

FCNN Planning Guide Stepping On Community Workshop



1. Identify your Leader: _____ Partner Leader: _____

2. Plan the dates and times to hold your workshop: _____
 - Seven consecutive dates – once a week for seven weeks.
 - Consider other events going on in the community.
 - Consider availability of guest experts.

3. Invite and confirm Guest Experts
 - Make phone contact: Who will do this? Leader or Partner Leader
 - Physical therapist for Sessions 1, 2 and 6: _____
Dates/times: _____
Contact Info: (phone, address, email): _____

 - Community safety expert for Session 4: _____
Date/time: _____
Contact Info: (phone, address, email): _____

 - Vision expert scheduled for Session 4: _____
Date/time: _____
Contact Info: (phone, address, email): _____

 - Pharmacist scheduled for Session 5: _____
Date/time: _____
Contact Info: (phone, address, email): _____

 - Send confirmation letters and materials: Who will do this? Leader or Partner Leader

4. Locate a facility and room to hold your workshop: Who will do this? Leader
A site visit is very important to ensure:
 - adequate room to practice exercises
 - sufficient tables and chairs
 - accessible entrance, bathrooms, and parking
 - a secure area to store class materials/display

5. Send notice to FCNN with workshop details via email: Who will do this? Leader

6. Identify resources available to you: Who will do what?

- Laptop, projector, and screen at your selected location Leader or Partner Leader
- Easel and/or dry erase board Leader or Partner Leader
- Refreshments Leader or Partner Leader
- TV/DVD player Leader or Partner Leader

7. Begin to assemble your display.

- FCNN will provide a starter display kit which you can build from.
- See display ideas handout in Stepping On Leader’s manual, pages 50 and 52

8. Review your Stepping On Manual (Background and session-specific sections).

9. Market your program. Who will do what?

(Note that list is organized in order of effectiveness.)

	Leader	Partner Leader	FCNN	Site/Facility
a. Invite people from existing waiting list	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Personal invitation by current/ past participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Personal interest story in local newspaper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Presentation to support groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Presentation to senior groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Presentation to groups (consumers)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Presentation to health care professionals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Meet with health care professionals (potential referral source)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Newsletter notification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Website advertisement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Paper mailing campaign	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Flyers and/or posters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. TV/radio commercial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Blog post on organization’s website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

o. Social networking (Facebook, Twitter, etc.)

p. Other: _____

10. Register and confirm your participants.

Who will do this? Leader

- Develop a method or tap into an existing way to register participants.
- Use registration screening tool.
- Confirm registration one week prior to class.
- Start a waiting/future class list.

11. Ready materials

Who will do this? Leader or Partner Leader

- Handouts
- Name tags/table tents, surveys
- Purchase ankle weights (one ankle weight set is provided to each trained Leader to start)
- Purchase snacks
- Flip chart
- Display
- Signage
- Additional Registration forms for walk-ins
- DVDs

12. After workshop is completed:

- Plan and advertise booster/reunion: Who will do this? Leader

Date: _____ Location: _____

Any guest speakers? _____

- Send Thank You notes: Who will do this? Leader Partner Leader

Physical therapist Community safety expert Vision expert Pharmacist Past participant