Healthy Eating/Active Living (HEAL) Policy, Systems, and Environmental Change Assessment and Planning Tool

Updated July 2022

Created by Professional Data Analysts
Adapted from the Centers for Disease Control and Prevention’s
Survey of Community-Based Surveillance of Supports for Heathy Eating/Active Living.
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About This Tool

What is the purpose of this tool?

The primary purpose of this tool is to help local health departments and/or other community organizations to assess current policy, systems, and environmental (PSE) strategies for healthy eating and active living (HEAL) in their communities and use results to inform future work. Table 1 describes additional purposes and uses of this tool.

Table 1. Purposes and uses of this tool

<table>
<thead>
<tr>
<th>Purpose</th>
<th>Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify assets and needs in the organization’s jurisdiction in relation to healthy eating and active living policies and practices</td>
<td>Inform selection and implementation of strategies</td>
</tr>
<tr>
<td></td>
<td>Inform local work planning in communities</td>
</tr>
<tr>
<td>Build relationships with community partners</td>
<td>Introduce community partners to HEAL PSE strategies</td>
</tr>
<tr>
<td></td>
<td>Foster conversation with community partners to identify HEAL strategies of mutual benefit</td>
</tr>
<tr>
<td>Documentation</td>
<td>Use as a historical record and communication tool in the case of staff turnover</td>
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</tbody>
</table>

Who should complete this tool?

This tool is designed to be completed as a self-assessment by local health departments and/or other community organizations in collaboration with community partners, which may include city managers, planners, clerks, administrators, school officials, owners/human resource representatives at large worksites, and coalition members.

How should findings be used to inform action?

Completing this tool will give you and your community partners a better understanding of where the community is already implementing PSE strategies to increase opportunities for healthy living and where these efforts need additional support. Reflecting on the questions in Section 3: Taking Action (p. 20) will help you determine which strategies to prioritize, given your community context.
Instructions for completing this tool

Section 1: Active Living Assessment and Section 2: Healthy Eating Assessment

- Identify partners to help you complete the active living and healthy eating assessments (see pages 7 and 13 for guidance on who you might contact to help complete the assessments).

- Complete both assessments for each community (village/city/county) you plan to work with to get a sense of the landscape of PSE supports for active living and healthy eating.

  Note that some questions in Sections 1 and 2 are related – for example, some policies and plans may address both active living and healthy eating topics. Consider answering these questions together.

Section 3: Taking Action

- Convene your partners, at a coalition meeting or in a manner that works best in your context, to review the assessment findings (Section 1 and 2) and complete the Section 3 questions together.

- Try to answer the questions in this section in the order that they appear. Questions are designed to build on each other.

- Take notes to document key thoughts and responses. It is okay if you do not answer every question. Some questions may not be applicable to your community and some questions may not have straightforward answers. Their purpose is to foster conversation and guide you through an intentional process of decision-making.

- After completing the questions in this section, use what you learned to prioritize future HEAL strategies in your community.

Don’t wait until the end of the assessment to think about taking action!

While this tool is organized into three distinct sections, the sections overlap in multiple ways. Completing this tool should be an iterative process. What you learn from completing one section may lead you to revisit other sections. Throughout the process, you should be thinking about how to use what you are learning to take action. The “tips” and “considerations” call-out boxes integrated throughout this document are there to help you with this.

Look for the following icons throughout this tool:

- Identifies questions that focus on accessibility and health equity
- Tips for completing the assessments and prioritizing HEAL strategies
- Considerations for prioritizing HEAL strategies
Definition of terms
Below are the definitions for key terms that are used throughout this tool.

**Active commute:** Commuting solely by walking or cycling; or by walking or cycling in combination with motorized modes of travel

**ADA compliant / accessible playground:** Complies with the 2010 Americans with Disabilities Act (ADA) Standards for Accessible Design; offers a range of play experiences to children of varying abilities

**Bicycle and/or pedestrian advisory committee:** Advises government bodies on issues around bicycle and/or pedestrian safety and infrastructure

**Client choice model:** Food pantry model in which people can choose their own items; may resemble a small grocery store

**Community Supported Agriculture (CSA):** Community members buy a share of a farm’s production and receive regular distributions of produce throughout the season

**Complete Streets:** Streets that are designed and operated to enable safe access for all users, including pedestrians, bicyclists, motorists, and transit riders of all ages and abilities

**Farm-to-institution:** Initiative that gives farmers the opportunity to sell directly to local institutions (e.g., schools, early care and education, hospitals, colleges)

**Fixed route transportation:** Uses buses, vans, light rail, and other vehicles to operate on a predetermined route according to a predetermined schedule

**Food policy council:** A group that examines how the local food system operates and provides policy recommendations to improve that system

**Mixed land use:** Development that blends residential, commercial, cultural, institutional, or entertainment uses, where those functions are physically and functionally integrated; usually incorporate pedestrian and bicycle connections and provide a more walkable environment

**On demand transportation:** Shared private transport in which vehicles alter their routes based on individual needs rather than using a fixed route

**Produce prescriptions:** A nutrition incentive program in which healthcare providers write prescriptions for fruits and vegetables that can be redeemed at participating farmers’ markets and grocery stores

**Recreational or mixed-use trail:** Supports multiple recreation and transportation opportunities (e.g., walking, bicycling, wheelchairs)

**Safe Routes to School:** A program that promotes walking and bicycling to school through infrastructure improvements, enforcement, tools, safety education, and incentives

**Senior Farmers Market Nutrition Program:** Provides low-income seniors with access to locally grown produce

**SNAP:** The Supplemental Nutrition Assistance Program provides nutrition benefits to supplement the food budget of low-income families to purchase food

**WIC:** The Special Supplemental Nutrition Program for Women, Infants, and Children that provides food, education on healthy eating, and referrals to health care for low-income women, infants, and children up to 5 years old

**WIC Farmers Market Nutrition Program:** Provides coupons for locally grown produce to individuals in WIC

**Zoning codes:** A written regulation and law that defines how property in specific geographic zones can be used
Section 1:
Active Living Assessment
Section 1: Active Living Assessment

Name of community (village/city/county) being assessed: City of Delaware, Ohio

List the people who contributed to completing this section

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Organization</th>
<th>Phone or email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Josie Bonnette</td>
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<td>DPHD</td>
<td><a href="mailto:jbonnette@delawarehealth.org">jbonnette@delawarehealth.org</a></td>
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</tr>
</tbody>
</table>

Who can help you complete the assessment of active living PSE supports?

Consider reaching out to individuals/organizations in the community with expertise in city planning, transportation, and land use. Examples include the City/Regional Planner, City/County Engineer, City Manager, City Administrator, Transit Authority staff, Mobility Manager, or Local Advocates.

If you do not already have an established relationship with the individuals identified, it is recommended that you schedule an introductory call with them to introduce yourself before asking them to help complete the survey. Consider how findings of this assessment may be of mutual benefit.
Community-wide planning documents and active living strategies

Complete this table to get a snapshot of where active living strategies are integrated into existing community-wide planning documents. Place an ‘X’ in the boxes to indicate if the community has each type of plan listed and if strategies are included in those plans. Leave boxes blank if none apply. If no plans exist, skip to the next page.

<table>
<thead>
<tr>
<th>Community-wide planning documents</th>
<th>Comprehensive, general, master, neighborhood, or area plan</th>
<th>Zoning Code, Development Requirements or other Land Use Policy</th>
<th>Transportation plan</th>
<th>Complete Streets Policy</th>
<th>Bike, pedestrian, or active transportation plan</th>
<th>Transit plan</th>
<th>School Travel Plan</th>
<th>Parks and recreation plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community has this type of plan (list date of plan)</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plan supports inclusion of people with disabilities and older adults</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

Plan includes the following active living strategies (mark with an ‘X’ if included in plan)

- New/Repaired Parks and Playgrounds: X
- Bike Infrastructure: X
- Pedestrian Infrastructure: X
- Public Transit Improvements: X
- Multi-Use Trails: X
- Safe Routes to School

Tip: Look for policies and practices in the following places*:
- Review policies adopted by a local or regional authority
- Contact the local transportation planning agency
- Search government websites

* Recommended in CDC’s The Active Communities Tool
Decision-making bodies for active living support

1. What decision-making/advisory bodies exist in this community for making decisions related to active living policies, plans, and infrastructure? *Check all that apply.*
   - ☑ Planning and/or zoning commission
   - ☐ Bicycle and/or pedestrian advisory committee
   - ☑ Other: Parks and Recreation Advisory Board, Parking & Safety, etc. *More information here*
   - ☐ None
   - ☐ Don’t know

2. Is there a designated public health representative on these decision-making/advisory bodies? *Check all that apply.*
   - ☐ Planning and/or zoning commission
   - ☐ Bicycle and/or pedestrian advisory committee
   - ☑ Don’t know: *Per review of City Website it does not appear so. One DPHD staff member attends the city council meeting monthly.*

Infrastructure and environment

*Includes strategies: New/Repaired Parks and Playgrounds, Multi-Use Trails, Public Transit Improvements*

3. Are there any inclusive playgrounds with adapted equipment available in this community?
   - ☐ No  ☑ Yes Veterans and Mingo Parks have been updated with inclusive features. All new playground equipment is updated with inclusive options, within the next 10 years all of the City maintained programs should have inclusive features. The City has also recently adopted an age friendly bench (armrest in center) to use as the donor bench and updating seating in parks.

4. Does this community have recreational or mixed-use trails?
   - ☐ No  ☑ Yes
      a. If yes, are any of these trails accessible to all community members, including people with disabilities and older adults?
         - ☐ No  ☑ Yes
         
         *Signage, Wayfinding & Improved Public Knowledge are opportunities to consider*

5. Is accessible public transportation available in this community?
☐ No ☑ Yes ‘Flex’ Service costs $1.00 or $2.00 to schedule a ride, next day on demand, same day flex service available 6a-6p in Delaware City only

a. If yes, is the public transportation:
   ☑ On demand
   ☐ Fixed route
   ☐ Other: ________________________________

Policies and plans
*Includes strategies: Complete Streets Policy, Bicycle/Pedestrian Master Planning, Safe Routes to School, Land Use Policy*

6. Does this community have a formal Complete Streets Policy for designing and operating streets with safe access for all users?
   ☐ No ☑ Yes

7. Which of the following features are included in community development policy (including zoning codes and design/development guidelines) for new or retrofit development covering this community? *Check all that apply.*
   ☑ Requiring short to medium pedestrian-scale block sizes **Most residential blocks are under 1500’ with the majority below 1000’ in length**
   ☑ Requiring continuous sidewalk coverage: **For new development, Retrofits for redevelopment, and includes paths and trails & identifies need to fill in missing segments.**
   ☑ Requiring minimum sidewalk widths to promote walking in groups (e.g., 5 ft wide)
   ☑ Requiring that buildings relate to the street (e.g., entrances facing streets, reduced building setbacks, or reduced parking requirements)
   ☑ Requiring that street trees or street furniture separate pedestrian zones from streets
   ☑ Requiring audible and visual crosswalk beacons and tactile warning surfaces at crosswalks: **Tactile warning surface standard. Audible/beacons limited to high traffic-pedestrian crossings such as downtown area.**
   ☑ Allowing mixed land uses (e.g., zoning that combines residential land use with one or more commercial, institutional, or public land uses) **R5,R6, R7, R8 are all multi family residential. Planned developments & policies in Delaware Together Comprehensive Plan- See Objective C.6 Support Equity In Health Outcomes, & Actions 6.1-6.5**
   ☐ Other: __________________________________________________________
   ☐ This community is not covered by policies for new or infill development
8. Have any school districts in this community applied for Safe Routes to School funding in the past 5 years?

☑ No ☐ Yes Per our review we could not find any applications to SRTS funding. Delaware has an ODOT approved School Travel Plan (STP) that was adopted in 2015. Could be updated.
Active commute support

9. Does the community have active commute supports and/or policies that allow residents to easily and safely walk, bike, or take transit to reach everyday destinations?

☐ No  ✔ Yes

10. If yes, which active commute supports/policies does the community have? Check all that apply.

☐ Designated on-street bike lanes Just sharrows, Paths/Trails, & wide berms also exist throughout the city.

☐ Bike racks at common destinations (i.e. grocery store, pharmacy, workplaces, schools, libraries, etc) For the most part yes they exist within public facilities, would be interesting to do a windshield survey of some kind

☐ Bike racks on transit vehicles

☐ Bike share program: Potential for opportunity with United Way

☐ Bike repair stations: @least 1 @ Bicentennial Park

☐ Bike friendly businesses

☐ Free/subsidized transit options (Some, for seniors or sometimes special events)

☐ Travel ambassador/ride buddy program

☐ Guaranteed ride home programs

☐ Organized encouragement activities (i.e Bike to Work/School Day): Opportunity for more coordinated effort with partners

☐ Other: ______________________
Section 2: Healthy Eating Assessment
Section 2: Healthy Eating Assessment

Name of community (village/city/county) being assessed: City of Delaware, Ohio

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Who can help you complete the assessment of healthy eating PSE supports?

Consider reaching out to individuals/organizations in the community with expertise in food systems planning. Examples include food policy councils, local non-profits, community or advocacy groups, transportation planning, farmers/producers, and grocery store associations.

If you do not already have an established relationship with the individuals identified, it is recommended that you schedule an introductory call with them to introduce yourself before asking them to help complete the survey. Consider how findings of this assessment may be of mutual benefit.
Community-wide planning documents and healthy eating strategies

Complete this table to get a snapshot of where healthy eating strategies are integrated into existing community-wide planning documents. Place an ‘X’ in the boxes to indicate if the community has each type of plan listed and if healthy eating strategies are included in those plans. Leave boxes blank if none apply. If no plans exist, skip to the next page.

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<thead>
<tr>
<th>Healthy Eating Strategy</th>
<th>Community-wide planning documents</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Comprehensive Plan/Zoning Code</td>
</tr>
<tr>
<td>Farmers’ Markets</td>
<td></td>
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<tr>
<td>Healthy Food Retail</td>
<td></td>
</tr>
<tr>
<td>Food Bank/Pantries</td>
<td></td>
</tr>
<tr>
<td>Community Gardens</td>
<td></td>
</tr>
<tr>
<td>Farm-to-Institution</td>
<td></td>
</tr>
<tr>
<td>Community Supported Agriculture (CSA)</td>
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<tr>
<td>Safe Routes to Healthy Food</td>
<td></td>
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<tr>
<td>Produce Prescriptions</td>
<td></td>
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<tr>
<td>Food Service Guidelines</td>
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<tr>
<td>Food Access Policy and Planning</td>
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</tbody>
</table>

Tip: Look for policies and practices in the following places:
- Review policies adopted by a local or regional authority
- Local school districts
- Local restaurant associations
- Regional/county/city/village government websites
Infrastructure and environment

Includes strategies: Farmers’ Markets, Healthy Food Retail, Food Bank/Pantries, Community Gardens, Farm-to-Institution, Community Supported Agriculture, Safe Routes to Healthy Food, Produce Prescriptions

1. Does this community have a farmers’ market?
   - No ☐ Yes ☑
   a. If yes, is the farmers’ market accessible to people with disabilities and older adults?
      - No ☐ Yes ☑ Could be improved, MSD market is on main downtown streets & can be crowded
   b. Does the farmers’ market provide any of the following assistance programs? Check all that apply.
      - Acceptance of SNAP/EBT ☑
      - Produce Perks ☑
      - WIC Farmers Market Nutrition Program ☑
      - Senior Farmers Market Nutrition Program ☑
      - Other: ____________________________

   Identified need to increase vendor participation in assistance programs.

2. Does your community have any of the following policies or practices related to farmers’ markets, farm stands, or green/produce carts? Check all that apply.
   - Online ordering and contactless pickup (for both SNAP/EBT and conventional payment) ☐
   - Operating a farmers’ market or allowing the sale of fresh produce on city property: MSD Farmers’ Market operates on city sidewalks by permit. ☑
   - Offering streamlined processes for obtaining health and food safety permits and licenses ☐
   - Extending waivers of required business permits or retail licensing fees or taxes ☐
   - Encouraging or incentivizing fresh food vending locations in areas lacking supermarkets and full-service grocery stores The city allows temporary permits & has a streamlined process for this. ☑
   - Providing funds or in-kind services for personnel, signage, or advertising- Andrew’s House receives some $ from Hunger Alliance & DPHD ☑
   - Offered at locations that are accessible to people with disabilities, and older adults- MSD Market is held in downtown area sidewalks on S. Sandusky St. However- this is about a 14-16 minute walk, over a half a mile, one way from Unity Community Center to William & Sandusky Intersection, 20min walk/ 1mile from Londontown Apts/Dollar General. If held at Ross St Park or Woodward would be about half of the distance from that apartment complex.
Other: MSD Market used to be 2x a week but Wednesday afternoon market died off—perhaps there is opportunity to test the viability of pop-up markets that accept EBT

3. Does this community currently use any of the following to encourage supermarkets and other full-service grocery stores to open stores? Check all that apply.

☐ Tax incentives (e.g., tax abatement, tax credit, property tax exemption) This could be a possible opportunity

☐ Grant or loan programs to provide funding to encourage store openings Possible with State and Federal programs. Objective A.11 Action A.11.1 in the Delaware Together Plan could address this as well.

☐ Waivers of certain zoning or ordinance requirements While waivers for certain requirements may encourage supermarket development, the City wants to ensure that new development meets standards in adopted policies and plans and otherwise encourage best practice for smart growth or development.

☐ Other: See pages 76-77 of Delaware Together Plan & Objectives and Actions under Goal C.

☑ This community does not have policies or programs that incentivize supermarkets and other full-service grocery stores to open in the community

   a. If such policies or programs exist in this community, do any of them explicitly prioritize low income or economically depressed areas?

☐ No ☐ Yes

In addition to supermarkets and full-service grocery stores, food can be sold in smaller venues such as convenience or corner stores.

4. Does this community currently have any of the following programs to help convenience or corner stores sell healthier foods? Check all that apply.

☐ Grant or low-interest loan programs to purchase/upgrade store equipment or furnishings to properly store and sell healthy foods and beverages (e.g., fresh produce, low fat milk, whole grains) However, revolving loan funds could be used for this purpose.

☐ Technical assistance or training programs that increase the ability to sell healthier foods (e.g., marketing, promotion materials, product placement)

☐ Programs to link stores to broader neighborhood revitalization projects (e.g., improvements to lighting, signage, safety, accessibility, walkability in the surrounding commercial corridor)

☐ Other: _______________________________________________________________________________
This community does not provide these types of programs or assistance to convenience or corner stores.

Identified Opportunity: The Small-Grant Opportunity for HE&AL through the DPHD’s CHC program could be utilized for this purpose, although there are not many corner stores; there are more drive-throughs and gas stations.

5. Do community food pantries have policies that support the procurement of healthier foods through either purchasing from foodbanks and/or donations received from the community?

☑ No ☐ Yes No policies identified

5a. If yes, do community food pantries provide healthy food options through a client choice model? ☐ No ☑ Yes Some pantry sites have client choice, some don’t.

6. Indicate whether the community has each of the following and whether they are accessible to people with disabilities and older adults.

<table>
<thead>
<tr>
<th></th>
<th>Community gardens</th>
<th>Farm-to-institution</th>
<th>Community Supported Agriculture (CSA)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the community have this?</td>
<td>No ☑ Yes</td>
<td>No ☑ Yes</td>
<td>No ☑ Yes- MTSO</td>
</tr>
<tr>
<td>If yes, is it accessible to people with disabilities and older adults?</td>
<td>No ☑ Yes</td>
<td>No ☑ Yes</td>
<td>No ☑ Yes</td>
</tr>
</tbody>
</table>

Unity & Smith Park, accessible surfacing & raised beds needed. City has interest in adding these features. Grace Clinic has sidewalk beds. Some individual apartment complexes may have them but unknown if so, how many & how accessible.

MTSO’s CSA is Pickup Only

Some residents may not have easy access to supermarkets or full-service grocery stores because they do not have access to a car or public transportation or cannot easily walk to them.

7. Is there dedicated accessible transportation (e.g., community vans or shuttle buses) to supermarkets, other full-service grocery stores, or farmers’ markets for residents of this community? Note: Do not include public transportation in your response.
Section 2: Healthy Eating Assessment

8. Does your transit agency consider accessibility to supermarkets or other full-service grocery stores in their assessment of public transportation routes? See Q5 in Active Living section.
   ☑ No ☐ Yes  ☐ This community does not have public transportation

9. Are there any healthcare institutions in this community that offer produce prescriptions to their patients?
   ☐ No ☑ Yes

Policies and practices
Includes strategies: Food Access Policy and Planning, Food Service Guidelines

10. Does this community have a local or regional food policy council, food security coalition, or similar entity?
    ☑ No ☑ Yes
    a. If yes, is there a designated public health representative on the regional food policy council, food security coalition, or similar entity?
       ☐ No ☑ Yes

The next page asks about nutrition standards and pricing incentives to promote healthy eating in the following settings:

• Local government facilities (e.g., libraries, police stations, government service centers; excludes public school district or school-level policies)

• Largest worksite in the community

• Community settings (e.g., parks, swimming pools, sports facilities)

<table>
<thead>
<tr>
<th>Setting</th>
<th>Local government facilities</th>
<th>Largest worksite</th>
<th>Community settings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kroger</td>
<td>☑ No- Public Works vending area (snacks and drinks) has no nutrition info posted and unlimited as to type of snacks available.</td>
<td>☑ No-</td>
<td>☑ No</td>
</tr>
<tr>
<td>Mingo Pool &amp; Concession, Rec Centers</td>
<td>☑ No</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Public Works vending area</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Section 2: Healthy Eating Assessment

<table>
<thead>
<tr>
<th>Local government facilities</th>
<th>Largest worksite</th>
<th>Community settings</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Kroger</td>
<td>Mingo Pool &amp; Concession, Rec Centers</td>
</tr>
<tr>
<td>a. If yes, to whom do the standards apply?</td>
<td>□ Employees □ General public □ Other:</td>
<td>□ Employees □ General public □ Other:</td>
</tr>
<tr>
<td></td>
<td>□ Employees □ General public □ Other:</td>
<td>□ Employees □ General public □ Other:</td>
</tr>
</tbody>
</table>

12. Which **nutrition standards** exist for each setting? **Check all that apply.**

- Limiting foods high in added sugar (e.g., cookies, candies)
- Limiting sugar-sweetened beverages (e.g., soda, sports drinks, sweetened tea)
- Limiting foods high in sodium/salt content
- Limiting foods high in fat (e.g., fried foods)
- Increasing availability of fruits and vegetables
- Providing lower calorie options
- Other: *(add)*

**Pricing incentives**

13. Does the setting have **pricing incentives** (e.g., intentionally pricing healthier items to be less expensive) to promote the purchase of healthier foods and beverages sold, including in cafeterias or vending machines?

- Yes
- No

**Community settings**

- No vending in break rooms
- No
- Yes
Section 3: Taking Action
Section 3: Taking Action

The purpose of this section is to help communities reflect and act on results of the healthy eating and active living PSE assessments. The assessment results are intended to inform the selection of future HEAL strategies based on the resources and needs of specific communities.

Instructions for completing this section

1. Review results from the Active Living and Healthy Eating assessments above and reflect on findings using the questions on page 21 as a guide.

2. Answer the questions in this section, in order, to get a sense for how community context may support or hinder implementation of HEAL strategies (a list of HEAL strategies is provided in the table on page 22 for reference).

3. Complete the tables on page 28 and 29.

4. Use what you learn to inform your future work and support decision making.
Reflect on assessment findings
Review results from the Active Living and Healthy Eating assessments above and reflect on the following questions:

a. What stands out to you from the assessment results?

There is a stronger capacity for AL strategies in the City of Delaware compared to other communities in the county, within the Delaware Together Comp Plan there are a lot of strategies that relate to active living and HiAP but maybe lack of education/public knowledge or a strategic focus on HEAL where those strategies exist in the plan.

b. What, if anything, surprised you?

Comp plan indicates a goal to improve walkability of S. Sandusky St. and London Rd. Corridor, as well as goal/need to enhance the amenities in Ross Street/Unity Park. There are a lot of great goals outlined in comp plan. There are not a lot of CSA opportunities for the city residents, there is also a lack of funding and assistance for ATX improvements or for increasing healthy food options at corner stores or other local businesses. Finally, despite being a historically disadvantaged community, the 105.30 census tract isn’t prioritized as much as it could/should be.

c. What concerns you about the results?

Lots of great plans, but not much priority & dedicated funding from city for bike/ped and active transportation, despite having bike/ped master plan. Equity, Diversity & Inclusion- While goal C in comp plan addresses this, unsure of how it will be prioritized and implemented effectively. Additionally, pockets of Delaware City do not have easy access to fresh fruits and vegetables (105.30 tract can be considered a food desert), along the same lines there is an overlap of areas that do not have ample physical activity opportunities and access.

d. Where do you see opportunities to improve?

Have a public health representative attend and be included as part of the Parks & Recreation Advisory Board as well as the Parking and Safety Committee. Coordinate with nearby communities and their intentions.

Considerations for prioritizing strategies

Communities must consider multiple factors when deciding what PSE strategies to prioritize in their communities including: alignment with community priorities, existing partnerships, available resources, etc. Another consideration is whether to implement a new PSE change, or to build on/strengthen existing PSE by improving the quality and/or enforcement of existing efforts.

The questions in this section are designed to guide your community through the process of moving from assessment to action. Questions are organized around criteria that individuals working and living in communities may consider important for decision-making, including:

- Alignment with community priorities
- Momentum for change
- Existing community assets, strengths, resources
- Gaps in plans, policies, environment, or infrastructure
comprehensive plans to promote regional HE/AL goals. Help city grow their capacity for building partnerships with local nonprofits, and NGOs as well as engagement practices to get community support and buy-in. Specifically- expand FSG/Nutrition Standards to local restaurants, grow city support for DCHA activities to improve healthy food access, implement a bike share or bike library program. Improve downtown Delaware area to align with Smart Growth practices in being pedestrian focused, such reducing lanes & as bringing outdoor seating next to street with barrier. Work with Delaware City School District to update school travel plan and apply for SRTS funding. Advocate for the city to have a community liaison that is not a member of the police department that can attend and participate in community coalitions and implementation of projects.
List the HEAL strategies you are considering implementing

Write down a few of the HEAL strategies you are considering implementing below. Keep these strategies in mind when answering the questions on pages 23-27.

<table>
<thead>
<tr>
<th>HEAL Strategy List</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Active Living Strategies</strong></td>
<td><strong>Healthy Eating Strategies</strong></td>
</tr>
<tr>
<td>• New/Repaired Parks and Playgrounds</td>
<td>• Farmers’ Markets</td>
</tr>
<tr>
<td>• Worksite Active Commute Support</td>
<td>• Healthy Food Retail</td>
</tr>
<tr>
<td>• Bike Infrastructure</td>
<td>• Food Bank/Pantries</td>
</tr>
<tr>
<td>• Pedestrian infrastructure</td>
<td>• Community Gardens</td>
</tr>
<tr>
<td>• Public Transit Improvements</td>
<td>• Farm-to-Institution</td>
</tr>
<tr>
<td>• Multi-Use Trails</td>
<td>• Community Supported Agriculture (CSA)</td>
</tr>
<tr>
<td>• Safe Routes to School</td>
<td>• Safe Routes to Healthy Food</td>
</tr>
<tr>
<td>• Complete Streets Policy</td>
<td>• Produce Prescriptions</td>
</tr>
<tr>
<td>• Active Transportation Planning</td>
<td>• Food Service Guidelines</td>
</tr>
<tr>
<td>• Land Use Policy</td>
<td>• Food Access Policy &amp; Planning</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Candidate Active Living Strategies</th>
<th>Candidate Healthy Eating Strategies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bike &amp; Pedestrian Infrastructure</td>
<td>Farmers’ Markets (Vendor Acceptance &amp; Pop-ups in Southside of City)</td>
</tr>
<tr>
<td>Multi-use Trails</td>
<td>Food Service Guidelines (HER/SWAP at Pantries)</td>
</tr>
<tr>
<td>Safe Routes to Schools</td>
<td>Community Gardens (Coordinated Plan for all gardens)</td>
</tr>
<tr>
<td>New/Repaired Parks &amp; Playgrounds</td>
<td>Healthy Food Retail (Encouragement of new &amp; improvements in existing locations)</td>
</tr>
</tbody>
</table>
Alignment with community priorities

Aligning HEAL strategies with community priorities increases the chances of successful implementation. Communities are more likely to buy-in to and support the work when it reflects their priorities.

1. What are community priorities around active living and healthy living (see tips in sidebar for identifying priorities)?

   **Bicycle & Ped improvements & expansion of trail system, Lighting & Street safety, B.4.4 in the comp plan has pop-up retail support program, Grocery store & access to grocery store in South Delaware/2\textsuperscript{nd} Ward Community.**

   - **a.** How do you know these are community priorities? What evidence do you have to suggest that the HEAL strategies you are considering are community priorities?

     There has been some successful community engagement, but it is more on the inform level of the engagement spectrum with minimal consulting from the residents. Comprehensive plan has a methodology that included resident survey and feedback and open house discussion. DPHD CHA and the National BRFSS data show there is a high disproportionate experience of health outcomes for chronic diseases in the 105.30 census tract aka the 2\textsuperscript{nd} Ward community.

   - **b.** Whose voices were included in setting these priorities?

     As mentioned before the community engagement process could be improved, most priorities have had a good amount of stakeholder involvement in setting priorities but need more resident voice.

   - **c.** Do those voices include perspectives of populations disproportionately burdened by chronic disease and populations farthest from justice (e.g., people with low-income, people with disabilities, rural residents, youth, racial and/or ethnic minorities, Ohioans living in Appalachia, etc.).

     The comp planning process did include a mix of residents and community stakeholders in the steering committee. But not all projects have the same standards across the board for engagement with the public, for example, a recent open-house that was focused on getting community feedback for potential improvements along Pollock Road did not seem to be promoted effectively or include some of the residents in close proximity but not exactly along proposed route, when those people really need a safe bike/ped solution, ie: complexes on Stratford Rd or on the West side of S.Sandusky near Belle Ave & the Christian school.
Momentum for change

Where is there energy to create change? Where is there resistance? Think strategically about how to anticipate and take advantage of windows of opportunity for implementing specific HEAL strategies.

2. What windows of opportunity exist in your community to build on momentum of local, regional, statewide, or national activities and successes? (Examples: new policies, businesses, construction projects, newsworthy events, etc. that you could tag onto or that have advanced specific HEAL strategies)

Park Master Plan & City Comp Plan Implementation, new subdivision developments throughout city in different areas, federal infrastructure bill, many great long term partnerships that exist in the city, the city has employees that have technical skills compared to smaller communities throughout the county.

Consider these questions:

- How many people in positions of power to implement the PSE change currently support (or are likely to block) the change?
- Is there enough awareness and agreement among decision-makers that the issue you are trying to address is a problem?
- Is there awareness and agreement among decision-makers that the proposed PSE change is an effective solution to the problem?
- What additional education, data, or information might decision-makers need to understand PSE or the specific HEAL strategy of interest?

3. Who has power to change the policy/practice?

Elected city officials, other city employees at leadership level who make decisions on when and where to apply for funding and implement projects.

   a. How strong is their ability to create the change (see sidebar)?

   Strong- however there are differing views on priorities, as some elected officials are conservative & there may not be an understanding of PSE Change related to HEAL and how that promotes overall health & equity of the community.
Existing community assets, strengths, resources, partnerships

Approaching community change through an assets-based framework respects the existing human, social, and physical capital in communities. Implementing HEAL activities through an assets-based framework also promotes advancing health equity and creating sustainable change. Understanding the landscape of existing community assets may provide insight into community priorities and uncover opportunities for which there is positive momentum for change.

4. What are some of the community assets you could draw upon to implement HEAL strategies (see sidebar for ideas)?

There are lots of assets that can be utilized, Human Resources and lots of people with content knowledge & skills, there is also a good volunteer base & Connections Volunteer Center to help with connecting volunteers to projects, there are a lot of park and open spaces in the City of Delaware that can be used.

Tip: Identify community assets

Community resources can take various forms. Examples of community resources may include:

- A strong volunteer base
- Physical space and land (to hold meetings/events/equipment)
- Human resources (people with content expertise to provide technical assistance, volunteers, people with cultural knowledge/wisdom)
- Funding (e.g., local foundations)
- Farms and food
- Social relationships/social capital
- Trust

5. What community groups, coalitions, or other partners are already organizing to create change in the community? How can you support this existing work?

United Way led community coalitions: Hunger Alliance, Strengthening Families, Housing Alliance, DPHD led coalition, The Partnership, Sourcepoint & Age Friendly Initiative. We can help partners to develop strategic goals for HE & AL & facilitate community engagement such as through focus groups, surveys, and other data collection or community-based research projects. Mini-grant program could be utilized to help facilitate these goals, an example of which could be the Age Friendly Park Benches Initiative.

6. Where do you already have a cross-sector of partners in place to implement specific HEAL strategies? List them here.

See Q5 Above, the DPHD has many cross-sector partnerships. The need is to strategically align all partners goals & activities to prevent ‘reinventing the wheel’ or duplication of activities.
Gaps in plans, policies, environment, or infrastructure

Review the community assessment results to identify opportunities for addressing gaps in PSE change to support healthy eating and active living in the community. Questions to identify gaps are asked last because prioritizing activities from a deficit-based approach (starting with the gaps), without consideration of community priorities and community strengths and assets, not only decreases the chances of success, but may cause harm by exacerbating inequities and diverting resources away from what the community actually wants and needs. Thus, while understanding gaps in opportunities for healthy eating and active living is important for determining priorities, it should not be the only factor driving decisions.

For each of the HEAL strategies you are considering for implementation, consider both the status of and quality of implementation.

7. What is the status of implementation for the HEAL strategy in this community (refer to pages 8 and 14 for snapshots of community-wide planning documents)?

- [ ] Is included in a plan, but not yet implemented
- [x] Plans are in place to implement
- [x] Implementation in process
- [ ] Fully implemented
- [ ] Not planning to implement
- [ ] Other (specify) Would need to partner closely with Delaware City School District to update School Travel Plans for SRTS; Healthy Eating/Food activities are not in any plans

8. If implemented, what is the quality of the policy/practice?

- [ ] Poor: Unusable and/or inaccessible to residents in the community; not maintained
- [x] Fair: Usable and/or accessible to some residents in the community; somewhat maintained
- [ ] Good: Usable and/or accessible to most or all residents in the community; well maintained

9. If implemented, how is the policy/practice enforced or monitored?

While there are many projects being implemented throughout the city that relate to HEAL, there is not a well-defined process or procedure to evaluate and ensure that there is long-term sustainability of the efforts, that DPHD HEAL Team could identify.
10. Is the policy/practice implemented or enforced equitably across all neighborhoods in the community? If not, where are there gaps?

The 105.30 census tract is considered a historically disadvantaged community, it also has higher prevalence of chronic disease outcomes. However, there are other communities in the city that should be considered as well to ensure that historical practices do not continue. The area that is around the Conger Elementary School also should be given priority.

11. What populations in this community experience a disproportionate burden of chronic disease and/or lack access to opportunities for healthy living (e.g., live in food deserts, lack access to parks or fresh affordable produce, etc.)?

There are known areas within the City of Delaware that experience disproportionate burdens of chronic disease. Specifically the 105.30 as previously mentioned, additionally the 102.00 census tract should be considered as a priority: PLACES: Local Data for Better Health (arcgis.com)

The Delaware County CHA also has indicated that there is a need for assistance to the people in 18-30yr old age group as well as men in general.

   a. Does the policy/practice reach these populations? If so, how do you know?

It depends- some groups target these areas and specific populations and do a better job at identifying priority areas than others.
HEAL strategies selected for implementation

After reviewing and discussing responses to the questions above with your partners and members of the community, use the tables on the next two pages to document the HEAL strategies to prioritize. Add notes in the columns to document some of the key points you considered when selecting these strategies.
## Selected Active Living Strategies

### Community: City of Delaware, OH

List the strategy in first column and notes about the key points you considered when selecting these strategies in subsequent columns.

<table>
<thead>
<tr>
<th>Active Living Strategy</th>
<th>Alignment with community priorities</th>
<th>Momentum for change</th>
<th>Existing community assets, strengths, resources, partnerships</th>
<th>Gaps in plans, policies, environment, infrastructure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bike &amp; Pedestrian Improvements</td>
<td>Bike Ped Master Plan Exists, many ways to commute through the city without a car, people generally have a desire to live in a walkable neighborhood.</td>
<td>Community Interest, lots of new housing development &amp; interest to develop more mixed use housing/communities</td>
<td>MORPC Funding &amp; TA, ODOT Programs</td>
<td>Only one bike-fixit station, lack of wayfinding, old neighborhoods &amp; sidewalks &amp; lack of funding for improvements</td>
</tr>
<tr>
<td>Multi-Use Trails</td>
<td>Many Trails</td>
<td>New Construction is including paths in part of the development process</td>
<td>MORPC Funding &amp; TA, ODOT &amp; ODNR Programs, Preservation Parks, Delaware County Master Trail Plan</td>
<td>Need more wayfinding &amp; ways to build skills for the community to navigate the paths &amp; trails, places where the bike route is on street there needs to be better safety/dedicated lanes.</td>
</tr>
<tr>
<td>Safe Routes to Schools</td>
<td>Delaware residents desire to have safe &amp; walkable communities, Delaware Together Plan goals for family &amp; age friendly community</td>
<td>ODOT Changing SRTS Program may help with eligibility for capital improvements, DC School district levy &amp; has been doing capital improvements to many elm schools (Woodward, Conger)</td>
<td>Walk to School Day, Relationships exist between Delaware City School District &amp; DPHD, multiple schools (7 buildings total)</td>
<td>No current School Travel Plan</td>
</tr>
<tr>
<td>New/Repaired Parks &amp; Playgrounds</td>
<td>City Recently Completed Park Master Plan</td>
<td>City success with independently obtaining funds for implementing improvements (AARP grant), Growth of Park &amp; Rec Department Staffing &amp; Capabilities</td>
<td>The City Park &amp; Natural Resources Dept maintains over 20 Park/Open Spaces, New Master Plan, Recreation Programming going back to City management instead of contract with YMCA, 2nd Ward Community is beginning to be prioritized but efforts can be improved, money &amp; funding.</td>
<td></td>
</tr>
</tbody>
</table>
**Selected Healthy Eating Strategies**

List the strategy in first column and notes about the key points you considered when selecting these strategies in subsequent columns.

<table>
<thead>
<tr>
<th>Healthy Eating Strategy</th>
<th>Alignment with community priorities</th>
<th>Momentum for change</th>
<th>Existing community assets, strengths, resources, partnerships</th>
<th>Gaps in plans, policies, environment, infrastructure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Farmers' Markets</td>
<td>Comp plan talks about Downtown Delaware &amp; partnerships Main Street Delaware to create a welcoming &amp; vibrant downtown for all</td>
<td>Andrew's House SNAP &amp; FM has had success with increasing client participation from using text-messages</td>
<td>Hunger Alliance Partners, SNAP program already being implemented, WIC &amp; Senior Voucher programs</td>
<td>FM Location not accessible to all residents of Delaware, Limited market hours- used to be 2x a week and now only Saturdays, Not all vendors accept food/nutrition services.</td>
</tr>
<tr>
<td>Food Service Guidelines</td>
<td>Delaware County CHIP has goal to improve health food environments &amp; access to healthy food</td>
<td>DPHD HEAL Team beginning to work with food pantry partners to implement SWAP guidelines,</td>
<td>Hunger Alliance Partners, Food Pantry sites: LSS &amp; PIN among others, and other sites already working to implement</td>
<td>Lack of knowledge about nutritional guidelines &amp; hesitation to make changes, lack of infrastructure/funding to make change, need stronger relationships with private local businesses.</td>
</tr>
<tr>
<td>Community Gardens</td>
<td>Multiple exist, Delaware Master Gardeners interests in helping existing gardens</td>
<td>Success of implementing community gardens previously, City interest in ensuring there are multiple spaces available</td>
<td>Multiple gardens exist, Hunger Alliance Partners, Master Gardeners Association</td>
<td>Lack of coordinated programs through all of the available garden locations, unsure of accessibility of garden locations,</td>
</tr>
</tbody>
</table>