Southern California HEAL Zones Phase 2
Network Leaders Learning Circle

July 31, 2015
Request for Proposals

Section I
- Revised HEAL Zone Design
- Vision
- Goals
- Outcomes
- Strategies

Section II
- Invitation Criteria
- Roles, Responsibilities, and Expectations
- Funding Guidelines
- Grant Requirements

Section III
- Application Checklist
- Application Requirements

Section IV
- Application Process - 3 Steps
HEAL Zone Phase 1 Framework

Intervention

A mix of evidence-informed strategies that reach targeted populations in community settings where people live, work, play, eat, and learn

Expected Outcomes

- **Environments**
  - Improved policies related to healthy eating, active living
  - Sustained by: Policies

- **Healthy Behaviors**
  - Increase healthy food & beverage consumption
  - Decrease calorie consumption
  - Increase physical activity

Goals

- Increased awareness, knowledge, skills, motivation, and utilization

Vision

People eat better and move more as part of daily life
Vision: People Eat Better and Move More as a Part of Daily Life

Community Action Plan
- Environmental & Policy
  - Mix of evidence-informed strategies that reach target populations in community settings where people live, eat, work, play, and learn
- Clinical and Community Systems
- Knowledge, Skills, & Attitudes
- Social & Economic (optional)

Community Change Outcomes
- Increased access to fruits and vegetables
- Increased availability of free, safe water
- Reduced availability of sugar-sweetened beverages
- Decreased access to unhealthy food and beverages
- Increased physical activity opportunities and spaces
- New and improved policies that enable access to healthy food options
- Maximized outreach, enrollment, retention, and utilization in federal food programs
- Improved policies to screen and enroll for federal food programs eligibility
- New and improved policies that promote active transportation and physical activity
- Improved proportion of patients who are regularly assessed for obesity, diabetes, and/or heart disease
- Improved provision of education and counseling to prevent and manage diabetes, obesity, and heart disease
- Increased referrals and coordination between clinics and community resources and programs (clinic to community integration)
- Increased awareness, knowledge, skills, and motivation to recognize and make healthy behavioral choices
- Improved capacity to manage chronic conditions
- Improved community safety
- Improved transportation to access vital services
- Improved resident leadership and civic engagement
- Improved leadership buy-in and engagement among elected/appointed officials
- Improved collaboration between community partners

Population Health Goals
- Increase fruit, vegetable, and water consumption
- Decrease consumption of sugar-sweetened beverages
- Increase physical activity
- Improve prevention, treatment, and management of obesity and its related conditions
Vision: People eat better and move more as part of daily life

Population Health Goals

- Increase fruit, vegetable, and water consumption
- Decrease consumption of sugar-sweetened beverages
- Increase physical activity
- Improve prevention, detection, treatment, and management of obesity and its related conditions

New!
Community Change Outcomes

Mix of evidence-informed strategies that reach target populations in community settings where people live, eat, work, play, and learn

- **Environmental & Policy**
  - Increased access to fruits and vegetables
  - Increased availability of free, safe water
  - Reduced availability of sugar-sweetened beverages
  - Decreased access to unhealthy food and beverages
  - Increased physical activity opportunities and spaces
  - New and improved policies that enable access to healthy food options
  - Maximized outreach, enrollment, retention, and utilization in federal food programs
  - Improved policies to screen and enroll for federal food programs eligibility
  - New and improved policies that promote active transportation and physical activity

- **Clinical and Community Systems**
  - Improved proportion of patients who are regularly assessed for obesity, diabetes, and/or heart disease
  - Improved provision of education and counseling to prevent and manage diabetes, obesity, and heart disease
  - Increased referrals and coordination between clinics and community resources and programs (clinic to community integration)

- **Knowledge, Skills, & Attitudes**
  - Increased awareness, knowledge, skills, and motivation to recognize and make healthy behavioral choices
  - Improved capacity to manage chronic conditions

- **Social & Economic (optional)**
  - Improved community safety
  - Improved transportation to access vital services

  - Improved resident leadership and civic engagement
  - Improved leadership buy-in and engagement among elected/appointed officials
  - Improved collaboration between community partners

Optional
What’s new?

**Food security definition:** “When all people at all times have access to sufficient, safe, nutritious food to maintain a healthy and active lifestyle” (WHO, 1996).

**Why?** Negatively impacts health and well-being across life-span. Strong link between food insecurity and obesity prevalence.
Clinical and Community Systems

New!

Improved proportion of patients who are regularly assessed for obesity, diabetes, and/or heart disease

Improved provision of education and counseling to prevent and manage diabetes, obesity, and heart disease

Increased referrals and coordination between clinics and community resources and programs (clinic to community integration)

Clinical systems definition: Information systems, decisions support, self-management Support, case management

Community systems definition: environment, social norm, community-based services and resources

Target sub-population: At-risk people and those with obesity related chronic conditions
Increased awareness, knowledge, skills, and motivation to recognize and make healthy behavioral choices

Improved capacity to manage chronic conditions

Reinforced environmental and policy changes
Community capacity building

Improved resident leadership and civic engagement

Improved leadership buy-in and engagement among elected/appointed officials

Improved collaboration between community partners

Key to ensure local support and sustainability of the HEAL efforts
Social & Economic (optional)

Improved community safety
Improved transportation to access vital services
Other

Local social and economic barriers that directly or indirectly affect healthy eating and active living
Interventions and Promising Strategies

• Address new goals and outcomes
• Successes of Phase 1
• Community Assets and Barriers
• Use “dose” concept
• Evidence-informed
• Environmental changes supported by Policy + Education/Promotional
Section I

- Questions?
Section II

• Invitation Criteria

• Roles, Responsibilities, and Expectations
  – Coordinating Agency
    ▪ What’s new?
      ✓ Designate 1.0 FTE community organizer responsible for adult and youth engagement
      ✓ Support of community residents in the HEAL Zone Intervention
      ✓ Mandatory participation in initiative-wide TA and learning opportunities
      ✓ Active participation in evaluation activities
Roles, Responsibilities, and Expectations Continued

- **Coalition**
  - **What’s new?**
    - Coalition responsibility the development of the application (Not the Coordinating Agency Alone)

- **Sustainability**
  - **What’s new?**
    - Core group of residents to lead advocacy, implementation and monitoring
    - Partner organization incorporation HEAL into their organizational policies, practice, and culture.

- **Evaluation**
  - **What’s new?**
    - Active participation from community stakeholders in collecting and analyzing the results. In order to improve local evaluation capacity.

- **Funding Guidelines**
  - Up to $1 million over 3 years
Section II

- Questions?
Section III

- Application Narrative
- Community Description
  - Community Description
    - Population Statistics
    - Social Conditions
    - Estimated Reach
- CAP Rationale
  - Who was involved? How residents and community leaders participated?
  - Why did you chose the selected strategies?
  - Synergy and connectivity among strategies
  - How residents and other community leaders participated in the development of the CAP?
Section III

- Questions?
## Section IV: Application Process

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<th>Objectives</th>
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| Gathering Input and Strategy Assessment         | August 4-September 14 | • Sites will develop a deep analysis of current barriers to HEAL with active local residents participation and input  
• Identify new elements that could strengthen the intervention toward achieving HZ outcomes  
• Develop a strategy Inventory: Discontinued, continued, continued with modifications, and new strategies |
| Approve Draft Strategies                         | September 21<sup>st</sup>-October 2nd | • CP, CCHE, and KP meets with each site to discuss community needs and strategy assessment                                                                                                               |
| Submit Application                               | October 20<sup>th</sup> | • Coalition submits application                                                                                                                                                                          |
I recommend deleting this slide in favor of the following timeline slide.
Andrea X. Azuma, 7/28/2015
August 4 – September 14
- Review evaluation data
- Conduct SWOT or SOAR analysis
- Photovoice
- Focus groups or conversations with all partners (funded, non-funded, residents)
- Work with partners to assess strategies and opportunities
- Assess dose and collaborative capacity
- Complete the Strategy Assessment Tool by September 14

September 14
- Strategy Assessment Tool due to KP

October 20
- Proposals due to KP

September 21 – October 2
- Meeting with KP, CP, CCHE to discuss Strategies

After Strategy Meeting with KP
- Share results of Strategy Meeting with all partners
- Develop Community Action Plan
- Develop detailed workplans with partners
- Gather letters of support
- Complete application
Section IV

- Questions?