

2017 Model Practices

Applicant Information

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Model Practice Title

Please provide the name or title of your practice: *

A Regional Approach to Implementing Community-Driven Healthy Food Access in Underserved Communities

Practice Categories

Model and Promising Practices are stored in an online searchable database. Applications may align with more than one practice category.

Please select all the practice areas that apply.: *

- | | | | | |
|---|---|--|---|---|
| <input type="checkbox"/> Access to Care | <input type="checkbox"/> Advocacy and Policy Making | <input type="checkbox"/> Animal Control | <input checked="" type="checkbox"/> Coalitions and Partnerships | <input type="checkbox"/> Communications/Public Relations |
| <input checked="" type="checkbox"/> Community Involvement | <input checked="" type="checkbox"/> Cultural Competence | <input type="checkbox"/> Emergency Preparedness | <input type="checkbox"/> Environmental Health | <input checked="" type="checkbox"/> Food Safety |
| <input type="checkbox"/> Global Climate Change | <input checked="" type="checkbox"/> Health Equity | <input type="checkbox"/> HIV/STI | <input type="checkbox"/> Immunization | <input type="checkbox"/> Infectious Disease |
| <input type="checkbox"/> Informatics | <input type="checkbox"/> Information Technology | <input type="checkbox"/> Injury and Violence Prevention | <input type="checkbox"/> Marketing and Promotion | <input type="checkbox"/> Maternal-Child and Adolescent Health |
| <input checked="" type="checkbox"/> Organizational Practices | <input type="checkbox"/> Other Infrastructure and Systems | <input checked="" type="checkbox"/> Organizational Practices | <input type="checkbox"/> Primary Care | <input type="checkbox"/> Quality Improvement |
| <input type="checkbox"/> Research and Evaluation | <input type="checkbox"/> Tobacco | <input type="checkbox"/> Vector Control | <input type="checkbox"/> Water Quality | <input type="checkbox"/> Workforce |
| <input type="checkbox"/> Conference Theme: Bridging Clinical Medicine and Population Health | | | | |

Other::

Factors such as employment, transportation, and the built environment influence the health of individuals and communities. One environmental indicator of community health is the accessibility of healthy food. Areas with low access to healthy food have been termed "food deserts" by the United States Department of Agriculture. Currently in Manatee and Sarasota counties, there exist 19 food deserts, resulting in healthy food insecurity in one out of every four children throughout both counties. Food systems in the United States are not restricted by county lines. In recognition of this trend, health departments in Sarasota and Manatee counties embarked on a cross-county approach to implement community-driven initiatives to address the regional food insecurity issues. A cross-county action council was convened, comprised of community residents, farmers, decision makers, and representatives from food assistance agencies. Results from the cross-county assessment were used to drive policy, systems, and environmental change-based food access intervention planning.

Is this practice evidence based, if so please explain. :

This is a model practice that utilized CDC's recommended best practices and scientific research to plan, develop, implement, and evaluate effective programming and initiative implementation.

Winnable Battles

To keep pace with emerging public health challenges and to address the leading causes of death and disability, CDC initiated an effort called Winnable Battles to achieve measurable impact quickly. Winnable Battles are public health priorities with large-scale impact on health and known effective strategies to address them. Does this practice address any CDC's seven Winnable Battles? If so, please choose from the following: *

- | | | | | |
|---|--|---|----------------------------------|---|
| <input checked="" type="checkbox"/> Food Safety | <input type="checkbox"/> HIV in the U.S. | <input checked="" type="checkbox"/> Nutrition, Physical Activity, and Obesity | <input type="checkbox"/> Tobacco | <input type="checkbox"/> Healthcare-associated Infections |
| <input type="checkbox"/> Motor Vehicle Injuries | <input type="checkbox"/> Teen Pregnancy | <input type="checkbox"/> None | | |

Overview: Provide a brief summary of the practice in this section (750 Word Maximum)

Your summary must address all the questions below:

- Brief description of LHD- location, demographics of population served in your community
- Describe public health issue
- Goals and objectives of the proposed practice
- How was the practice implemented/activities
- Results/Outcomes (list process milestones and intended/actual outcomes and impacts.
 - Were all of the objectives met?
 - What specific factors led to the success of this practice?
- Public Health impact of practice
- Website for your program, or LHD.

750 Word Maximum

Over the next 20 years, obesity will contribute to millions of cases of preventable chronic disease in Florida. To address this public health threat, the state Department of Health launched the Healthiest Weight Florida initiative in 2013. In alignment with this initiative, local agencies throughout the state are implementing programs and policies to increase physical activity and improve nutrition. Located on the southwest Florida coast, Manatee County has a total area of 743 square miles. Manatee County has a population of 342,106, a median age of 47.6 years, a median household income of \$46,956, and a diverse population (9% Black, 16% Hispanic, 87% White.) Sarasota County sits just below Manatee County, totaling 555 square miles. Sarasota County has a population of 396,962, a median age of 53.1, a median income of \$49,052 and similar demographics to Manatee County (5% Black, 9% Hispanic, 84% White). Data on health behavior and obesity in Manatee and Sarasota Counties show clear room for improvement. In Manatee County, 24% of adults are obese, 30% of middle and high schoolers are overweight or obese, 22% are physically inactive, and only 24% live within a half mile to a healthy food source. In Sarasota County, 21% of adults are obese, 23% of middle and high schoolers are overweight or obese, 22% are physically inactive, and only 27% live within a half mile to a healthy food source. Together with Sarasota County, Manatee County lies within a regional food system that includes 19 “food deserts” affecting 77,583 residents. Food deserts are census tracts where nutrient-poor food is more readily available than nutrient-rich food, contributing to increased obesity levels and a negative impact on the overall health of the community. To address environmental factors related to unhealthy weight and nutrition, as well as health behaviors, social, and economic factors, a regional Healthy Food Access Assessment was initiated in 2014-2015 by the health departments in Manatee and Sarasota Counties. The assessment’s goals were to (1) identify food desert residents’ perceptions about fruit and vegetable consumption, and (2) plan regional solutions based on the findings. The assessment targeted seven food desert neighborhoods for data collection. Qualitative and quantitative methods (key informant interviews, focus groups, door-to-door surveys, oral histories, and photo-voice) were used to shed light on residents’ perspectives on assets, barriers, and preferred ways to increase fruit and vegetable consumption in Manatee and Sarasota Counties. In the door-to-door survey, the Community Assessment for Public Health Emergency Response (CASPER) methodology was used to ensure statistically valid randomization within census tracts in targeted food desert areas. Following the Healthy Food Access Assessment, a regional council of stakeholders – the Manasota Food Action Council (MFAC) – was established to develop and implement targeted interventions. This council includes health department staff, community residents, farmers, decision makers, and representatives from food assistance agencies. The goals of the council are to (1) collaborate across county-lines to maximize resources, share best practices and plan regional solutions; and (2) implement projects, programs and policies based on the Healthy Food Access Assessment findings to increase access to healthy food sources in both Manatee and Sarasota counties. Quarterly in-person meetings and monthly action group conference calls were held to engage stakeholders from both counties during planning, development and implementation phases of projects. Solutions initiated by MFAC and assessment findings include grant award recipient of \$100,000 in funding to a local Manatee County farm to launch a mobile farmers market, community and home gardens, zoning policy changes, fruit tree orchards, and re-alignment of existing educational resources to meet the preferences and needs of residents. This process of collaboration is successful due to high levels of community engagement and partnerships. Cross-county collaboration has also maximized resources for health departments and extension offices. This process provides a model for successful collaboration between cross-county sectors and a framework to applying multi-tiered community engagement results for project/program implementation.

Responsiveness and Innovation

A Model Practice must be responsive to a particular local public health problem or concern. An innovative practice must be (1) **new to the field of public health (and not just new to your health department)** OR (2) **a creative use of an existing tool or practice**, including but not limited to use of an Advanced Practice Centers (APC) development tool, The Guide to Community Preventive Services, Healthy People 2020 (HP 2020), Mobilizing for Action through Planning and Partnerships (MAPP), Protocol for Assessing Community Excellence in Environmental Health (PACE EH). Examples of an inventive use of an existing tool or practice are: tailoring to meet the needs of a specific population, adapting from a different discipline, or improving the content.

- Statement of the problem/public health issue
- What target population is affected by problem (please include relevant demographics)
 - What is the target population size?
 - What percentage did you reach?
- What has been done in the past to address the problem?
- Why is the current/proposed practice better?
- Is current practice innovative? How so/explain?
 - Is it new to the field of public health
OR
 - Is it a creative use of existing tool or practice:
What tool or practice did you use in an original way to create your practice? (e.g., APC development tool, The Guide to Community Preventive Services, HP 2020, MAPP, PACE EH, a tool from NACCHO’s Toolbox etc.)
- Is the current practice evidence-based? If yes, provide references (Examples of evidence-based guidelines include the Guide to Community Preventive Services, MMWR Recommendations and Reports, National Guideline Clearinghouses, and the USPSTF Recommendations.)

Food deserts are defined by the USDA as areas with low access to healthy foods. Areas with low access to healthy foods lead to increased obesity levels because of the increased consumption of prepared and processed foods high in calories, sugar, and salt. Unhealthy foods are more readily available for residents to buy than nutritious foods such as fresh fruits and vegetables. When fast and convenient, nutrient-poor foods are easier and cheaper to access than fresh, nutrient-dense foods, our population's weight increases and health worsens, causing a negative impact on the overall health of the community. In Manatee and Sarasota counties of Florida, there are over 19 census tracts designated by the USDA as food deserts. In Manatee and Sarasota Counties, 77,583 residents live in food deserts. Both Manatee and Sarasota County have diverse populations and according to a USDA study on food desert characteristics, it is likely that these food desert census tracts have a greater concentration of minorities. When conducting the Healthy Food Access Assessment, the population demographics of the targeted food desert areas were primarily minorities. Results from the Healthy Food Access Assessment also demonstrated a higher rate of poverty in food desert tracts vs. non-food desert tracts. In Manatee County, 41,229 people are designated by the USDA as having low access to healthy food, of which 16,573 people are low income. In Sarasota, 38,432 residents live in USDA designated food deserts. Of that number, 33,419 are low income. The Florida Department of Health in Manatee and Sarasota Counties partnered to address the food desert issue impacting both counties by applying the results of the Healthy Food Access Assessment to the strategic plans of program implementation. The purpose of developing a cross-county food action council was to engage multiple stakeholders and residents during the planning, developing, and implementing phases of various programs that aligned with the results of the assessment. Each county has unique resources available that were maximized by cross-county collaboration. Cross-county collaboration has also allowed best practices to be shared, shining a light on regional strengths, and providing for more cost-effective solutions. This collaboration utilized a comprehensive engagement plan to overcome the challenge of having such a large target population. Ownership of programs and projects amongst residents and stakeholders were established by utilizing the assessment as a community engagement tool and building council initiatives from results. Furthermore, multi-sector collaboration within each county strengthen partnerships and increased resource availability for program implementation. Several projects have been implemented in Manatee County with financial and in-kind support from the county government and non-profit agencies. The projects implemented include:

- A fruit orchard in a local park
- Community and home gardens
- Implementation of a farmer's market
- Educational projects in seven of the 19 census tract food deserts.
- Home gardening outreach – to educate residents on how to grow their own vegetables – has also been introduced in cooperation with the University of Florida Institute of Food and Agriculture Sciences.
- Increased access to healthy foods has also been made available to Supplemental Nutrition Assistance Program (SNAP) participants at the local farmers market through a non-profit agency that fosters collaboration to strengthen the social, cultural, and physical assets in the community. Through this program SNAP participants can double their spending power at the local farmers market.
- Data from the Assessment were also incorporated in a successful grant application, resulting in a \$100,000 award to fund the development of a local mobile farmers market

All in all, the collective power of representatives of over 30 community partners within the regional food council – including faith-based institutions, county government agencies, school districts, institutions of higher education, nonprofit agencies, and a community redevelopment association – have been harnessed to address food security issues through healthy food access project initiatives strategically placed in census tract food deserts. Prior to the Healthy Food Access Assessment, DOH-Manatee received funding through a NACCHO Action Communities for Health, Innovation, and Environmental change (ACHIEVE) grant to open a farm stand outside of the local WIC office. It failed, despite following CDC recommended best practices. Staff engaged community members in planning, but they did not engage the targeted community members. For example, church leaders were engaged, rather than the parishioners themselves. The farm-stand failed because residents were not adequately engaged in the planning. Additionally, in 2010 a food policy council was developed in Manatee County but, lacking direction, it never gained traction and became inactive. The current practice incorporated these lessons learned to improve upon engagement strategies and implementation methods. Applying assessment results to initiative planning, assisted in directing and streamlining the existing efforts in both counties to increase healthy food access. Stakeholders were committed to the planning process, as assessment feedback and DOH facilitation helped connect the dots throughout the community, increasing regional communication. Cross-county health department collaboration, multi-level community engagement and partnership, and creative use of maximizing county resources also make this practice highly innovative. Health departments rarely partner to tackle issues on a regional level. Cross-county partnership, while not without its challenges, offers extensive benefits such as maximizing staff time, which is critical as many health departments function with limited staff. The cross-county partnership has also strengthened the resources used by the Institute for Food and Agriculture Sciences Extension Offices in both counties. Additional benefits include sharing best practices across county lines, allowing key leaders of best practices in one county to mentor their counterparts in another county.

LHD and Community Collaboration

The LHD should have a role in the practice's development and/or implementation. Additionally, the practice should demonstrate broad-based involvement and participation of community partners (e.g., government, local residents, business, healthcare, and academia). If the practice is internal to the LHD, it should demonstrate cooperation and participation within the agency (i.e., other LHD staff) and other outside entities, if relevant. An effective implementation strategy includes outlined, actionable steps that are taken to complete the goals and objectives and put the practice into action within the community.

- Goal(s) and objectives of practice
- What did you do to achieve the goals and objectives?
 - Steps taken to implement the program
- Any criteria for who was selected to receive the practice (if applicable)?
- What was the timeframe for the practice
- Were other stakeholders involved? What was their role in the planning and implementation process?

- What does the LHD do to foster collaboration with community stakeholders? Describe the relationship(s) and how it furthers the practice goal(s)

- Any start up or in-kind costs and funding services associated with this practice? Please provide actual data, if possible. Otherwise, provide an estimate of start-up costs/ budget breakdown.

5000 words maximum

Enter the LHD and Community Collaboration related to your practice (5000 words maximum): *

The Manasota Food Action Council was developed to achieve the goal of implementing initiatives that aligned with the results of the Healthy Food Access Assessment, conducted the previous year. Quantitative and qualitative data from the assessment allowed DOH staff to understand the personal stories behind the issue. Unique themes emerged from survey responses, in addition to common themes developing across all focus group discussions. The goals and objectives for each initiative developed by the food action council were distributed within the subgroups of the council to address the common themes from the data. Members of the council were self-selected into their subgroup of interest and collectively created strategic plans to reach objectives and goals of the subgroup. Three subgroups were determined to be priority areas. Gardening, Education, and Mobile Farmers' Market were the selected subgroup topics that aligned with the Healthy Food Access Assessment results and were of common interest amongst stakeholders and community residents. Strategic plans for the council's first year were developed within each subgroup to guide planning of initiatives and direct the use of regional resources. Each subgroup developed goals, objectives, activities, and timelines for each activity for the strategic plan of the group. The Gardening subgroup derived from assessment results that illustrated resident desire to grow vegetables in their own yard or in a community garden. Over half of the assessment participants in both Manatee and Sarasota Counties were in favor of community gardens in their neighborhood and home gardens in their yard. Increasing the number of fruit trees in neighborhoods were also suggested as a promising solution to healthy food access in the focus group data of the assessment. Appropriately, the goals of the Gardening subgroup were to (1) develop small fruit tree orchards in food desert areas, where residents were interested; (2) develop community gardens in the resident desired neighborhoods. Education classes on healthy food related topics also themed as a result in the Healthy Food Access Assessment. Food desert residents expressed the need for education classes on topics such as healthy cooking, cooking for diabetics, healthy recipes for kids, and healthy meal planning on a budget. The goal of the Education subgroup included expanding the existing education outreach programs throughout Sarasota and Manatee Counties in resident desired locations. The Mobile Farmer's Market subgroup derived from the successful application of the United States Department of Agriculture's Farmer's Market Promotion Program grant which provided funds for the market development. The subgroup developed goals to (1) Engage community residents for logistical and operational planning of the mobile farmer's market (2) collaborate with city planners to adjust zoning regulations and obtain necessary permits for mobile market. To begin implementing initiatives, DOH-Manatee and Sarasota hosted monthly meetings and conference calls for stakeholders and community residents to finalize strategic plans and develop deadlines for each activity made. Stakeholders and residents shared activity progression at each meeting and future action items were established at the end of every meeting and conference call. Resources were aligned and maximized to develop community gardens, home garden program, fruit tree orchards, and re-alignment of existing educational resources to meet the preferences and needs of residents. The Healthy Food Access Assessment targeted seven food desert neighborhoods within Manatee and Sarasota counties for data collection. The neighborhoods targeted in Manatee County were, East Bradenton, Pride Park, Samoset, Rubonia, and Washington Gardens. In Sarasota, most food desert tracts clustered around two neighborhoods: Newtown and North Port. Results from each neighborhood presented various themes from focus groups which influenced the council's goals and objectives. Themes of each neighborhood and initiatives planned and developed from data are summarized below. East Bradenton – This community's themes focused on the perceived high cost of fresh fruits and vegetables, as well as the perceived time it takes to prepare fresh fruits and vegetables. Focus group participants report a high density of fast food restaurants in their community and report buying meals from these fast food restaurants because of the convenience. Focus groups participants expressed interest in (1) more centrally-located produce options (farm stands or farmers markets) that accept EBT and debit/credit cards, as well as (2) nutrition and healthy food preparation education classes geared toward children. The initiatives planned and developed for this neighborhood include the mobile farmer's market and a fruit tree orchard. An additional focus group session to provide insight on the resident's desires for logistical and operational planning of the mobile farmer's market is scheduled for the beginning of 2017. This year, an educational fruit tree orchard was developed in a local park to provide convenient access to fresh fruit. The assessment data was used to gain county support in project development by revealing a high density of fast food restaurants and the desire to provide education geared towards nutrition and healthy food preparation. Cross-county collaboration from organizations within the Manasota Food Action Council, were essential to the development of this project as IFAS Extension Office of Sarasota County provided guidance and recommendations from the county's experience of fruit tree orchard implementation and the IFAS Extension Office of Manatee County provided physical resources to implement fruit trees and expertise with their fruit tree selection. Manatee County Government provided the space and reduced mowing costs due to revitalization of space. Manatee Rare Fruit Council and the Tropical Fruit Society collaborated in donating twenty-one fruit trees to the area. The health department of Manatee County facilitated meetings and created action plans during the development phase of the county. The Manatee Rare Fruit Council will also be conducting education sessions within the orchard in 2017, in addition to the educational signage to be installed, once the first bloom of produce from the various fruit trees develop. Pride Park –This community's themes centered around the perceived high cost of produce, the difficulty of meal planning with healthy foods that are perishable, and the lack of fresh produce at local food pantries. Focus group participants expressed interest in (1) working in a community garden where they could grow their own vegetables, as well as (2) having a farm stand that accepts EBT. Focus group participants also expressed interest in (3) educational classes that would teach nutrition and healthy meal planning on a budget, as well as healthy meals for children. The initiatives planned and developed for this neighborhood include the mobile farmer's market, community garden development, and educational classes. The Pride Park neighborhood will serve as one of the first neighborhoods for the mobile farmer's market locations. An additional focus group session provided insight on the resident's desires for logistical and operational planning of the mobile farmer's market. Education sessions will be collaborated with mobile farmer's market implementation. Community garden planning will begin in 2017. Rubonia –Residents of Rubonia overwhelmingly express transportation disadvantages. According to GIS

mapping, key informant interviews, and focus groups, the Rubonia neighborhood does not have a grocery store, and accessing the nearest grocery store requires crossing major highways. Rubonia is an isolated community in Manatee County, only served by public transportation three days a week. During focus groups, this community's themes focused on lack of accessible and affordable options for fresh foods. Residents resoundingly expressed interest in (1) community gardens, interest and (2) more affordable and conveniently located produce (such as a farm stand that accepts EBT and/or has low prices.) The initiatives planned and developed for this neighborhood include the mobile farmer's market and the home gardening program. Surveys to provide insight on the resident's desires for logistical and operational planning of the mobile farmer's market have been administered to community members and will be collected December 2016. The home gardening program has been successfully administered to community members in collaboration with educational nutrition classes from the Family Nutrition Program of IFAS Extension. More than twenty families have successfully grown vegetables in their own homes. Samoset- This community's themes focused on lack of affordable produce, as well as lack of nearby, accessible produce vendors. The community is located 2.4 miles from a large farmers market that has very affordable prices according to focus group participants; however, the market's distance is a barrier. The participants expressed interest in (1) a more centrally-located farm stand that accepts credit/debit and EBT. The participants also expressed interest in (2) nutrition and food preparation classes that would teach families how to incorporate healthy foods such as fresh fruits and vegetables into recipes traditional to African American, Hispanic, and Haitian customs. The initiatives planned and developed for this neighborhood include the mobile farmer's market and the home gardening program. The Samoset neighborhood will serve as one of the first neighborhoods for the mobile farmer's market locations. An additional focus group session provided insight on the resident's desires for logistical and operational planning of the mobile farmer's market. In addition, the home gardening program has collaborated with IFAS extension nutritional classes to serve this area by transferring resources (such as pails to grow fruits and vegetables in at their own homes, tools to use for planting, and plant seedlings to grow) to a community center within the center of the neighborhood. Washington Gardens - The majority of participants expressed owning personal vehicles, but still felt grocery stores were too far away to feel convenient and to warrant the gas prices. Participants also reported concerns on perceived lack of affordability of fresh produce, as well as the amount of time (lack of convenience) involved in preparing healthy meals. Participants prioritize cooking traditional recipes, so they would like (1) education regarding easy ways to incorporate fresh fruits and vegetables into recipes customary in African American populations. Focus group participants also expressed interest in (2) having more small community gardens attached to churches. The initiatives planned and developed for this neighborhood include the development and maintenance of the Eternity Temple Church community garden. Within the last year of existence, the assessment data was used to receive grant funds for the community garden's irrigation system. The Manasota Food Action Council provided an opportunity for Eternity Temple community garden managers to express the benefits and challenges of maintaining a community garden. One of the challenges included producing large quantities of vegetables and the lack of knowledge of how to prepare them. Since challenges were exposed, IFAS Extension partnered with the community garden managers to develop a schedule for education sessions. Newtown- Residents of Newtown reported price as a major barrier to healthy eating and expressed quality as high importance. They are willing to "shop around" to get the best deal. Focus group participants expressed interest in (1) raised awareness of existing community assets such as gardens and farm stands as well as (2) education, particularly on the topic of meal planning. The initiatives planned and developed for this neighborhood include the development of a farmer's market and the collaboration of education sessions at farmer's market events. The Newtown Farmer's Market was developed as a result of utilizing assessment data and collaborating with community leaders at the Manasota Food Action Council. Education sessions have incorporated fresh fruits and vegetables into recipes customary in African American populations. North Port- This community's themes focused on the perceived high cost of fresh fruits and vegetables, as well as the perceived time it takes to prepare fresh fruits and vegetables. Focus group participants expressed interest in (1) more centrally-located produce options (specifically farmers markets) that accept EBT and debit/credit cards, as well as (2) nutrition and healthy food preparation education classes. The initiatives planned and developed for this neighborhood include realigning nutritional education classes from extension offices to a central location in the neighborhood and expanding the mobile farmer's market locations in the second phase of implementation. IFAS Extension Office of Sarasota County is currently seeking existing gathering groups of residents to begin education classes. Cross-county collaboration between IFAS Extension Offices have increased neighborhood connections. A community garden was also developed in an additional food desert of the county (not included in the assessment) at the Florida Department of Health in Manatee County located near East Bradenton. With the collaboration of Manasota Food Action Council members and the Manatee County Government, the health department implemented a twenty-one raised bed community garden for local residents, WIC clients, and employees. The health department community garden, Manatee Square Garden, will serve as a pilot program for the county and an education demonstration to participants on how to grow their own vegetables. The implementation phase of the overall Manasota Food Action Council is active and ongoing. DOH is facilitating the council and using results from the cross-county assessment to drive policy, systems, environmental change-based food access intervention planning, and program implementation. The partnerships DOH staff has created and maintained are vital to developing regional solutions and sharing best practices between counties. There are no costs associated with this practice of maintaining a cross-county council, other than general overhead. Costs for each initiative development have been in-kind and, or grant funded.

Evaluation

Evaluation assesses the value of the practice and the potential worth it has to other LHDs and the populations they serve. It is also an effective means to assess the credibility of the practice. Evaluation helps public health practice maintain standards and improve practice. Two types of evaluation are **process** and **outcome**. Process evaluation assesses the effectiveness of the steps taken to achieve the desired practice outcomes. Outcome evaluation summarizes the results of the practice efforts. Results may be long-term, such as an improvement in health status, or short-term, such as an improvement in knowledge/awareness, a policy change, an increase in numbers reached, etc. Results may be quantitative (empirical data such as percentages or numerical counts) and/or qualitative (e.g., focus group results, in-depth interviews, or anecdotal evidence).

- What did you find out? To what extent were your objectives achieved? Please re-state your objectives.

- Did you evaluate your practice?
 - List any primary data sources, who collected the data, and how (if applicable)
 - List any secondary data sources used (if applicable)
 - List performance measures used. Include process and outcome measures as appropriate.
 - Describe how results were analyzed
 - Were any modifications made to the practice as a result of the data findings?

2000 Words Maximum

Please enter the evaluation results of your practice (2000 Words Maximum): *

Through this practice, DOH-staff developed a food council to oversee the implementation of initiatives that aligned with desired solutions. Stakeholders and community residents applied results from the Healthy Food Access Assessment to the development of the strategic plans for initiative implementation. Objectives were created within each subgroup of the food council to determine specific action steps to meet the subgroup's goals. The Manasota Food Action Council used primary data sources for the foundation of development and initiative implementation through the three action subgroups, Gardening, Education, and Mobile Farmers' Market. Within the Gardening subgroup, five community gardens, one fruit tree orchard in a local park, and a home gardening program have begun development, have been developed or been expanded since 2015. The Gardening subgroup collaborated with key stakeholders of initiative selected areas to assist in the development of each project. Objectives to meet gardening goals have been achieved and will be revised in 2017 to expand Gardening initiatives. The Education subgroup has expanded the existing educational opportunities that met resident's needs, to community-desired locations. Cross-county collaboration has increased the network of resources the county extension offices used for aligning existing education classes. Objectives to meet Education subgroup goals have been achieved through actively locating community member gathering areas and maintaining partnerships with key community leaders. The Mobile Farmer's Market subgroup has met all but one objective towards gathering additional resident's feedback for mobile market operations goal. Collection of data for mobile market operations is currently in process and will be completed by January 2017. Two focus groups were conducted within targeted neighborhoods and thirty-seven surveys have been submitted as of November 2016. These sources will serve as primary data for the mobile market operations. The Mobile Farmer's Market subgroup collaborated with county and municipality planners to adjust zoning regulations and determined the necessary permits for mobile market operations. The Mobile Farmer's Market subgroup also developed a partnership with a local school for an art contest for the mobile vehicle. A middle schooler won the contest and received local recognition through media sources for the development. The food action council has utilized the primary data from the Healthy Food Access Assessment as the guiding tool for initiative development. The subgroups of the Manasota Food Action Council monitored process and outcome performance measures for related initiatives within each targeted neighborhood. These measures were monitored from October 2015 until present. The measures and results can be found in the chart below. Performance measures for each Manasota Food Action Council Initiative.

Gardening Subgroup Targeted Neighborhood – East Bradenton

Objective - Develop inexpensive, healthy food access initiative

Initiative – Fruit tree orchard

Process – The number of collaborating organization during implementation process

Outcome -The number of trees implemented and the number of community residents that utilize the orchard

Targeted Neighborhood – Pride Park

Objective - Develop partnerships with community leaders for community garden planning

Initiative – Community garden

Process – The number of partnerships created

Outcome - The number of garden plots implemented

Targeted Neighborhood – Rubonia

Objective - Demonstrate vegetable growing to interested participants

Initiative – Home gardening program

Process – The number of home gardening visits

Outcome - The number of participants

Targeted Neighborhood – Samoset

Objective - Demonstrate vegetable growing to interested participants

Initiative – Home gardening program

Process – The number of home gardening visits

Outcome - The number of participants

Targeted Neighborhood – Washington Gardens

Objective – Support existing community garden

Initiative – Community garden improvement

Process – The methods to improve community garden

Outcome - The increased number of participants and decreased produce waste

Targeted Neighborhood – DOH-Manatee

Objective - Increase access to healthy food options on-site

Initiative – Community garden

Process – The number of collaborating organizations during implementation process

Outcome - The number of participants

Education Subgroup Targeted Neighborhood – East Bradenton

Objective - Align nutrition education resources

Initiative – Fruit Tree Orchard

Process – The number of collaborating organizations during implementation process

Outcome - The number of educational sessions offered and the number of community residents that attend educational sessions

Targeted Neighborhood – Rubonia

Objective - Align nutrition education resources

Initiative – Family Nutrition Program

education sessions

Process – The number of education sessions offered with home gardening program

Outcome - The number of educational sessions offered and the number of community residents that attend educational sessions

Targeted Neighborhood – Samoset

Objective - Align nutrition education resources

Initiative – Family Nutrition Program

education sessions

Process – The number of education sessions offered with home gardening program

Outcome - The number of educational sessions offered and the number of community residents that attend educational sessions

Targeted Neighborhood – Washington Gardens

Objective - Align nutrition education resources

Initiative – IFAS Extension

education sessions

Process – The number of education sessions offered at the community garden

Outcome - The number of educational sessions offered and the number of community residents that attend educational sessions

Targeted Neighborhood – Newtown

Objective - Align nutrition education resources

Initiative – Family Nutrition Program

education sessions

Process – The number of education sessions offered at the farmer's market

Outcome - The number of educational sessions offered and the number of community residents that attend educational sessions

Targeted Neighborhood – North Port

Objective - Align nutrition education resources

Initiative – Identify existing locations of community resident gatherings

Process – The number of education sessions offered to community members

Outcome - The number of educational sessions offered and the number of community residents that attend educational sessions

Mobile Market Subgroup Targeted Neighborhood – Pride Park

Objective - Engage community resident's at neighborhood association meeting

Initiative – Mobile farmer's market engagement focus group

Process – Percentage of community members participating

Outcome - The results of the mobile farmer's market focus group including resident's desired location, price of items, and culturally appropriate produce

Targeted Neighborhood – Rubonia

Objective - Engage community resident's at neighborhood association meeting

Initiative – Mobile farmer's market engagement survey

Process – Percentage of community

members participating Outcome - The results of the mobile farmer's market focus group including resident's desired location, price of items, and culturally appropriate produce Targeted Neighborhood – Samoset Objective - Engage community resident's at neighborhood association meeting Initiative – Mobile farmer's market engagement focus group Process – Percentage of community members participating Outcome - The results of the mobile farmer's market focus group including resident's desired location, price of items, and culturally appropriate produce Targeted Neighborhood – Washington Gardens Objective - Engage community resident's at neighborhood association meeting Initiative – Mobile farmer's market engagement survey Process – Percentage of community members participating Outcome - The results of the mobile farmer's market focus group including resident's desired location, price of items, and culturally appropriate produce Targeted Neighborhood – Manatee County Objective - Collaborate with county and municipality planners to determine permitting and land use changes for implementation Initiative – Mobile farmer's market logistical and operational development Process – The number of permits obtained Outcome - The number of locations the mobile unit will appear DOH staff also used the Community Health Improvement Plan (CHIP) and Community Health Assessment (CHA) of the health department as an internal measurement tool for initiative implementation. An example of the latest quarterly update of healthy food access improvement can be found below. Strategic Goal - Goal 3.1: By 2020, increase number of places that provide healthy foods including fruits and vegetables. Objective 3.1. By 2020, 60% of Manatee County residents will report having access to a community garden. In Progress - Three community garden projects have developed in food desert areas. Objective 3.1.2: By January 2017, 30% of farmer's market vendors will accept food stamps Completed - Currently all but 2 SNAP/EBT eligible farmer's market vendors accept SNAP/EBT at the market. These two vendors sell high-end candies and snack food that is unhealthy. Objective 3.1.3: By December 2020, 30% of Manatee County residents will report having access to fruits and vegetables at least 2 days a week through the Mobile Farmer's Market. In Progress - Community engagement data has been gathered from 3 of the 5 targeted communities for Mobile Farmer's Market development. Objective 2.1.4: By June 2017 provide technical assistance/support to 5 businesses that want to take steps to improve wellness in the workplace. In Progress - DOH-Manatee has collaborated with Health Links to develop a recognition program that will support local businesses that offer their employees' health and wellness programs/resources in the workplace. DOH-Manatee has also implemented a pilot community garden on-site to improve workplace wellness among DOH-Manatee Employees and serve as an example for additional county organizations. Strategic Goal - Goal 3.2: By 2020, increase availability of nutrition classes to adults and children. Objective 3.2.1: By 2020, 30% of mobile farmer's market shoppers will report attending at least one nutrition education class held at the mobile market. In Progress - DOH-Manatee will provide educational opportunities at the local farmer's market once a month. Objective 3.2.2: By 2020, 60% of food pantries in Manatee County will provide monthly nutrition education classes. Not Started - Facilitating partnerships between food pantries and organizations providing educational services will begin in 2017. Secondary data sources for this practice include the USDA Food Atlas and Florida Community Health Assessment Resource Tool Set (FL CHARTS). Additional evaluation measures include Manasota Food Action Council leadership team members assessing the success and challenges of each initiative annually.

Sustainability

Sustainability is determined by the availability of adequate resources. In addition, the practice should be designed so that the stakeholders are invested in its maintenance and to ensure it is sustained after initial development (*NACCHO acknowledges that fiscal challenges may limit the feasibility of a practice's continuation.*)

- Lessons learned in relation to practice
- Lessons learned in relation to partner collaboration (if applicable)
- Did you do a cost/benefit analysis? If so, describe.
- Is there sufficient stakeholder commitment to sustain the practice?
 - Describe sustainability plans

1500 Words Maximum

Please enter the sustainability of your practice (2000 Words Maximum): *

The Manasota Food Action Council is an open membership council for community leaders and members, stakeholders, and anyone who may be interested. With new participation at each meeting, the direction of the council is constantly expanded. The council has learned the importance of establishing a leadership team of diverse organization representation to ensure council operations are effectively maintained. The council has also learned the importance of maintaining partnerships with community residents throughout all phases of development. Since timing plays a critical factor in each phase from planning to implementation, constant communication with community residents within the separate neighborhoods is necessary to ensure project completion. Creating a partnership and maintaining the partnership between the stages of planning and implementation can take many years and must be communicated with community residents for understanding from the beginning. Finally, when bringing many community partners together to achieve a common goal it is essential that existing resources are utilized and individual or organizational work is not multiplied. One lesson learned throughout this practice is aligning existing programs with resident needs and desires is instrumental in the success of reaching the targeted community. The subgroups within the food action council had to first identify the resources available and then identify methods to distribute the resources to the targeted community. For example, education classes provided by the Institute for Agriculture Food and Sciences (IFAS extension) were distributed at the extension offices. However, many targeted community members lacked access to transportation and were unable to attend those classes which resulted in a low attendance count. IFAS Extension of both Manatee and Sarasota Counties utilized primary data sources and shared networks with each other to brainstorm new locations to distribute classes. As a result, locations of education classes have increased along with target community member participation. This practice relied heavily on collaboration between health departments and with a number of community stakeholders. Partners were heavily involved in the process. Their unique resources and skills were vital to this project. Involving partners frequently and honoring their expertise increased the success of this practice immeasurably. Sharing results with partners and stakeholders increased community-wide awareness of the issue. When stakeholders' understanding of the issue increased, so did their commitment to planning solutions. Furthermore, by building relationships with partners, DOH staff was able to learn what their goals were and how they aligned with resident feedback. Assessment results helped stakeholders streamline their current efforts. DOH facilitated regional collaboration which helped connect the dots between counties, allowing partners to create shared goals. By creating shared goals, sustainability of the planning process was increased, as partners and residents were invested in and accountable for the outcomes. Finally, successful implementation of initiatives has increased the sustainability of the council since local recognition of initiatives has brought community members and leaders to learn about the council and its goals. There were no cost/benefit analysis associated with this practice.

Additional Information

How did you hear about the Model Practices Program?: *

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| <input type="checkbox"/> I am a previous Model Practices applicant | <input type="checkbox"/> At a Conference | <input type="checkbox"/> NACCHO Website | <input type="checkbox"/> Public Health Dispatch | <input checked="" type="checkbox"/> Colleague in my LHD |
| <input type="checkbox"/> Model Practices brochure | <input type="checkbox"/> NACCHO Exhibit Booth | <input type="checkbox"/> NACCHO Connect | <input type="checkbox"/> Colleague from another public health agency | <input type="checkbox"/> E-Mail from NACCHO |
| <input type="checkbox"/> NACCHO Exchange | | | | |