other remote programs.

Background

- Nine in 10 local park and recreation agencies dedicate facilities, activities and programming to older adults.
- Forty-four percent of agencies target adults as young as 50 years old for their older adult offerings.
- A variety of programs and services are offered, including evidence-based physical activity programs, field trips, arts and crafts, special events, nutrition programs and services, and opportunities to mentor, work and volunteer, among many others.

According to the U.S. Centers for Disease Control and Prevention (CDC), there are approximately 58 million U.S. adults age 65 or older, representing more than 15 percent of the population. That number has increased significantly over the past few decades and is expected to continue to grow, reaching 71 million by 2030 and 98 million by 2060, when older adults will make up nearly 25 percent of the population.

The CDC reports that there are 58.5 million adults living with arthritis, with 25.7 million of them experiencing activity limitations as a result of their arthritis.¹ AAEBIs have demonstrated success at improving arthritis management and quality of life and will continue to be essential to help support a future where more than 25 percent of adults in the United States will be diagnosed with arthritis. These interventions are also crucial in advancing health equity. Adults with comorbidities, such as heart disease (49 percent), diabetes (47 percent) and/or obesity (31 percent), are diagnosed with arthritis at a significantly higher rate, and comorbidities disproportionately impact people of color.² In 2018, Black individuals were 30 percent more likely to die from heart disease than non-Hispanic white individuals. Native American individuals are two times as likely to receive a diabetes diagnosis than non-Hispanic white individuals.³ Obesity, an underlying cause for most comorbidities, is most prevalent among Black adults (49.6 percent), particularly Black women (56.9 percent), followed by Latino adults (44.8 percent) compared with 42.2 percent for white adults.⁴ Furthermore, activity limitations are significantly higher for Black and African American, Hispanic/Latino, multi-race, non-Hispanic and American Indian/Alaska Native populations. With a rapidly growing and diverse aging population, it is critical to expand the availability and accessibility of AAEBIs through innovative solutions rooted in health equity.

Experience Delivering AAEBIs

Since 2016, NRPA has worked to enhance the health, wellness and quality of life of adults with arthritis and to improve arthritis management and health outcomes by continuing to expand delivery of AAEBIs by providing training, technical assistance and capacity-building assistance to local park and recreation agencies. Through this partnership, NRPA has worked directly with 330 park and recreation agencies across 49 states and one U.S. territory to disseminate the Walk With Ease (WWE), Active Living Every Day (ALED), Fit & Strong! (F&S!) and Enhance®Fitness (EF) programs, reaching nearly 25,000 individuals and creating farreaching community-wide impacts.

In addition, NRPA has focused on building the sustainability of the delivery system by exploring environmental approaches, including permanent referral systems between healthcare organizations and community-based organizations using electronic health record systems, exploring financing options, and piloting new and innovative methods of delivering AAEBIs.



5 out of 10

ADULTS
experience
activity
limitations as a
result of their
arthritis





1 out of 4
ADULTS
will be diagnosed with arthritis by

2040



The Active Living Every Day (ALED) program is a 12-week behavior-change program developed by Human Kinetics that teaches sedentary people how to overcome barriers to become and stay physically active. ALED is unique in that it does not prescribe exercise but focuses on incorporating physical activity into everyday lifestyle.



Enhance®Fitness (EF) was developed in partnership with Sound Generations and University of Washington Health Promotion Research Center and Group Health. EF is a physical activity program designed to improve functional fitness and well-being. The program focuses on balance, strength, endurance and flexibility exercises and is adjustable to all levels of fitness.



The Fit & Strong! (F&S!) program is a physical activity and behavior-change program that teaches people with joint pain and stiffness how to engage in safe and effective exercise and provides motivational tools for physical activity maintenance.



The Walk With Ease (WWE) program, developed by the Arthritis Foundation, is a multi-component, low-impact, six-week walking program designed to help people with or without arthritis to incorporate physical activity into their everyday lifestyle.



While these interventions were designed for in-person settings, the COVID-19 pandemic, along with rapidly changing trends in healthcare (telehealth) and technology, served as a catalyst to test and evaluate the scalability of new delivery methods of AAEBIs through local parks and recreation. To adhere to local and state physical distancing measures and to protect the health and well-being of older adults who are at higher risk for severe illness from COVID-19, NRPA provided capacity-building assistance, training and technical assistance, and peer networking opportunities to nine local park and recreation agencies in 2021 to develop, implement and evaluate the remote delivery of four AAEBIs, gathering lessons learned and identifying best practices to further scale interventions.

The nine agencies were selected based on their interest, capacity and previous experience offering AAEBIs, as well as their willingness to participate in training, technical assistance, and peer networking offerings and evaluation activities. All but one agency had offered at least one AAEBI previously, and agencies selected the intervention of their choice. NRPA and program developers from the four AAEBIs provided guidance and recommendations on how to maintain efficacy of the intervention in a remote format, and the ultimate design, structure and delivery format were determined by each park and recreation agency. Agencies considered several factors when designing their remote delivery plan, including participants' wants and needs, staffing resources, technology resources, local partnerships, and other key factors.

Table 1. Results of a Pilot Remote Delivery Program

	Remote AAEBI offered	Offered AAEBI previously	Offered any AAEBI previously	Total number of participants who enrolled in any remote AAEBI
Fort Payne, AL	WWE			17
Patterson, CA	EF		✓	12
Riverside, CA	EF	✓	✓	15
Sacramento, CA	EF		✓	46
Shreveport, LA	WWE	✓	✓	69
Liberty, MO	ALED	✓	✓	20
Mustang, OK	F&S!	✓	✓	42
Tualatin, OR	ALED	✓	✓	20
Manchester, TN	F&S!	✓	✓	4

AAEBI = Arthritis Appropriate Evidence-Based Interventions; ALED = Active Living Every Day; EF = Enhanced Fitness; F&S! = Fit & Strong!; WWE = Walk With Ease

The nine agencies enrolled a total of 245 participants and offered 17 sessions. NRPA partnered with RTI to conduct key informant interviews (nine total) with each park and recreation agency that took part in the remote pilots. To best understand the experiences in terms of process, implementation and outcomes attributed to the pilots, interviews included both a park and recreation manager or "pilot lead" and a trained AAEBI instructor.

Impact of Remote Pilots and Lessons Learned

Following the interviews, RTI analyzed the data to determine the benefits of the remote delivery intervention for both participants enrolled in the AAEBIs and the local park and recreation agency. RTI also analyzed the process of developing and implementing the intervention to determine key lessons learned and best practices that can support other park and recreation and community-based organizations in their efforts to scale these interventions for the future. NRPA also conducted a survey of the remote pilot agencies to gather additional data about their experiences.

Participant-specific benefits included the following:

- Ease of access and convenience for participants to take the class from home or at work on their lunch break without having to worry about transportation or being home bound
- Access to participants who did not live close to or moved away from where the park and recreation department is located
- Privacy of exercising in one's own home and not exercising in front of others
- Ability to do the class at one's own pace
- Protection of staying at home during COVID-19 but still being able to exercise and interact with others
- Increased confidence in using technology
- Access to social connections virtually at times of limited human interaction due to COVID-19

"People don't have to leave their home to attend the class ... they don't have to drive anywhere. They don't have to sit in traffic to get anywhere. ... With COVID ... it was just easy to open up the iPad and sign on and there's your class."

Tualatin Parks and Recreation
 Department that offered ALED remotely

Offering the AAEBI remotely provided the following benefits to the park and recreation agency:

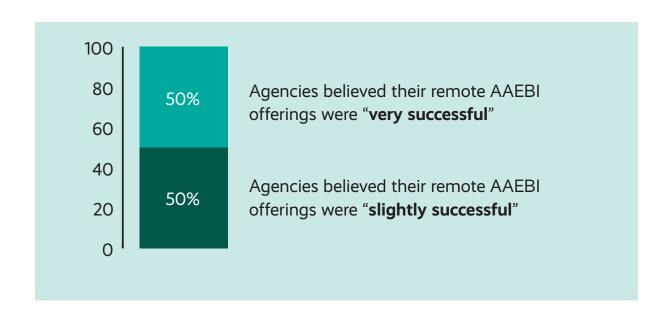
- The ability to hold the AAEBI anywhere, thus eliminating concerns about finding space and equipment a common concern and challenge in park and recreation facilities
- The ability to offer the class at any time to meet the scheduling desires of the participants
- The ability to hold the AAEBI during COVID-19; otherwise the AAEBI would have been canceled due to stay-at-home orders and physical distancing requirements
- The recognition of the park and recreation agency contributing to additional social needs and enrichment opportunities for older adults (e.g., increasing the digital literacy of the community)

"We've had a great amount of positive feedback about ... increasing the digital literacy of our community because of offering these programs remotely. We have never had as great of an attendance rate as we did for a virtual [program]. ... Everybody was pretty starved for interaction and things to do ... there was a bit of a desire to interact at that point ... with the pandemic. But one of our biggest findings was that we reached a group of people ... that were never active before or were never involved before because they were home bound. ... [T]his is a line of programming that we're going to want to continue post-pandemic." – Liberty Parks and Recreation Department that offered ALED remotely

The survey of agencies confirmed these findings and supported that there was strong interest in the remote delivery of AAEBIs from participants. Eighty-eight percent of agencies indicated that participants were "moderately or very interested" in the remote delivery, compared to 12 percent of agencies who said participants were only "slightly interested." Many agencies also reported that their AAEBI virtual offerings had very high completion rates.

Although there was strong interest in remote AAEBIs, many agencies still reported that participants expressed an eagerness and excitement about returning to in-person classes. One agency also noted that in-person classes help to support retention and ensure that participants complete the program. When asked if they plan to continue to deliver remote AAEBI programming, 50 percent indicated they are "very likely" and 38 percent responded that they are "somewhat likely."

"At the start of the remote programs, the patrons were somewhat reluctant, but as time progressed, they became more interested and able to catch on with assistance." – Shreveport Parks and Recreation that offered WWE remotely





Liberty Parks and Recreation Pilot Remote Delivery of ALED Program

Background

Liberty Parks and Recreation, located in Kansas City, Missouri, was selected to be part of NRPA's remote pilot project to implement the Active Living Every Day (ALED) program in a remote setting. They were selected based on their prior experience implementing the ALED program as an in-person offering in addition to their experience offering other evidence-based programs in remote settings. The programs that Liberty Parks and Recreation offered in a remote setting were the Walk With Ease program, the Aging Mastery Program, the Chronic Pain Self-Management program, the Chronic Disease Self-Management program and the Diabetes Self-Management Program.

Remote Delivery of the ALED Program

Liberty Parks and Recreation successfully implemented two remote sessions using the Zoom platform where the participants met once per week for 12 weeks in each of the two sessions. During the first session, participants used devices with video capability (e.g., computers, smartphones, tablets), and during the second session, participants used either a traditional telephone or a mobile phone to call directly into the ALED session.

Twenty participants enrolled in the remote ALED sessions, and 90 percent of those who enrolled completed a full 12-week session. Of those who completed Liberty Parks and Recreation's post-session survey, 100 percent indicated that they would use Zoom again to (1) participate in other programs offered remotely, (2) keep in touch with family and friends, and (3) attend a social event like a party or a wedding.

Remote Platform Guidance

Liberty Parks and Recreation chose the Zoom platform to pilot the ALED program due to specific features of the platform. Some of the features noted were the ability to use a "waiting room" for participants to join the workshop, breakout rooms for "pair and share" in small group activities, and the polling feature to allow the facilitator to query the participants and receive responses in a timely manner. Other features included the ability to mute/unmute participants' audio to manage ambient noise, to share the facilitator's screen for presentations, and to administer pre- and post-surveys electronically and distribute Certificates of Completion.

Special Considerations

Facilitators

Liberty Parks and Recreation recommends that trained facilitators are familiar with all roles of the remote delivery process in the event a facilitator is unavailable, the internet is not accessible or other unexpected interruptions occur. It is also suggested that all facilitators have a printed copy of the slide deck for backup, and they use a technical assistant to help participants troubleshoot technology and to advance the slides during group discussion. Liberty Parks and Recreation also suggests using the chat box often to engage participants and to reiterate safety recommendations.

Preworkshop Considerations

Liberty Parks and Recreation identified various details to consider prior to offering a remote ALED workshop:

- Determine a process to distribute participant workbooks and collect required personal information (emergency contact, informed consent/liability disclaimer and a completed preworkshop survey, if administering). Offering options such as providing an in-person drive-through to pick up program materials or mailing them to the participants helps address individual comfort levels.
- Develop a crisis plan and review it with all staff involved in the workshop. The plan should include guidance to safely exercise at home by ensuring the participant's space is clear of obstacles, the participants are wearing appropriate exercise attire, and they are using a sturdy chair for support with NO wheels. The participants should also have access to water and their mobile device in case of an emergency.
- Create and distribute a phone and email list of all the participants (optional for the participants). This allows the group to reach out to one another for support, for encouragement and to share ideas with each other between weekly classes.

Successful Strategies

Liberty Parks and Recreation shared some successful strategies to offer ALED remotely:

- Utilize breakout rooms and the chat function during programs. Breakout rooms were a great replacement for small group discussions, and the chat function kept people engaged and provided an avenue for answering questions in a seamless fashion.
- Build in time for practice and building the confidence of participants in using technology. Offering a class "zero session" is a great strategy for teaching the technology and getting to know participants.
- Engage participants who have experience using the technology to serve as peer leaders. They can assist others or act as technology support during programs.



Advertisement for virtual evidence-based programs. Photo by Liberty Parks and Recreation, courtesy of Liberty Parks and Recreation

Testimonials

Liberty Parks and Recreation administered pre- and post-surveys to the participants, and some of the responses they received are below.

Responses below are from participants who attended the first session using devices with video capability (e.g., computer, tablet, smartphone):

Q: What do you like the most about the workshop?

- I enjoyed the small group interaction by using the breakout groups
- Active participation from everyone; there was laughter, sharing of ideas, fellowship
- Finding new opportunities to become more active at home and in the Liberty community

Q: What do you like the <u>least</u> about the workshop? (most of the participants did not share any negative comments)

- I experienced some technical issues hearing people
- I found it challenging to think on the fly

An overwhelming response from the participants was that the pace was just right, and all participants rated the facilitators very highly (they noted the facilitators were always prepared, were well organized, and kept the group engaged and answered questions effectively).

Responses below are from those who participated in the second session and used either a traditional telephone or a mobile phone with no video capability:

Q: What do you like the <u>most</u> about a session?

- Being able to share stories and get great ideas from the group
- Receiving clear instructions and positive information. It made me excited about being part of this class
- The facilitator gave a lot of encouragement

Q: What do you like the <u>least</u> about a session?

- It was difficult knowing exactly when to start talking
- Being unfamiliar with phone conferencing in the beginning
- I found it difficult to know who is talking

Summary

Offering AAEBI programs in diverse formats, such as remote delivery via a platform like Zoom, is an effective strategy to expand the reach of programming to help manage and prevent chronic conditions like arthritis. While many program participants still prefer in-person classes, park and recreation professionals can expand access to AAEBI programs by offering a diverse range of program formats, including remote and hybrid models of delivery. Providing community members with more opportunities to participate in AAEBIs plays a significant role in addressing the public health challenges associated with chronic conditions like arthritis.



Delivering programs remotely consists of five main steps:



STAFF ENGAGEMENT

■ Identify the right staff

■ Train staff



PLANNING

- Conduct formative research
- Determine format of program delivery
- Purchase materials and incentives
- Transition materials to virtual
- Determine dates and times
- Develop program policies
- Develop a marketing plan
- Develop recruitment materials



RECRUITMENT AND PARTICIPANT COMMUNICATION

- Recruit and enroll participants
- Deliver materials to participants
- Conduct a "session zero" class



PROGRAM DELIVERY

- Conduct a program
- Have staff available for support
- Provide one-on-one support
- Seek ongoing feedback from participants



POST-PROGRAM REPORTING AND EVALUATION

- Record program completion numbers
- Solicit participant feedback/impact stories
- Consider incorporating feedback
- Share impact stories



Step 1: Staff Engagement

Identify the right staff. In preparing for remote delivery programs, park and recreation professionals should identify and engage staff to involve in implementation, namely facilitators, leadership, and staff who provide technical support and guidance. Staff directly involved in the day-to-day responsibilities of the remote programs are crucial to a successful implementation. When considering facilitators to teach the program, park and recreation professionals should think about selecting staff who have interest, availability or previous experience. Additionally, having leadership buy-in and support are crucial in obtaining the funding needed to execute programs.

Train staff. After park and recreation professionals identify facilitators, the facilitators must complete the AAEBI-specific training, if they have not already. The facilitators and anyone else involved in the day-to-day tasks of recruitment and delivery should also be trained on the technical equipment that will be used. But, first, consider how you will implement remote delivery of the program. This leads us to Step 2: Planning.

Real-World Example:

Park and recreation professionals reported that facilitators were

- People who had taught the course in person
- Facilitators of other programs offered by the department who were interested in learning new programs and offerings
- Past participants of the program

Facilitators often had a passion for recreation and saw the importance of promoting fitness and helping seniors lead healthier lives.



Step 2: Planning

Conduct formative research. Park and recreation professionals planning on delivering programs remotely should find out what method of remote delivery works best for their target audience. For example, do the older adults in your community have access to Wi-Fi? Do they have laptops or computers to log in with? Additionally, older adults' ease of using the internet and these devices must be considered. To find out what works best, go straight to the source — ask older adults in your community. You can engage older adults by visiting older adult organizations such as senior centers and senior housing and conducting informal polls, surveys and focus groups. You might even ask older adults who are already participants in programs. After obtaining their feedback, plan your approach.

Determine format of program delivery. Meet with your team, including leadership and stakeholders, to discuss the findings from the formative research. Consider the balance between what your team and department can offer and what works best for your population. Discuss the planned budget for the remote program; this may also be the time to look into grants or other funding mechanisms to support the next step — purchasing materials and incentives.

Real-World Example:

Park and recreation professionals delivered the programs based on what worked best for their community:

Delivery — technology used:

- Prerecorded videos uploaded to YouTube — iPads with preloaded data
- Remote technology platforms:
 Zoom, Facebook Live, and
 Microsoft Teams Laptops
- Dial-in conference line Landline phones



Purchase materials and incentives. Once the delivery format has been determined and funding has been secured, the next step is to purchase the materials needed to deliver the program. Materials can include the AAEBI books, weights, technology and incentives. For example, several park and recreation professionals purchased laptops or iPads for their community members who signed up for the programs; some rented these to participants, while others let them keep them as an incentive.

Transition materials to virtual. The program materials may not already be tailored to a remote setting. Materials may include paper copies that were typically handed out in person to participants, or games and activities that were held in person or perhaps participants no longer have access to weights or other items used at the department. In this situation, your team should transition the materials appropriate for this setting.

This is also a good time to test your delivery setup. Practice the method of delivery before the program begins; for example, have your facilitators log on to the platform in the location from which you plan to conduct the classes or conduct a practice recording

TIP

Form partnerships with other organizations in your city. Partners can help supply free or low-cost incentives, such as pedometers and other small tokens. Partners can also serve as recruitment locations (e.g., senior organizations, libraries).

and upload it using a platform like YouTube. Engage your IT department to help teach facilitators and other staff involved how to use the technology.

Real-World Example:

Park and recreation professionals reported transitioning materials for the remote setting.

- Create a PowerPoint to share on the screen using the information participants typically received on paper handouts.
- Use games and activities better suited for the remote setting, such as word searches shared on the screen or icebreakers to get participants comfortable talking and using the platform.
- Consider at-home items participants can use instead of weights, such as water bottles and canned goods.

Determine dates and times. Once the materials and incentives have been purchased and transitioned, determine the dates and times the program will be offered. Consider staff and participant availability. For example, does your older adult population often take vacations or spend more time with grandchildren during the summer? If so, perhaps avoid a summer session and start the program in the fall or spring. Or perhaps the weather is best for outdoor walking in the summer and participation would be higher during those times. Also consider timing; when will you have staff available to teach the course and, again, when is the best time for your population? Meet with your team and stakeholders to discuss what dates and times work best.



Develop program policies. Talk with your team about what policies should be in place. Consider the following:

- Are there any stipulations to participating? For example, can someone from a different county participate? What about a different state? Are there any health or medical conditions that may exclude participants?
- How many participants will be enrolled before capping the class?
- What will you do if a class date falls on a holiday?
- If there are technical issues and participants join late, will the class start late to accommodate participants?
- If collecting post-course information, how many classes can a participant miss to be counted as a program completer?

Answering these questions will also help you develop your marketing plan and recruitment and enrollment methods.

Develop a marketing plan. After the session dates and times have been confirmed and your policies are in place, your team should create a marketing plan to promote the remote program to the population of interest. Consider who would benefit from the program and how you are going to reach them. Past park and recreation professionals who have implemented remote programs used an average of five outreach methods to successfully recruit participants, though you should plan for at least three. Some examples of outreach methods include but are not limited to:

- Social media posting
- Posting on park and recreation department websites
- Newsletters
- Radio or TV advertising

- Flyers and brochures
- On-site marketing (TV ads, posters)
- Local newspaper or magazine ads
- Outreach to churches, nursing homes, senior centers and senior housing for referrals

Ultimately, the outreach method depends on how your community best receives information. For example, social media may not work with an older adult population, but reaching out to senior centers could be a great way to interact with potential participants. Additionally, your marketing plan should include information about how participants will enroll. For example, will they be asked to call or email a specific park and recreation staff member for enrollment or use online registration?

Develop recruitment materials.

Recruitment materials should be informative and give details about program dates and times, a description of the remote setting (Zoom, Microsoft Teams, hybrid setting), costs (if any), incentives, materials that will be provided, and if training on the materials and remote format will be offered. You should also specify in the recruitment materials how participants can sign up to join the program.





Fliers advertising park and recreation virtual programs: Flier on left: Photo by City of Mustang, courtesy of City of Mustang; Flier on right: Photo by City of Fort Payne, courtesy of City of Fort Payne



Step 3: Recruitment and Participant Communication

Recruit and enroll participants. After the marketing plan in Step 2 is completed, recruitment can begin. Depending on your resources and procedures, participants can contact the park and recreation agency to begin the enrollment process or register online, or you might also enroll participants at the time of marketing, if promoting the program in person or through word of mouth at events or specific locations. Park and recreation front desk staff should be informed of the program for any community members who call or walk in with questions and should be trained on how to enroll participants.

Best Practice: When enrolling participants, be sure to obtain contact information for them, as well as an emergency contact.

Deliver materials to participants. Consult with your team to determine the best method to get the materials to your participants. Think about participant resources, as well as your own department resources. For example, are participants homebound or limited by transportation? Your department may find it better to do home deliveries for participants. Or would it be easier on your staff to have participants come pick up the materials? Then your department may find it better to have a checkout day or week for participants to come and check out materials. As mentioned earlier, materials may include the technology (computers, iPads), participant materials (weights or AAEBI books) and incentives (goodie bags).

Conduct a "session zero" class. Interacting with new technology or accessing a virtual class may be difficult for program participants, especially older adults. Your team should be proactive and develop a session zero class and materials to walk participants through how to operate the remote-access materials (e.g., laptops, iPads, Zoom video conferencing) and class format. The session zero can be in person or remote or include technical staff from IT departments depending on community preferences and department resources. Participants may need technical assistance throughout the duration of the remote program. Staff should plan on spending extra time with participants through phone calls, home visits or walk-ins to help them with technical challenges. However, a well-planned session zero with comprehensive materials on remote access can mitigate possible technical challenges and give participants new technical skills they can use outside of the program.

Best Practice: Older adults are at greater risk of contracting illnesses, including COVID-19 and other infectious diseases. When interacting in person, participants should follow all health and safety recommendations to reduce the risk of illness. That may include:

- Wear a mask
- Watch your distance
- Wash your hands often



Step 4: Program Delivery

Conduct the program. Once your department has determined the method of remote delivery, trained staff, recruited participants and conducted a session zero, you are ready to implement the remote program. Facilitators should log on to the remote platform at least 10 minutes early to be available to participants. They should also be prepared to start a couple of minutes late to allow participants to log on and provide any technical assistance needed.



Be flexible, adaptable and openminded. Remote technology can be difficult for even seasoned users; be prepared to adjust your plan to fit your community.

Have staff available for support. As with any class, facilitators and program staff should make themselves available to oversee participants during the program period. If conducting live programs (not prerecorded on YouTube), staff should consist of two members: one to facilitate the class and the other to oversee participants in case there are any mishaps, such as falls, strains or injuries. Additionally, this second person can address any technical issues and help participants while the facilitator is still teaching class. Staff may need to spend 5-10 minutes at the beginning of the class ensuring everyone is able to access the remote platform properly. Technical skills may vary, and classes may not run into these issues; nevertheless, staff should familiarize themselves with both the program and the remote platform to ensure a well-executed class. Finally, staff should check on participants to ensure that they are achieving their fitness and wellness goals for the program.

Provide one-on-one support. Some participants may need further support in one-on-one settings, and staff should be prepared to assist. When in a remote setting, participants may find it difficult to ask oneon-one questions as they might typically do after an in-person class. Staff should do their best to make it known they are open to participants' needs in one-on-one settings for both technical issues and wellness goals. A one-on-one meeting may be the best way to resolve technical issues and teach participants how to use the remote platform. However, this responsibility is not limited to the facilitator; the front desk staff or IT department may need to do a few one-on-one technical classes with participants as needed.

TIP

Older adults are often targeted and fall victim to financial fraud or internet scams because they tend to be trusting and polite. Remind your older adults to be wary of potential scams on the internet. Scammers may pose as romantic partners, relatives asking for money or officials to gain access to personal information.

For more information on what to look for and how to protect yourself and older adults, visit: https://www.fbi.gov/scams-and-safety/common-scams-and-crimes/elder-fraud.

Seek ongoing feedback from participants. The section below discusses the idea of implementing a post-program survey to receive feedback; however, facilitators do not need to wait until the end of the program to learn what is and is not working. Receiving ongoing feedback allows facilitators to modify the program and workouts to individual or group needs. If possible, have the facilitator make themselves available for any discussion after the class or pursue other feedback mechanisms, such as via email or the front desk staff.

TIP

Remember to check in with your "on-the-ground" facilitators. They will also know what is working and not working and may have suggestions for improvement.



Step 5: Post-program Reporting and Evaluation

Record program completion numbers. After the program is completed, record the number of participants who completed the whole program. Refer back to your policies to determine how many classes a participant had to complete to be counted. You can use this information to gauge interest and identify patterns for future offerings. For example, maybe the Friday 12 p.m. session was less popular than the Saturday 9 a.m. session, or perhaps spring sessions tend to have more participants than summer.

Solicit participant feedback/impact stories.

After the program is complete, offer a time for participants to provide feedback about the program. This feedback can be formal such as an evaluation form or survey or informal such as a quick check-in with participants via phone or after the last class.

Consider incorporating feedback. After participants have shared feedback, review the feedback and compile suggested changes, if there are any. Review the suggestions as a team to determine what is reasonable and feasible to change.

Share impact stories. Another large benefit of receiving feedback is hearing positive feedback and knowing you have affected someone's life. If

TIP

Allow participants the opportunity to speak candidly and without being judged. Make the feedback private; for example, do not ask for feedback when all participants are present, because participants might not feel comfortable sharing negative feedback in this environment. Also consider having a staff member besides the facilitator seek the feedback, in case participants have suggestions to share about the facilitator.

participants agree, park and recreation professionals can share participants' impact stories. Sharing stories can serve as a good marketing opportunity for the next remote session.

Real-World Example:

Park and recreation professionals shared participants' impact stories after a remote delivery pilot:

"The benefits of people able to accomplish ... something that they never thought they could, such as Zooming and navigating through different programs. ... One lady told me that she was able to do a [virtual] doctor's visit. She was able to facilitate some of her appointments through Zoom and she thought that was awesome. So some people are excited because they're able to do things that they weren't able to do before." – Shreveport Parks and Recreation that offered WWE remotely

"I really enjoyed the class. My husband says that he notices the changes in me. I feel physically stronger. I look forward to taking the class again in August. I didn't think I would like taking a Zoom class, but it really worked for me. I don't like taking exercise classes in a gym, so this was perfect." – Participant who attended Enhance®Fitness remotely



Funding is a crucial element to implement and sustain any program. Funding provided by NRPA for this pilot supported the purchase of resources and equipment (e.g., laptops and tablets, licenses for Zoom and toll-free phone lines, weights), overhead expenses (e.g., staff time, training, advertising), and incentives (e.g., gift cards, water bottles, hand sanitizer). Departments in low-income areas often noted the importance of having programs be low cost so they could recruit participants and leverage the NRPA funding to reduce the cost of the course and provide free materials for participants.





The pilot interventions proved to be effective at continuing to expand the implementation of AAEBIs offered through local park and recreation departments. Data obtained from a survey of the remote pilots found that 50 percent of pilot agencies plan to continue to offer the remote delivery of AAEBIs. That tracks with data collected across the field in the 2021 Advancing Community Health and Well-Being survey, finding 53 percent of agencies indicate they plan to provide virtual and remote health and wellness programming for older adults.

Many agencies also reported that participants indicated they still prefer in-person classes for socialization, companionship, the opportunity to get out of the home, and the opportunity to be connected to other park and recreation agency offerings. NRPA expects that we will continue to see a mix of remote delivery, hybrid models and in-person offerings in the future, which will provide community members with more opportunities to select the classes that meet their individual interests and needs.

In that same health and well-being survey report, park and recreation professionals indicated that the top three public health issues they believe will play a role in addressing over the next three years include physical inactivity, chronic disease and social isolation and loneliness. AAEBIs are crucial to building solutions to each of those public health challenges and will remain a core offering of local park and recreation agencies moving forward.

"Our leadership has an invested interest from day one because of the outcome and success rate and positive feedback from the participants all the way up to the Mayor." – Shreveport Parks and Recreation that offered WWE remotely



LIST OF ACRONYMS

AAEBI Arthritis Appropriate Evidence-Based Interventions

ALED Active Living Every Day

CDC Centers for Disease Control and Prevention

COVID-19 Coronavirus Disease 2019

EF Enhance®Fitness

F&S! Fit & Strong!

HHS Health and Human Services

IT Information Technology

NRPA National Recreation and Park Association

WWE Walk With Ease



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