

LIVEWELL LONGMONT STRATEGY-LEVEL EVALUATION PLAN

Katie Bauer (3/10/2014)

THEME	STRATEGY NAME	INTERVENTIONS/STATUS	EVALUATION QUESTION	INDICATORS	DATA SOURCES/METHODS (from evaluation plan)	TIMELINE
School Health	1A: Partner, assist and provide tech assist within St Vrain Valley School District (SVVSD) to increase number of children who consume the recommended servings of fruit and vegetables each day	<ul style="list-style-type: none"> ● 27 schools have salad bars & 5 schools have Recess Before Lunch. ● Breakfast in the Classroom was implemented into 8 of the largest schools (70% or higher Free & Reduced). On average 95% of students at each school participate in Breakfast in the Classroom. ● According to the Nutrition Services Director, 500,000 pounds of Colorado grown produce was used in the 2012/13 school year in SVVSD school cafeterias and that number will be exceeded in 2013/14. ● SVVSD is also meeting the Healthy Beverage Policy and Smart Snack Regulations. ● 2 more salad bars potentially being added in next school year 2014/15. 	<ul style="list-style-type: none"> ● How much more produce is being consumed as a result of adding a salad bar? ● How much of the fruits and vegetables served were wasted? 	Salad bar implementation	<p>1. Plate waste study. Will collect the weight of produce that is thrown away for plate waste. Currently have data for Blue Mountain and Rocky Mountain Schools. In Spring 2013/14 will conduct the plate waste study in 2 more elementary schools that have salad bars and high free and reduced lunch percentages. Schools to assess are TBD.</p> <p>2. Salad Bar Observation. Will do quantitative salad bar evaluation in 2 elementary, 2 middle and 2 high schools tracking quantity of fruits and vegetables taken and amounts left after lunch period. Change is measured by looking at how much fruits and vegetables were taken, and since there wasn't a salad bar before, the % change in consumption is from 0% to X% after installation.</p> <p>3. Will collect some qualitative data from high school students. <i>TBD: Intercepts? Structured or open-ended interviews? # of students? Written open-ended comments?</i></p>	Data collected Yearly in the Spring, reported in Summer

Work-site Well-ness	2A: Facilitate adoption of a comprehensive worksite wellness program utilizing WELCOA principles in Longmont.	<ul style="list-style-type: none"> • 5,640 employees have been reached in 2013, and 8,253 overall between 2009-2013. • Longmont United Hospital (LUH) and City of Longmont (COL) are seeing significant decreases in BMI and LUH has seen significant increases in healthy eating and active living behavior. • Activities have included: Rogers River Run (5K run), Maintain Don't Gain challenge across 3 organizations, Food Day Healthy Food Drive, Turkey Trot (10K and 2 mile run/walk), Healthy hour quarterly education and networking event presented in collaboration with Longmont Area Chamber of Commerce, the North CO Worksite Wellness Workshop, the COL bike share program, COL challenges/events/classes (Bicycle Challenges, Flat 14ers, 4 City Frenzy, What color is your food?, Paint Feb Red, Your Goals Challenge, Healthy eating single classes and series classes, stress management, Exercise single classes and series, and Zumba event) and those at LUH who have access to the gym and other programming at the hospital. 	<ul style="list-style-type: none"> • To what extent are employees increasing physical activity (PA) as a result of worksite wellness interventions? • To what extent are employees eating healthier as a result of worksite wellness interventions? 	<ol style="list-style-type: none"> 1. Change in BMI 2. Increase in PA and in numbers of fruits and vegetables consumed for employees 	<ol style="list-style-type: none"> 1. BMI – (baseline data is from 2009, f/u 2010-11 and 2012-13) <u>COL</u> – Will use actual Biometric data collected <u>LUH</u> – they collect BMI in house. <u>SVVSD</u> – collecting Biometrics in April and Health Assessment in May through Cigna and KP. 2. Evaluations per program – <u>COL</u> does a year summary through Total Health Assessment and have 3 years of data. <u>LUH</u> - Personal Health Assessment and Health Ambitions. <u>SVVSD</u> – Will wait to see which programs are implemented that we can evaluate. Might get data through total health assessment. 3. LUH just did a new year’s resolution program. Highest participation they’ve had at any program. 4. SVVSD is starting weight watchers. Have over 300 people signed up. 	<ol style="list-style-type: none"> 1. <u>COL</u> – Collect in Sept; report in Dec <u>LUH</u> – Collect in Oct, report in March 2014 <u>SVVSD</u> – Collect in April, report in Sept 2. <u>COL</u> – The data and program results reported yearly in January. <u>LUH</u> – check in quarterly. <u>SVVSD</u> – Check in quarterly on program data. Data collected in May, reported in Oct.
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Safe Routes to School (SRTS)	2B: Build upon the Safe Routes to Schools CDOT Grant	<ul style="list-style-type: none"> 8,849 students have been reached thus far with walk and roll events and other programs at 17 schools in the St. Vrain School District. Environmental changes that have occurred: widened sidewalks at Blue Mountain, 70 bike racks installed across 11 schools, and a multi use path was built at Erie. We have Spring data from 2013. And 6 years of other data in the past. Have had 3 CDOT SRTS grants and they have some data Application to CDOT for 2nd round of funding – identified schools involved in SRTS (7 at that time). No evaluation data from back then. 	<ul style="list-style-type: none"> To what extent is there an increase in students that walk, roll or bike to school over the course of the year and compared to previous years? To what extent is there an increase in schools that participate in SRTS events, programs or policies? 	<ol style="list-style-type: none"> Increase in number of students walking, rolling or biking to school. Increase in number of schools participating in SRTS 	<ol style="list-style-type: none"> Teacher tallies for 8 schools. Indicators necessary (others can be tracked too if you have interest): # of students in each class that tallies are taken, number who walked, biked or rolled to school that day (collected on a day without SRTS events happening). Bike rack data - # of new bike racks, # of bikes each holds, and which schools they're installed at. If possible, observation data, 1 day in Spring to get # of kids at each school's bike racks. Needs and interest survey sent to principals 	<ol style="list-style-type: none"> and 2. Collect in Spring and report to KP yearly in August (pending receive CDOT funding)
Recess / Classroom/ After School Physical Activity (PA)	2D Partner, assist and provide technical assistance within SVVSD to increase the amount of physical activity in schools	<ul style="list-style-type: none"> PE is available to all students in the district. Overall strength is low at 1.1%: Results indicated that elementary school students increased PA by 1.3%, middle school students by 4.9% and high school students showed no change in minutes PA from 2012-2013. For the 24,295 students reached in LWL, the SOFIT strategy has resulted in a 1.1% increase in physical activity. This translates to a 1.01% dose in school wellness. 	<ul style="list-style-type: none"> To what extent are students increasing PA a result of classroom PA breaks? How are required 10 minutes of PA spent in the classroom? To what extent are students increasing PA as a result of PE class? 	<ol style="list-style-type: none"> Increase in PA as a result of classroom PA breaks Increase PA as a result of the PE quality improvement grant (plans for PE Quality Improvement grant were finalized in May 2012). 	<ol style="list-style-type: none"> PA break data – Only have PA break data for Red Hawk at this point. School requires that 2, 20 minute blocks of PA occur in the classroom before Science and Math. Including PA breaks and PE, kids at this school are getting 55-105 minutes of PA per day which is 35-40 minutes extra PA beyond recess and PE class. Report any additional PA at other schools for this indicator. New Colorado Health Foundation Grant will fund getting PA breaks in all schools. SoFit evaluation tool – pre/post in all schools in SVVSD except Casa de la Esperanza. Initial SoFit Assessments conducted at 13 schools from 1/2012-5/2012. (Elementary Schools (5): Blue Mountain, Eagle Crest, Indian Peaks, Rocky Mountain, Timberline; Middle Schools (4): Erie, Sunset, Timberline, Westview; High Schools (4): Longmont, Niwot, Silver Creek, Skyline. Sofit tool – randomly drop by schools to measure moderate to vigorous PA in schools. Trying to figure out whether the PA 	<ol style="list-style-type: none"> Collected yearly in April/May and reported in July 2012, 2013 and 2014 SOFIT evaluation is ending after 2013/14 school year. Implementation will be in year 3 (2014). Post intervention measured in 2013/14 and will compare to

				<p>standards they implemented through CO comprehensive health and PE standards are showing improvements in PA.</p> <p>3. WELNET Assessment Tool – All district PE teachers will have access to the internet-based software. Pedometer results will be logged in the Behavior Module.</p> <p>4. Obtain information about what the curriculum changes were pre grant and post, so we can try to estimate the minimum (and avg) amount of PA before and after implementation. Elena is creating a PE director questionnaire to assess what changes have happened in PE pre and post.</p>	2011/12 baseline.
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