

Project Title: Let's Move Holyoke 5210 (Healthy tomorrows Partnership for Children)

Project Number: H17MC26775

Project Director: Jay Breines, CEO

Grantee Organization: Holyoke Health Center, Inc. (HHC)

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Project Period: 03/01/2014-02/28/2019 with a no cost extension until 02/28/2020

Total Amount of Grant Awarded: \$235,635

PURPOSE OF PROJECT & RELATION TO SSA TITLE V AND CHILD HEALTH

(MCH) PROGRAMS: The Let's Move Holyoke 5210 (LMH) is a community-wide program which promotes healthy lifestyles throughout the greater Holyoke, MA area. LMH was developed in response to the disproportionate prevalence rates of overweight and obesity in children and adults. LMH addresses the Title V priority areas of: providing preventive and primary care services for children and adolescents, putting into community practice national standards and guidelines, and developing family-centered, coordinated community-based systems of care. Let's Move Holyoke's 5210 represents the core principles of the program: 5 fruits and vegetables every day; 2 hours maximum of screen time daily; at least 1 hour of physical activity every day; and 0 sugar sweetened beverages. The Advisory Board of LMH provided trainings, food demonstrations, events, programs and education sessions at the partner agencies for their staff, clients, and community members about healthy eating and active living.

GOALS & OBJECTIVES: LMH has the following goals/objectives: 1.) Primary Care Site at the Holyoke Health Center, Inc. (HHC); 2.) Community and Education Sites (Head Start, Holyoke Public Schools, YMCA); 3.) Social Media; 4.) Additional Sites and Programming; 5.) Collaboration with other Healthy Weight Programs; 6.) Participant Outcomes.

METHODOLOGY: The methods and activities which were used to attain the objectives were: monthly Advisory Board meetings; Program Coordinator as the link between the community and the Advisory Board; targeted engagement with specific sectors such as healthcare, school, early childhood education, afterschool program; recruitment of partner agencies to become LMH sites; identification of site champion at each partner site; LMH materials distributed for partner site use; commitment by partner sites to the LMH principals; trainings developed and completed for

partner sites; evaluation tools developed and used by evaluation organization; REACH survey; Site Surveys; and the Healthy Living Plan pre and post survey tool to assess behaviors of individual participants before and after a program or intervention at partner sites. The use of the LMH Facebook and web pages to promote and educate community members about the LMH goals and priorities provided an expansion of reach and greatly aided in program name and logo recognition in the REACH surveys.

EVALUATION: LMH partnered with University of Massachusetts Donahue Institute to perform evaluation methods consisting of REACH surveys, site surveys, and the Healthy Living plan pre and post survey tool. The REACH Survey is a brief survey to assess the awareness of the message and program in the community. The Site Surveys are internet based tools that document and assess the number and type of LMH activities occurring at partner sites. The Healthy Living Plan pre and post survey tool assesses the behaviors of individual participants before and after a program or intervention done at partner sites. These evaluation tools were performed on routine basis, presented to the Advisory Board and reviewed quarterly.

RESULTS/OUTCOMES: LMH's site survey showed that 87% (13/15) of partners completed the survey and 100% were implementing evidence based practices. All sites were posting LMH 5210 messages and 54% were using the LMH 5210 toolkit. A few of the activities reported included cooking demonstrations, co-sponsor of YMCA Healthy Kids Day, Cooking Matters, food service staff development, cultural menus, freight farming, elementary school nutrition education and a food insecurity e-referral project. 8,462 participants were impacted by all partners, bringing the total since 2015 to 41,430. The most recent REACH Survey showed an increase in the program name recognition by 12%. Of the individuals who were able to identify one LMH strategy, 75% reported making a behavior change as a result of the message. There is a strong community awareness of LMH and a direct result of that is LMH being selected as a prevention strategy by the County Health Improvement Plan, Domain 4 for Hampden County.

PUBLICATIONS/PRODUCTS: LMH created a range of products and publications as listed below:

- American Academy of Pediatrics poster presentation in 2015 and 2018
- Let's Move Holyoke 5210 web page
- Let's Move Holyoke 5210 Facebook page
- LMH materials such as: flyers, posters, banners, stickers, water bottles, Frisbees
- LMH educational materials such as 5210 handouts, Eat Your Colors, Sugar Sweetened Beverages
- Lets' Move Holyoke 5210 video
- Let's Move Holyoke 5210 Healthy Living Plan
- Let's Move Holyoke 5210 training power point

- Let's Move Holyoke 5210 program brochure

DISSEMINATION/UTILIZATION OF RESULTS: LMH disseminated the annual evaluations including the REACH Surveys, Site Surveys, and Healthy Living Plan pre and post surveys, to all partner organizations, the Massachusetts Department of Public Health, Title V representative, MCAAP, AAP, and CATCH Programs. In addition two poster presentations were held at the AAP conference in 2015 and in 2018.

FUTURE PLANS/SUSTAINABILITY: LMH is currently working with the University of Massachusetts Center for Community Health Equity Research via Dr. Airin Martinez's Health Service Grant which will evaluate and create new LMH program materials. Additionally, HHC applied for a Massachusetts League of Community Health Centers Primary Care Special Project grant to provide protected time for Dr. Biggs to focus on the sustainability and expansion of the LMH program. The LMH program was adopted by the Hampden County Community Health Improvement Plan as a health promotion strategy. This adoption allows for expansion into all of Hampden County.

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NARRATIVE:

1.) Purpose of project and relationship to SSA Title V Maternal and Child Health (MCH) Programs: Briefly describe the major purpose(s) of the project and the needs and problems it addressed. Indicate the program priority under which the project was funded. Explain the relationship to the State Title V MCH Program and state/local AAP chapter(s).

Let's Move Holyoke 5210 (LMH) is a community-wide program which promotes healthy lifestyles throughout the greater Holyoke area. LMH was developed to address the disproportionate prevalence of overweight and obesity among children and adults in our service area. Let's Move Holyoke's 5210 represents the core principles of the program: 5 fruits and vegetables every day; 2 hours maximum of screen time daily; at least 1 hour of physical activity every day; and 0 sugar sweetened beverages. LMH addresses several Title V priority areas including: providing preventative and primary care services for children and adolescents; facilitating community wide practice of national standards and guidelines such as prenatal care, healthy and safe child care, and health supervision of infants, children, and adolescents. Additionally, LMH has addressed the priority areas of developing family centers, coordinated, community-based systems of care. The LMH partnership is supported by the national AAP and MCAAP sections on obesity and the efforts align with the AAP's effort to address the obesity epidemic through evidence based programs and care. The LMH collaboration includes a wide array of community organizations including HHC, Holyoke Public Schools, Holyoke, Springfield, and Chicopee Head Start, Holyoke and Chicopee WIC, Greater Holyoke YMCA, Holyoke Medical Center, University of Massachusetts Extension Services, Holyoke Mass in Motion, City of Holyoke (Mayor's Office, Board of Health, Planning Department), Sodexo Food Service – including their school garden program, Valley Opportunity Council, Nuestras Raices, University of Massachusetts Center for Community Health Equity Research, Hampden County Community Healthy Improvement Plan, and River Valley Counseling Center. With the Healthy

Tomorrows Partnership for Children funding, we have grown into a truly city wide collaborative partnership which is highly regarded, well established, and has expanded and been integrated in other organizations significantly during the course of this grant. The Advisory Board of LMH provided trainings, food demonstrations, events, programs and education sessions at the partner agencies for their staff, clients, and community members about healthy eating and active living. By providing these services and messages where children and families live, learn, work and play, LMH is well poised to expand into the rest of the county.

2.) Goals and Objectives: Describe the goals and objectives of the project and show how they relate to the item above.

Objective 1: Primary Care Site Holyoke Health Center:

LMH outlined the following goals under this objective which focused on the use of the Healthy Living Plan (HLP) tool in primary care settings such as satisfaction levels of using the HLP, measurement of frequency of use of the HLP, assess understanding of LMH message via using the HLP, and assess the incorporation of utilizing the HLP tool into provider and medical exam routine. Using the HLP directly connects to Title V priority area of providing preventative and primary care services for children and adolescents. At the end of the grant period, the HLP was performed at every well child exam at HHC. Data was collected and reported to the Advisory Committee on a routine basis.

Objective 2: Community and Education Sites (Head Start, Holyoke Public Schools, YMCA):

LMH's current partnership roster includes: Holyoke Health Center (clinical and community health), Holyoke Medical Center (HMC, clinical and community health including Community Benefits program), Holyoke and Chicopee WIC, Holyoke, Springfield, and Chicopee Head Start, Greater Holyoke YMCA, River Valley Counseling Center, Sodexo Food Service (including school gardens), Holyoke Public Schools, UMass Extension, Nuestras Raices, UMass Center for Community Health Equity Research, Holyoke Board of Health, Holyoke Mass in Motion, City of Holyoke (including Mayor's Office and Farmers Market), Westfield Board of Health, Food Bank of Western Massachusetts, and the Valley Opportunity Council and Hampden County CHIP. The community site recognition process continues to be utilized and LMH site partners incorporated the five priorities of the program: 1.) Limit unhealthy choices for snacks and celebrations; 2.) Limit or eliminate sugary drinks; 3.) Prohibit the use of food as a reward; 4.) Provide opportunities to get physical activity every day; 5.) Limit recreational screen time. The extensive community wide partnership and collaboration of LMH goals addresses Title V priority areas of facilitating community-wide practice of national standards and guidelines, as well as a coordinated community based system of care.

Objective 3: Social Media:

LMH continues to have a webpage dedicated to the program as a part of the larger Holyoke Health Center's website at <http://www.hhcinc.org/en/lets-move-holyoke>. This webpage continues to be maintained and updated with program information and referrals to participating community organizations. The Facebook page for LMH has 212 "likes" and can be found at <https://www.facebook.com/Letsmoveholyoke5210/> Participation with social media and an online presence has been instrumental in maintaining a community wide system of care.

Objective 4: Additional Sites and Programming:

LMH consistently recruited and added additional sites whom integrated the LMH toolkit and goals. Our current partnership roster includes 21 participating agencies: Holyoke Health Center (clinical and community health), Holyoke Medical Center (HMC, clinical and community health including Community Benefits program), Holyoke and Chicopee WIC, Holyoke, Springfield, and Chicopee Head Start, Greater Holyoke YMCA, River Valley Counseling Center, Sodexo Food Service (including school gardens), Holyoke Public Schools, UMass Extension, Nuestras Raices, UMass Center for Community Health Equity Research, Holyoke Board of Health, Holyoke Mass in Motion, City of Holyoke (including Mayor's Office and Farmers Market), Westfield Board of Health, Food Bank of Western Massachusetts, and the Valley Opportunity Council and Hampden County CHIP. The partnership agencies are fully involved in sustainability planning and funding searching to continue the program. The breadth of the partnership addresses the Title V priority area of a coordinated community based system of care.

Objective 5: Collaboration with other Healthy Weight Programs:

In addition to the extensive list of community-wide partnership agencies listed above, the LMH Site Survey results speak specifically to the collaboration in healthy weight programming that partnership sites do. The survey was completed in October 2019 and again demonstrated an impressive array of activities and engagement. 87% (13/15) of partners completed the survey and 100% were implementing evidence based practices. All sites were posting LMH 5210 messages and 54% were using the LMH 5210 toolkit. A few of the activities reported included cooking demonstrations, co-sponsor of YMCA Healthy Kids Day, Cooking Matters, food service staff development, cultural menus, freight farming, elementary school nutrition education and a food insecurity e-referral project. 8,462 participants were impacted by all partners, bringing the total since 2015 to 41,430.

Holyoke Medical Center (HMC) has implemented and continues to implement the following healthy eating and active living activities: creating and maintaining an educational bulletin board, providing food access services, implementing and reviewing policy and systems changes, and providing employment, housing, and transportation support. Currently HMC is focusing on the LMH priority strategy of providing non-food rewards.

The Holyoke Health Center (HHC) has implemented and continues to implement the following healthy eating and active living activities: culturally appropriate menus, nutrition programming,

educational bulletin board, cooking demonstrations, LMH Power Point curriculum, Safe Routes to Schools, farm gardening program, providing food access services, implementing and reviewing policy and system changes, and providing housing, employment, and transportation support.

River Valley School Based Health Center (RVCC) has implemented and continues to implement the following healthy eating and active living activities: LMH educational bulletin board and providing food access services. RVCC continues to focus on the LMH priority strategies of providing healthy choices for snacks and celebrations, providing water and low fat milk as beverage choices, provide opportunities for children to get physical activity every day, and limiting screen time.

The City of Holyoke implemented and continues to implement policy and systems change and review. The City of Holyoke continues to support and fund the Valley Bike Share program and has ensured that the onsite lunch café serves healthy food options.

The Holyoke Public Schools (HPS) implemented and continues to implement the following healthy eating and active living activities: cooking demonstrations, physical activity breaks during the school day, healthy cooking and food preparation infrastructure in place, providing culturally appropriate menus, providing a nutrition program, providing food access services, and implementing and reviewing policy and systems change. HPS is focusing on the LMH priority strategies of providing healthy choices for snacks and celebrations, providing water and low fat milk as beverage choices, providing opportunities for physical activity every day, and providing nonfood rewards.

Sodexo Food has implemented and continues to implement the following healthy eating and active living activities: healthy cooking and food preparation infrastructure is in place, provides culturally appropriate menus, providing nutrition programs, and providing food access. Sodexo Food is focusing on the following LMH priority strategies: providing healthy choices for snacks and celebrations, and providing water and low fat milk for beverage choices.

The Greater Holyoke YMCA (YMCA) has implemented and continues to implement the following healthy eating and active living activities: cooking demonstrations, LMH educational bulletin board, physical activity program, increased recess or physical activity time, and an afterschool program. YMCA is focusing on the following LMH priority strategies: providing healthy choices for snacks and celebrations, providing water and low fat milk for beverage options, providing nonfood rewards, and providing opportunities for physical activity every day.

The University of Massachusetts Extension Nutrition Program (ENP) has implemented and continues to implement the following healthy eating and active living activities: providing an afterschool program, providing nutrition programming, and providing cooking demonstrations. ENP continues to focus on the following LMH priority strategies: providing healthy choices for snacks and celebrations, providing water and low fat milk as beverage options, and limiting screen time.

The local Head Start offices (HS) have implemented and continue to implement the following healthy eating and active living activities: providing afterschool programming, nutrition programming, and cooking demonstrations. HS continues to focus on the following LMH priority strategies: providing healthy choices for snacks and celebrations, providing water and low fat milk as beverage options, and limiting screen time.

Objective 6: Participant Outcomes:

LMH continues to meet all of the measures of this objective. BMI measurements are recorded at primary care sites and the Healthy Living Plans (HLP) are completed at all well-child visits. Quarterly reports of BMI data have been disseminated on a quarterly basis. Site surveys and REACH Surveys were completed and showed an increase in the program name recognition by 12%. Of the individuals who were able to identify one LMH strategy, 75% reported making a behavior change as a result of the message. There is a strong community awareness of LMH and a direct result of that is LMH being selected as a prevention strategy by the County Health Improvement Plan, Domain 4 for Hampden County.

3.) Methodology: Briefly describe the program activities used to attain goals/objectives and comment on innovation, cost and other characteristics of the methodology.

LMH combines a strong and active Advisory Board and LMH Coordinator with a standardized curriculum and toolkit in order to attain the goals and objectives of the program. The LMH Advisory Board continues to be high-functioning and boasts a consistently strong attendance and participation by the majority of members. The LMH Coordinator continues to be a tireless advocate for the LMH goals and priorities and has a strong presence within the community to keep lines of communication open. A comprehensive power point presentation of the LMH curriculum was created and disseminated to all partner organization to use in order to train staff in a standardized manner. The power point presentation, use of the Healthy Living Plan, and the tool kit which covers the five components of the LMH program were reviewed and taught to all partner agencies. An annual training on the curriculum furthered the integration of the LMH program within partner agencies.

The methods and activities which were used to attain the objectives were: monthly Advisory Board meetings; Program Coordinator as the link between the community and the Advisory Board; targeted engagement with specific sectors such as healthcare, school, early childhood education, afterschool program; recruitment of partner agencies to become LMH sites; identification of site champion at each partner site; LMH materials distributed for partner site use; commitment by partner sites to the LMH principals; trainings developed and completed for partner sites; evaluation tools developed and used by evaluation organization; REACH survey; Site Surveys; and the Healthy Living Plan pre and post survey tool to assess behaviors of individual participants before and after a program or intervention at partner sites. The use of the LMH Facebook and web pages to promote and educate community members about the LMH

goals and priorities provided an expansion of reach and greatly aided in program name and logo recognition in the REACH surveys.

4.) Evaluation: Briefly describe the evaluation methods used to assess the effectiveness of the project in attaining goals/objectives.

LMH partnered with University of Massachusetts Donahue Institute to perform evaluation methods consisting of REACH surveys, site surveys, and the Healthy Living plan pre and post survey tool. The REACH Survey is a brief survey to assess the awareness of the message and program in the community. The Site Surveys are internet based tools that document and assess the number and type of LMH activities occurring at partner sites. The Healthy Living Plan pre and post survey tool assesses the behaviors of individual participants before and after a program or intervention done at partner sites. These evaluation tools were performed on routine basis, presented to the Advisory Board and reviewed quarterly.

5.) Results/Outcomes:

LMH had a site survey completed in October 2019 and again demonstrated an impressive array of activities and engagement. 87% (13/15) of partners completed the survey and 100% were implementing evidence based practices. All sites were posting LMH 5210 messages and 54% were using the LMH 5210 toolkit. A few of the activities reported included cooking demonstrations, co-sponsor of YMCA Healthy Kids Day, Cooking Matters, food service staff development, cultural menus, freight farming, elementary school nutrition education and a food insecurity e-referral project. 8,462 participants were impacted by all partners, bringing the total since 2015 to 41,430. The most recent REACH Survey showed an increase in the program name recognition by 12%. Of the individuals who were able to identify one LMH strategy, 75% reported making a behavior change as a result of the message. There is a strong community awareness of LMH and a direct result of that is LMH being selected as a prevention strategy by the County Health Improvement Plan, Domain 4 for Hampden County.

6.) Publications/Products:

LMH created a range of products and publications as listed below:

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- Let's Move Holyoke 5210 Healthy Living Plan
- Let's Move Holyoke 5210 training power point
- Let's Move Holyoke 5210 program brochure

7.) Dissemination/Utilization of Results:

LMH disseminated the annual evaluations including the REACH Surveys, Site Surveys, and Healthy Living Plan pre and post surveys, to all partner organizations, the Massachusetts Department of Public Health, Title V representative, MCAAP, AAP, and CATCH Programs. In addition two poster presentations were held at the AAP conference in 2015 and in 2018.

8.) Future Plans/Sustainability:

LMH is currently actively engaged with the University of Massachusetts Center for Community Health Equity Research via Dr. Airin Martinez's Health Service Grant. This grant is evaluating LMH materials and messaging to see what best promotes the program in the community. The results of this evaluation will inform the creation and editing of materials and messaging to further impact the community. The final deliverable of this grant is the development of a grant proposal to fund further evaluation of the updated program and to provide sustaining support.

Additionally, HHC applied for a Massachusetts League of Community Health Centers Primary Care Special Project grant to provide protected time for Dr. Biggs to focus on the sustainability and expansion of the LMH program. The LMH program was adopted by the Hampden County Community Health Improvement Plan as a health promotion strategy. This adoption allows for expansion into all of Hampden County.

ANNOTATION:

Let's Move Holyoke 5210 (LMH) is a clinical and community partnership focused on improving healthy eating, active living and weight status in low income children and families in Holyoke, MA. We hope to significantly alter the impact of the obesity epidemic in this community by implementing this evidence based model of individual and community engagement and healthy weight promotion.

KEY WORDS:

Healthy, living, plan, let's, move, Holyoke, pediatric, weight