



## ***Chapter V: IMPLEMENTATION— Delivering the Lifestyle Intervention***

### **WHAT IS IMPLEMENTATION?**

In the RE-AIM framework, the dimension of IMPLEMENTATION focuses on the consistent delivery of the lifestyle intervention according to its CDC-approved protocol. Ideally, IMPLEMENTATION guidelines make the intervention more feasible to deliver by providing recommendations on how to train staff, build community partnerships, and retain women in the intervention and program.

### **WHAT TYPES OF PRACTICES ARE INCLUDED IN IMPLEMENTATION?**

Instituting strategies that support successful delivery of the lifestyle intervention is one of the keys to program success. Projects and local sites contribute to the intervention's feasibility by resolving barriers that impede delivery. To ensure that the intervention is delivered as intended, the local site is often responsible for selecting staff with appropriate backgrounds to provide services. Projects play a key role in providing initial and ongoing training to local staff. Both projects and local sites can coordinate opportunities to expand staff knowledge through supplementary training. Partnerships with state and community organizations can assist local sites by augmenting their available resources as well as providing active referral sources. Developing systems for tracking women assists sites in retaining women in the program.

### **IN THIS CHAPTER**

- Snapshots of implementation strategies from selected projects 82
- Details of implementation strategies from selected projects 83
- Action checklist with strategies for delivering lifestyle interventions 93

## SNAPSHOTS OF IMPLEMENTATION PRACTICES FROM SELECTED PROJECTS

	Project-Level Practice	Local-Level Practice	Page Described	Tool Included on Page
<b>INTERVENTION FEASIBILITY</b>				
1. Assess local site barriers to delivering the lifestyle intervention and make mid-course corrections	✓		83	
2. Engage in a process of adapting the lifestyle intervention that involves both project and local site staff	✓		83	
3. Identify the purpose of assessments used in the lifestyle intervention and ensure that assessments are feasible for women and local sites to complete	✓		85	A.22
<b>LIFESTYLE INTERVENTION TRAINING</b>				
4. Hire staff with specialized training that is appropriate for their roles in WISEWOMAN		✓	86	
5. Train and retrain staff to deliver the lifestyle intervention	✓	✓	87	
6. Reinforce project-provided training on WISEWOMAN and the lifestyle intervention on a regular basis		✓	87	
<b>PARTNERING</b>				
7. Partner with organizations that employ staff with the necessary skills and expertise to deliver the lifestyle intervention	✓		89	
8. Partner with community organizations and health care providers		✓	90	
8A. Develop a proactive referral system to facilitate delivery of care		✓	90	
<b>RETAINING WOMEN</b>				
9. Develop a tracking system to identify women in need of re-screening		✓	92	


## DETAILS OF IMPLEMENTATION STRATEGIES FROM SELECTED PROJECTS

### INTERVENTION FEASIBILITY

<b>Practice(s)</b>	<ol style="list-style-type: none"> <li>1. Assess local site barriers to delivering the lifestyle intervention and make mid-course corrections (Project)</li> <li>2. Engage in a process of adapting the lifestyle intervention that involves both project and local site staff (Project)</li> </ol>
<b>Description</b>	<p>Local sites might experience barriers that impede their ability to deliver the intervention as designed. For example, projects might provide materials to local sites that are cumbersome to use or do not reflect the culture or literacy level of women, or the intervention might require that services be delivered through a mode of contact that is challenging for women, such as in-person contacts. Through active communication between projects and local sites, projects can assess where barriers exist and make modifications to the intervention to target these barriers. In addition, projects can engage staff from local sites in the adaptation process to ensure that changes will be feasible in their communities.</p>
<b>Examples from the Field</b>	<p>The Michigan WISEWOMAN project solicited regular feedback from local sites by telephone, e-mail, and in-person contact on the delivery of the lifestyle intervention to identify and address barriers to delivery. Through this communication, the project identified a concern that women expressed related to one of the forms used during the intervention. Originally, women initiating the lifestyle intervention developed lifestyle goals to pursue throughout the year, and these were documented on a “Lifestyle Contract” form. The word “contract” dissuaded some women from committing to developing goals, discouraging program participation. To address the aversion to this word, the project renamed the form “Healthy Lifestyle Goals.”</p> <p>Another example is from the Women’s Health Network in Massachusetts, which used PACE (see Appendix B for a description of PACE) as its lifestyle intervention. Originally, materials for PACE were available in Spanish as well as English. After sites began to use the materials, the project identified concerns with the cultural appropriateness and literacy level of the materials. To address these concerns, the project engaged in a long-term effort to adapt PACE to address both the cultural and literacy needs of the women served. First, Massachusetts developed a low-literacy version of PACE in English, which then served as the foundation for Spanish, Portuguese, and Chinese cultural and linguistic adaptations. As part of the adaptation process, the project convened focus groups with community members to understand physical activity and food preferences. After the adaptations were developed, the materials were pilot tested by Women’s Health Network participants and assessed for usability by staff.</p>
<b>Things to Consider</b>	<p>Staff Level of Effort: Staff might spend time overcoming local barriers and brainstorming about feasible changes to the intervention’s characteristics, (such as altering the mode of delivery) while maintaining the intervention’s core elements. Staff might also spend time drafting and sharing revised procedures or translating materials.</p>

Other Considerations:	Projects might communicate by telephone and travel to local sites and might provide revised forms or notices of procedure changes as necessary. Depending on the revision process, approval by an institutional review board might be necessary if the process includes focus groups or other activities with women.
Staff Skill Level and Training:	Staff should possess good communication and listening skills and have a working knowledge of the lifestyle intervention, including its core elements, characteristics, and intended delivery. Understanding the CDC evaluation framework is useful as well.
Cultural Adaptability:	Ways to address barriers to the lifestyle intervention delivery might include changes that result in a more culturally appropriate approach for the priority population.
<b>Related Practices</b>	Chapter IV, Adoption, Practice #2B
<b>Contact Information</b>	Michigan WISEWOMAN Project Phone: 517-335-1178  Women's Health Network, Massachusetts WISEWOMAN Project Phone: 617-624-5434

## INTERVENTION FEASIBILITY

<b>Practice(s)</b>	3. Identify the purpose of assessments used in the lifestyle intervention and ensure that assessments are feasible for women and local sites to complete (Project)								
<b>Description</b>	Projects use assessments for program evaluation and to provide feedback to participants. Assessments are often conducted to gather information related to women’s clinical screening results or health behaviors. If used consistently over time, they can provide a long-term perspective on the changes women make. Although assessments serve an important role in providing feedback about participants to the project, local site, or women, it is critical not to overburden participants or staff at local sites with cumbersome and complicated assessment forms. By soliciting input from local sites on the selection of assessment forms, projects can ensure feasibility while continuing to gather needed information for program evaluation and participant feedback. In addition, when revising assessment forms, projects can ensure maintenance of the intervention’s core elements.								
<b>Examples from the Field</b>	<p>The Michigan WISEWOMAN project developed a Healthy Lifestyle Assessment form to provide feedback to sites regarding women’s behaviors. The form has a clearly articulated purpose, is brief, and targeted. It includes eight short and simple questions about current eating and physical activity patterns as well as five statements to help identify a woman’s readiness to change her behavior. The assessment form was designed to be completed at the initial intervention contact, and staff used the form as a reference point for individualizing their discussions about a woman’s nutrition, physical activity, and tobacco cessation goals. The assessment offered interventionists a tool to help women understand their behaviors and how those behaviors are connected to cardiovascular disease risk factors.</p> <p> The Healthy Lifestyle Assessment is included as a tool in the appendix on page A.22.</p>								
<b>Things to Consider</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Staff Level of Effort:</td> <td>The process of checking that assessments have a stated purpose, communicating with sites regarding their feasibility, and making subsequent revisions will involve staff time.</td> </tr> <tr> <td>Other Considerations:</td> <td>The project might need to print and distribute new assessment materials.</td> </tr> <tr> <td>Staff Skill Level and Training:</td> <td>Staff should possess communication skills and understand the purpose of the assessment in the context of the intervention. In addition, if assessments will be used for evaluation, staff should be familiar with program evaluation techniques.</td> </tr> <tr> <td>Cultural Adaptability:</td> <td>Assessments can be made culturally appropriate by including relevant examples of foods eaten and types of preferred activities.</td> </tr> </table>	Staff Level of Effort:	The process of checking that assessments have a stated purpose, communicating with sites regarding their feasibility, and making subsequent revisions will involve staff time.	Other Considerations:	The project might need to print and distribute new assessment materials.	Staff Skill Level and Training:	Staff should possess communication skills and understand the purpose of the assessment in the context of the intervention. In addition, if assessments will be used for evaluation, staff should be familiar with program evaluation techniques.	Cultural Adaptability:	Assessments can be made culturally appropriate by including relevant examples of foods eaten and types of preferred activities.
Staff Level of Effort:	The process of checking that assessments have a stated purpose, communicating with sites regarding their feasibility, and making subsequent revisions will involve staff time.								
Other Considerations:	The project might need to print and distribute new assessment materials.								
Staff Skill Level and Training:	Staff should possess communication skills and understand the purpose of the assessment in the context of the intervention. In addition, if assessments will be used for evaluation, staff should be familiar with program evaluation techniques.								
Cultural Adaptability:	Assessments can be made culturally appropriate by including relevant examples of foods eaten and types of preferred activities.								
<b>Contact Information</b>	Michigan WISEWOMAN Project Phone: 517-335-1178								

## LIFESTYLE INTERVENTION TRAINING

<b>Practice(s)</b>	4. Hire staff with specialized training that is appropriate for their roles in WISEWOMAN (Local)	
<b>Description</b>	<p>Consistent with the variations in the lifestyle interventions used by WISEWOMAN programs in different locales, the training and background of staff who deliver the interventions vary greatly. It is important that local sites hire staff with training and backgrounds that are appropriate for the lifestyle intervention they have selected and for the settings in which the intervention will be delivered. For example, lifestyle interventionists who counsel women in a clinical setting might benefit from training on cardiovascular disease case management, physical activity, nutrition, and tobacco cessation treatment. Other counselors might benefit from specialized training in health education and promotion, nursing, adult learning theory, or motivational interviewing techniques. For staff who have teaching roles, a background in education is useful.</p> <p>The CDC's guidance document, <i>The Heart of the Matter</i>,<sup>8</sup> provides descriptions of the types of activities in which health educators engage when delivering lifestyle interventions. Local sites might refer to this list when considering appropriate staff.</p>	
<b>Examples from the Field</b>	<p>The WISEWOMAN coordinator in Fayetteville, North Carolina, provided screening services, conducted outreach, delivered the lifestyle intervention, and coordinated patient flow and service delivery. Her background as a registered nurse enabled her to fulfill many of these duties. She remained up to date on information relevant to the intervention by attending additional training programs, such as annual project meetings and external training sessions that address cardiovascular disease, tobacco cessation treatment, case management, counseling techniques, and goal setting.</p>	
<b>Things to Consider</b>	Staff Level of Effort:	The site might spend additional time selecting a staff member with the appropriate specialized skills for his or her role. Site staff can develop job descriptions to help identify appropriately trained people.
	Other Considerations:	Selecting staff with appropriate skills and facilitating their training might require hiring higher salaried professionals or paying training registration fees.
	Staff Skill Level and Training:	Supervisory staff at the local site will benefit from a clear understanding of the specific skills and training needed for each staff role.
	Cultural Adaptability:	During the hiring process, staff might seek a candidate with specific skills, such as people who speak the language or understand the cultural practices of the priority population(s).
<b>Related Practices</b>	<p>Chapter II, Reach, Practice #12 Chapter IV, Adoption, Practice #6</p>	
<b>Contact Information</b>	<p>North Carolina WISEWOMAN Project Phone: 919-707-5301</p>	

<sup>8</sup> The guidance document is available at <http://www.cdc.gov/wisewoman/>.

## LIFESTYLE INTERVENTION TRAINING

<b>Practice(s)</b>	<p>5. Train and retrain staff to deliver the lifestyle intervention (Project, Local)</p> <p>6. Reinforce project-provided training on WISEWOMAN and the lifestyle intervention on a regular basis (Local)</p>								
<b>Description</b>	<p>Training is an ongoing process from which staff benefit over time. High-performing sites recognized that, initially, staff required basic training on how to deliver the intervention as designed. Over time, training can focus on reviewing basic service delivery and teaching new skills that are relevant to the intervention. Training might be offered by the program or an external organization. Outside training might focus on innovative counseling strategies or deepen staff content knowledge of nutrition, physical activity, or tobacco cessation.</p> <p>Both projects and local sites have a role in training staff to deliver the intervention. At the beginning, projects must provide some foundational training to local staff. After a while, local sites might be able to conduct their own training that reinforces and expands upon project-provided training. Training sessions might be delivered in multiple ways and vary over time. For example, initial training might entail a site visit by project staff to the local site, while ongoing training might be accomplished at group meetings or by teleconference.</p>								
<b>Examples from the Field</b>	<p>In the Nebraska Every Woman Matters program, the cooperative extension services coordinator trained extension educators to deliver a specific curriculum to WISEWOMAN participants. These training sessions have occurred through in-person group meetings and remote meetings using distance learning techniques (e.g., teleconference, videoconference). After providing initial training on the curriculum, educators shared strategies to deliver the material, which helped staff review the basic content as well as extend their knowledge.</p> <p>The SEARHC WISEWOMAN project actively encouraged local staff to attend training programs that will enhance their job performance, and the local staff enthusiastically take part in these training opportunities. For example, most local staff have attended the public health nutrition course offered by the University of North Carolina at Chapel Hill as well as training sessions on physical activity and tobacco cessation counseling.</p>								
<b>Things to Consider</b>	<table border="0" style="width: 100%;"> <tr> <td style="width: 30%;">Staff Level of Effort:</td> <td>Staff might spend time attending or preparing for retraining meetings (organization, content preparation, and travel).</td> </tr> <tr> <td>Other Considerations:</td> <td>Projects might need to consider registration for training, renting facilities, travel, or supplying materials.</td> </tr> <tr> <td>Staff Skill Level and Training:</td> <td>Staff should have strong communication and organizational skills. In addition, staff who conduct training must possess deep content knowledge of training topics and strong presentation skills.</td> </tr> <tr> <td>Cultural Adaptability:</td> <td>Training might target specific cultural needs of a local community, which can change over time.</td> </tr> </table>	Staff Level of Effort:	Staff might spend time attending or preparing for retraining meetings (organization, content preparation, and travel).	Other Considerations:	Projects might need to consider registration for training, renting facilities, travel, or supplying materials.	Staff Skill Level and Training:	Staff should have strong communication and organizational skills. In addition, staff who conduct training must possess deep content knowledge of training topics and strong presentation skills.	Cultural Adaptability:	Training might target specific cultural needs of a local community, which can change over time.
Staff Level of Effort:	Staff might spend time attending or preparing for retraining meetings (organization, content preparation, and travel).								
Other Considerations:	Projects might need to consider registration for training, renting facilities, travel, or supplying materials.								
Staff Skill Level and Training:	Staff should have strong communication and organizational skills. In addition, staff who conduct training must possess deep content knowledge of training topics and strong presentation skills.								
Cultural Adaptability:	Training might target specific cultural needs of a local community, which can change over time.								
<b>Related Practices</b>	<p>Chapter III, Effectiveness, Practice #5A</p> <p>Chapter IV, Adoption, Practice #9</p>								

---

<b>Contact Information</b>	Every Woman Matters, Nebraska WISEWOMAN Project Phone: 1-800-532-2227	SEARHC WISEWOMAN Project Phone: 907-966-8710 (ask for WISEWOMAN Project Director)
--------------------------------	---	---

---

## PARTNERING

<b>Practice(s)</b>	7. Partner with organizations that employ staff with the necessary skills and expertise to deliver the lifestyle intervention (Project)								
<b>Description</b>	In some areas, identifying appropriately trained staff to deliver the lifestyle intervention is a challenge. By developing partnerships with organizations that have staff with the needed skills, projects can proactively cultivate this existing resource and use the partner's staff to deliver lifestyle intervention services. This approach might offer a cost-effective solution to projects by providing them with appropriately trained staff in a capacity determined by the project and partner organization, without assuming the cost of hiring these staff for full- or part-time work.								
<b>Examples from the Field</b>	The Nebraska Every Woman Matters program offered women the opportunity to participate in a class-format lifestyle intervention. To ensure that trained staff were available to deliver the classes, the Nebraska program partnered with the state cooperative extension services at the University of Nebraska. The cooperative extension services had educators located throughout the state at county extension offices. For Every Woman Matters, educators offered ABC classes in 70 of 93 counties in Nebraska (see Appendix B for a description of ABC classes). The Every Woman Matters program used these local educators to deliver the WISEWOMAN intervention classes. The educators had master's level training in such areas as education, home economics, and dietetics, which made them well suited to deliver the intervention.								
<b>Things to Consider</b>	<table border="0" style="width: 100%;"> <tr> <td style="vertical-align: top; width: 25%;">Staff Level of Effort:</td> <td>Investigating opportunities within the community and negotiating the terms of the partnerships will take time. Projects might identify a staff person to serve as a liaison with the partner organization. This staff person will devote a significant amount of time working with the partner organization.</td> </tr> <tr> <td style="vertical-align: top;">Other Considerations:</td> <td>In establishing a partnership, the project might host meetings or travel to visit prospective partners.</td> </tr> <tr> <td style="vertical-align: top;">Staff Skill Level and Training:</td> <td>Staff should be aware of the needed content knowledge and duties of workers in the partner organization.</td> </tr> <tr> <td style="vertical-align: top;">Cultural Adaptability:</td> <td>The site might seek partners whose staff have the skills and experience required to meet the needs of the cultural groups served by WISEWOMAN.</td> </tr> </table>	Staff Level of Effort:	Investigating opportunities within the community and negotiating the terms of the partnerships will take time. Projects might identify a staff person to serve as a liaison with the partner organization. This staff person will devote a significant amount of time working with the partner organization.	Other Considerations:	In establishing a partnership, the project might host meetings or travel to visit prospective partners.	Staff Skill Level and Training:	Staff should be aware of the needed content knowledge and duties of workers in the partner organization.	Cultural Adaptability:	The site might seek partners whose staff have the skills and experience required to meet the needs of the cultural groups served by WISEWOMAN.
Staff Level of Effort:	Investigating opportunities within the community and negotiating the terms of the partnerships will take time. Projects might identify a staff person to serve as a liaison with the partner organization. This staff person will devote a significant amount of time working with the partner organization.								
Other Considerations:	In establishing a partnership, the project might host meetings or travel to visit prospective partners.								
Staff Skill Level and Training:	Staff should be aware of the needed content knowledge and duties of workers in the partner organization.								
Cultural Adaptability:	The site might seek partners whose staff have the skills and experience required to meet the needs of the cultural groups served by WISEWOMAN.								
<b>Related Practices</b>	<p>Chapter II, Reach, Practice #7</p> <p>Chapter II, Reach, Practice #8</p> <p>Chapter II, Reach, Practice #9</p> <p>Chapter V, Implementation, Practice #8</p> <p>Chapter VI, Maintenance, Practice #16A/B</p>								
<b>Contact Information</b>	Every Woman Matters, Nebraska WISEWOMAN Project Phone: 1-800-532-2227								

## PARTNERING

<b>Practice(s)</b>	8. Partner with community organizations and health care providers (Local) 8A. Develop a proactive referral system to facilitate delivery of care (Local)	
<b>Description</b>	<p>Partnering with community organizations (e.g., fitness centers, support groups) and health care providers (e.g., free or reduced-fee clinics) enables sites to provide supplemental services that help women make behavior changes and receive the follow-up medical care they need. High-performing sites engaged in multiple, varied, and meaningful partnerships to offer women a range of opportunities. These strategies can increase the extent to which women utilize these services.</p> <p>Sites that proactively assist women in using resources and services offered by partners, as opposed to using more passive strategies like making women aware of local resources, are more likely to succeed in encouraging women to take advantage of services offered by partners. Proactive strategies might include facilitating the use of resources that address a targeted concern, such as access to needed medical prescriptions, and assisting the woman in contacting the resource. High-performing sites focused on simplifying the referral process to ensure that women receive needed services.</p>	
<b>Examples from the Field</b>	<p>In Plymouth, Massachusetts, the WISEWOMAN program had multiple partnerships with providers and community organizations. Women were informed about opportunities to attend partnership activities during telephone contacts with program staff. Within the site hospital, the program partnered with a hospital-run diabetes education program. Within the community, the site contracted with an independent tobacco cessation treatment specialist who conducted individualized and group smoking cessation counseling sessions. Also, the site arranged access for women to free sessions for 3 weeks at a local health club with a personal trainer who designs at-home fitness programs. Recognizing the potential financial barrier to continuing the gym membership, the site alerted the health club that women were unlikely to continue their membership beyond 3 weeks. The at-home fitness program encouraged women to continue the behavior change initiated during the trial gym membership.</p> <p>In Fayetteville, North Carolina, staff actively referred women to community resources, including the local prescription assistance program. To encourage women to take advantage of this resource, staff inquired about needed medications during the intervention session and assisted women in completing paperwork. Staff also delivered the paperwork to the prescription assistance program and ensured that the women received the medications.</p>	
<b>Things to Consider</b>	Staff Level of Effort:	Investigating referral services available in the community, educating providers and organizations about WISEWOMAN, and establishing the partnerships and referral services will take time.
	Other Considerations:	Additional considerations are not anticipated.
	Staff Skill Level and Training:	Staff should have a working knowledge of the program objectives and procedures to adequately inform potential partners about the program. Staff working with providers and community organizations should have good communication skills.

	Cultural Adaptability:	Services offered by partners can be specifically targeted to cultural groups served by WISEWOMAN programs.
<b>Related Practices</b>		Chapter II, Reach, Practice #7 Chapter II, Reach, Practice #8 Chapter II, Reach, Practice #9 Chapter V, Implementation, Practice #7 Chapter VI, Maintenance, Practice #16A/B
<b>Contact Information</b>		Women's Health Network, Massachusetts WISEWOMAN Project Phone: 617-624-5434  North Carolina WISEWOMAN Project Phone: 919-707-5301

## RETAINING WOMEN

<b>Practice(s)</b>	9. Develop a tracking system to identify women in need of re-screening (Local)	
<b>Description</b>	Local sites monitor when women need to complete their re-screening visits in a variety of ways. High-performing sites developed tracking and reminder systems to remind staff to contact women directly about the need for an appointment. These systems included a method to alert staff about women eligible for re-screening in the upcoming month, a computer database to notify staff about women needing a reminder call that month, and a database system that generated reminder letters for women. In addition, high-performing sites developed tracking systems to alert providers about women requiring re-screening, which enabled the provider to conduct this re-screening during the women's next visit to the clinic.	
<b>Examples from the Field</b>	Local sites in the SEARHC project used different types of systems to identify women in need of re-screening. In Haines, Alaska, the WISEWOMAN program used a computer database system that generated letters addressed to women 1 month before their re-screening appointment was due. In Juneau, Alaska, the WISEWOMAN program placed a form in the woman's medical chart to notify clinic providers that the woman was due for a WISEWOMAN re-screening. Clinic providers were trained to complete this screening with the woman when she came for her clinic appointment, thus reducing the number of visits she had to make to the clinic for services.	
<b>Things to Consider</b>	Staff Level of Effort:	The time spent on developing and maintaining the tracking system will vary according to its sophistication. The time needed to make telephone calls, send letters, or contact providers with alert forms will depend on the site's caseload.
	Other Considerations:	Additional considerations are not anticipated.
	Staff Skill Level and Training:	Staff members who develop and maintain a tracking system should have strong computer and organizational skills. Staff who contact women should have good interpersonal skills.
	Cultural Adaptability:	Local sites might need to consider specific cultural preferences when using tracking and reminder systems.
<b>Contact Information</b>	SEARHC WISEWOMAN Project Phone: 907-966-8710 (ask for WISEWOMAN Project Director)	

**ACTION CHECKLIST:  
IMPLEMENTATION—Delivering the Lifestyle Intervention**



	Is the Project or Site Interested in Adopting this Strategy?
<b>INTERVENTION FEASIBILITY</b>	
1. Assess local site barriers to delivering the lifestyle intervention and make mid-course corrections	
2. Engage in a process of adapting the lifestyle intervention that involves both project and local site staff	
3. Identify the purpose of assessments used in the lifestyle intervention and ensure that assessments are feasible for women and local sites to complete	
<b>LIFESTYLE INTERVENTION TRAINING</b>	
4. Hire staff with specialized training that is appropriate for their roles in WISEWOMAN	
5. Train and retrain staff to deliver the lifestyle intervention	
6. Reinforce project-provided training on WISEWOMAN and the lifestyle intervention on a regular basis	
<b>PARTNERING</b>	
7. Partner with organizations that employ staff with the necessary skills and expertise to deliver the lifestyle intervention	
8. Partner with community organizations and health care providers	
8A. Develop a proactive referral system to facilitate delivery of care	
<b>RETAINING WOMEN</b>	
9. Develop a tracking system to identify women in need of re-screening	

**THIS PAGE LEFT BLANK INTENTIONALLY FOR DOUBLE SIDED PRINTING**