

**Colorado Maternal and Child Health Local Action Plan (updated 3/4/2016)**

<b>MCH Priority:</b> Early Childhood Obesity Prevention		<b>Planning Period (MM/YY - MM/YY):</b>	10/1/16 - 9/30/18
<b>Local Agency Name:</b>		<b>Priority Lead</b>	<b>Priority Lead Email:</b>
<b>Overview:</b>	Early Childhood Obesity Prevention is a 2016-2020 MCH priority in Colorado. The MCH priority profile on Early Childhood Obesity Prevention includes key information on the issue and priority effort. (See <a href="http:// TBD">http:// TBD</a> ). This action plan describes how the [LPHA name] will address Early Childhood Obesity Prevention at the local level.		

<b>Goal 1:</b>	Increase the percent of infants who are ever breastfed and infants breastfed exclusively through 6 months of age in <county/counties> from <percent> and <percent>, respectively to <percent> and <percent> by 2020.	<b>Data Source:</b> WIC county/agency breastfeeding data	
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<b>Strategy:</b>	Provide technical assistance and coaching to increase breastfeeding promotion and support to families in early care and education and workplace settings.
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<b>Objective A: REQUIRED</b>	Increase from a baseline of 0 to 100 the percent of local child care center directors who are aware of breastfeeding-friendly child care resources (i.e., the Colorado Breastfeeding in Child Care toolkit and training opportunities) by 2018 and increase the number of centers that have breastfeeding policies from X% to X% (must be a value greater than 20%) by 2020.	<b>Data Source:</b> CDPHE baseline assessment tool	<b>Target</b>	<b>12/30/15</b>	<b>3/30/16</b>	<b>6/30/16</b>	<b>9/30/16</b>

<b>Key Activities</b>	<b>Start and End Date (MM/YY - MM/YY)</b>	<b>Responsible Persons or Group</b>	<b>Progress Status (c, o, b, n)</b>			
			<b>12/30/15</b>	<b>3/30/16</b>	<b>6/30/16</b>	<b>9/30/16</b>

<p>Identify and engage partners to form a work group to reach consensus on a dissemination and technical assistance plan to support child care providers in improving skills, knowledge, attitudes and practices to support breastfed infants and children in child care. Partners may include, but not be limited to: Nurse Family Partnership, MCH nurses/consultants, child health nurse consultants, early childhood education partners/councils, early childhood centers, local Resource and Referral agencies, local child care associations, child care center sponsors, local breastfeeding coalition, licensing specialists, regulatory agencies for health and sanitation, WIC staff, and health care providers and staff.</p>	<p>10/01/2016 - 12/31/2016</p>		c	n	o	b
<p>Identify targeted child care center providers. Providers include licensed providers, unlicensed providers (optional), home based child care providers (optional) and Family, Friends and Neighbors (FFN) providers (optional).</p>	<p>10/01/2016 - 01/31/2017 (and ongoing)</p>					
<p>Disseminate online CDPHE toolkit (available winter 2016) to identified child care providers. Ensure and document receipt of email notification of online CDPHE toolkit to identified child care providers. Confirmation of receipt may include phone call, email, or in person visit. Engage partner work group to decide the best approach for each targeted audience (group/provider).</p>	<p>12/01/2016 - 03/31/17 (and ongoing)</p>					

Engage partner work group to determine training/technical assistance approach/method. Assess providers for interest and type of technical assistance and training (resources/tool from CDPHE). Examples include, but not limited to, online training, webinars, modules, presentations (PowerPoint or other), in person training, and one-on-one training.	01/01/2017 - 03/31/17				
Create a plan with data measurements to execute training/technical assistance.	01/01/2017 - 06/30/2017				
Engage partner work group to determine which providers/centers/groups receive training or technical assistance. Training could be directed at individual child care providers/teachers, room supervisors, directors/assistant directors, child care sponsor organizations, etc.	01/01/2017 - 06/30/2017 (and ongoing)				
Offer training/technical assistance or coaching to selected child care providers using CDPHE toolkit and selected resources.	01/01/2017 - 12/31/2017 (and ongoing)				
Disseminate pre/post-training/technical assistance tool (provided by CDPHE) to selected child care providers to measure knowledge gain, attitude and practice changes as a result of the training/technical assistance provided. Report	01/01/2017 - 12/31/2017 (and ongoing)				
Follow up with selected child care providers who received training/technical assistance to evaluate implementation of breastfeeding-friendly policies and practices and assess sustainability.	01/01/2017 - 09/30/2018				

Engage work group to determine sustainability of program. Investigate use of local child care health inspectors, and others to monitor compliance, policies, practices, etc. Assess need for ongoing training, breastfeeding-friendly center recognition. Document next steps.	01/01/2017 - 09/30/2018					
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Objective B: OPTIONAL	Increase the percent of targeted local businesses/employers that are aware of the workplace accommodation for nursing mother laws and adopt and implement policies in these areas to greater than 50% by 2018.	Data Source:	CDPHE baseline assessment tool	Target	12/30/15	3/30/16	6/30/16	9/30/16
Key Activities	Start and End Date (MM/YY - MM/YY)	Responsible Persons or Group	Progress Status (c, o, b, n)					
			12/30/15	3/30/16	6/30/16	9/30/16		
Identify and engage partners to form a work group to implement work and find targeted businesses/employers in the community. Partners may include, but not be limited to: staffs of county services, local business bureau or chamber of commerce, and employer groups; staff of local WIC Program, MCH Programs, school districts and/or other large employer (e.g., community college), early childhood centers; local breastfeeding coalition members, licensing specialists, health inspectors, and hospital/health care providers and staff, and 1-2 employers who provide best practice breastfeeding accommodation.	10/01/2016 - 12/31/2016							

Evaluate available tools (including CDPHE tool) to assess businesses/employers' compliance with Colorado's Workplace Accommodation for Nursing Mother's Act and adapt to meet local programming.	10/01/2016 - 12/31/2016					
Engage work group to determine targeted businesses/employers. Recommend targetting own public health agency and/or city and county government buildings if not in compliance.	10/01/2016 - 03/31/17 (and ongoing)					
Engage work group to coordinate activities with other family friendly business groups in your community, if they exist.	ongoing					
Contact targeted businesses/employers, provide information on workplace lactation accommodation and assess current workplace lactation policies and practices. If policies exist, if possible, contact employees as well to determine if employees are aware of policies and if policies have been properly implemented.	10/01/2016 - 12/31/2017 (and ongoing)					
Evaluate businesses'/employers' needs for technical assistance and training.	10/01/2016 - 12/31/2017 (and					
Engage work group to determine training/technical assistance approach/methods. Examples include, but not limited to, online training, webinars, modules, presentations (PowerPoint or other), group trainings, in person training, and one-on-one training.	10/01/2016 - 01/31/2017					

Create a plan with data measurements to execute training/technical assistance. (Resources available at CDPHE)		10/01/2016 - 01/31/2017				
Offer training/technical assistance or coaching to selected businesses/employers.		01/01/2017 - 12/31/17 (and				
Disseminate pre/post-evaluation tool (provided by CDPHE) to selected businesses/employers to measure policy and practice changes as a result of the training provided. Report evaluation results to CDPHE.		01/01/2017 - 12/31/17 (and ongoing)				
Follow up with selected businesses/employers that received training/technical assistance to evaluate implementation of breastfeeding-friendly policies and practices and assess sustainability.		01/01/2017 - 09/30/2018				
Engage work group to determine sustainability of program. Investigate use of local breastfeeding coalition, business groups, health inspectors, etc. to monitor compliance, policies, practices, etc. Assess need for ongoing training and recognition program. Document next steps.		01/01/2017 - 09/30/2018				
<b>Goal 2:</b>	Increase the number of child care providers/centers in <geographical region/community> who engage children in teacher-led physical activity as a part of daily curriculum from <baseline count>to <goal count/> by 2018 as measured by CDPHE post-intervention surveys.	<b>Data Source:</b>	CDPHE baseline and post-intervention tools			

<b>Strategy:</b>	Provide technical assistance and coaching to select early care and education settings to implement and integrate physical activity and healthier meals into center practice and/or policy.							
<b>Objective A: RERQUIRED</b>	Increase the number of child care centers who participate in training and/or receive coaching on integrating structured physical activity in their curriculum in <geographical region/community, if applicable> from X number to X number by 2018 as measured by documentation of trainings and visits.	<b>Data Source:</b>	CDPHE baseline and post-intervention tools	<b>Target</b>	12/30/ 15	3/30/1 6	6/30/1 6	9/30/ 16
<b>Key Activities</b>	<b>Start and End Date (MM/YY - MM/YY)</b>	<b>Responsible Persons or Group</b>			<b>Progress Status (c, o, b, n)</b>			
					12/30/ 15	3/30/1 6	6/30/1 6	9/30/ 16
(if new to priority) In partnership with CDPHE connect with state and local early childhood networks to begin learning about early childhood obesity prevention work in the child care settings. Examples of networks include: Division of child care licensing, Healthy Child Care Colorado, local Early Childhood Council, regulatory agencies for health and sanitation, Qualistar, local Head Start programs, the Child and Adult Care Food Program, local Resource and Referral agencies and local child care associations.	10/01/2016 - 12/31/2016							

<p>Identify community-based partners or LPHA staff member(s) interested in and willing to expand their expertise to include physical activity coaching with child care center staff. Preferably these people already interface or have experience with the child care community. Examples of potential partners are child health nurse consultants, early childhood council staff, licensing specialists, Qualistar coaches, health inspectors, resource &amp; referral agency staff, or early childhood educators.</p>	<p>10/01/2016 - 12/31/2016</p>					
<p>Identify and register physical activity coaches to attend an "I am moving, I am learning" training (typically 5-6 hours long).</p>	<p>10/01/2016 - 12/31/2016</p>					
<p>Convene a workgroup of the partners to plan implementation of the strategy. Share with partners CDPHE tools and resources for use with assessing, promoting, engaging and coaching child care provider in enhancing structured physical activity in centers.</p>	<p>11/01/2016 - 9/30/2018</p>					
<p>LPHA and/or partner coach performs a baseline assessment with each targeted child care center staffs (representing multiple role, if possible) to assess physical activity knowledge, skills, practices, and integration in center. (Baseline assessment tool available from CDPHE)</p>	<p>1/1/2017 - 1/1/2018</p>					

LPHA and/or partner staff work collaboratively with center staff to establish desired and reasonable goals based on the baseline assessment results, and develop a plan to improve integration of structured physical activity into lesson plans, curriculum and policy. (The # of centers targetted will depend on LPHA FTE and on center's # of classrooms and institution type, e.g., district vs head start vs private.)	1/1/2017 - 1/1/2018					
LPHA and/or partner coaches participate with other coaches statewide on conference calls to network and share best practices.	10/1/2016 - 9/30/2018					
Engage with CDPHE on technical assistance and/or shared learning focused on community engagement in support of MCH work.	10/1/2016 - 9/30/2018					
LPHA and/or partner coaches provide coaching to include a minimum of three on-site visits a year to provide follow up ideas, activity modeling, technical assistance for integration and parent engagement, portable equipment (as available), etc., to address each center's unique challenges.	11/01/16 - 1/1/2018					
LPHA and/or partner coaches facilitate a post-intervention assessment tool (provided by CDPHE) to assess physical activity knowledge, skills, practices and integration in center to draw conclusions about changes in structured physical activity practice, skills, and knowledge.	11/01/16 - 1/1/2018					

	Increase the number of child care centers who receive training		Local training records and Let's	Target	12/30/15	3/30/16	6/30/16	9/30/16
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	<p>increase the number of child care centers that receive training and/or coaching on core areas of healthy eating, responsive feeding, healthy sleep practices and/or limited screen time policies in &lt;geographical region/community&gt; from X number to X number by 2018 as measured by documentation of trainings and coaching.</p>	<p><b>Data Source:</b></p>	<p>Move Child Care online assessment and quiz or other locally used evidence-based tool</p>					
Key Activities	Start and End Date (MM/YY - MM/YY)	Responsible Persons or Group	Progress Status (c, o, b, n)					
			12/30/15	3/30/16	6/30/16	9/30/16		
<p>Use partnerships established in Objective A to identify community-based partners or LPHA staff member(s) interested in and willing to expand their expertise to include coaching on core areas of healthy eating, responsive feeding, healthy sleep practices and/or limited screen time policies coaching with child care center staff. Preferably these people already interface or have experience with the child care community and will be the coaches selected for Objective A.</p>	<p>10/01/2016 - 12/31/2016</p>							
<p>Review resources, such as Let's Move Child Care, NAPSACC, Caring our Children, Colorado Child and Adult Care Food Healthier Meals Initiative, to determine the best fit for your community. Consider which programs are being used by other community partners or child care centers, and which offers accessible training and resources to meet the community providers' needs and abilities.</p>	<p>10/01/2016 - 12/31/2016</p>							

<p>Convene a workgroup of the partners to plan implementation of the strategy. Share with partners CDPHE tools and resources for use with assessing, promoting, engaging and coaching child care provider in enhancing the selected core areas in centers.</p>	<p>10/01/2016 - 9/30/2018</p>					
<p>LPHA and/or partner coach performs a baseline assessment with each targeted child care center staffs (representing multiple roles, if possible) to assess healthy eating, responsive feeding, healthy sleep practices and/or limited screen time knowledge, skills, practices, and integration in center. (Baseline assessment tool from selected resource, e.g., Let's Move Child Care.)</p>	<p>1/1/2017 - 9/30/2018</p>					
<p>LPHA and/or partner staff work collaboratively with center staff to establish desired and reasonable goals based on the baseline assessment results, and a plan to improve integration of core areas in to lesson plans, curriucum and policy.</p>	<p>1/1/2017 - 9/30/2018</p>					
<p>LPHA and/or partner coaches provide coaching in the form of a minimum of three visits a year to provide follow up ideas, CACFP outreach, techncial assitance for preparing safe and healthy food, responsive feeding, etc, parent engagement, provide equipment support, etc., to address each center's unique challenges.</p>	<p>1/1/2017 - 9/30/2018</p>					

LPHA and/or partner coaches facilitate a post-intervention assessment tool using the same resource (e.g., Let's Move Child Care) applied for baseline information to assess core area knowledge, skills, practices, and integration in center to draw conclusions about changes in practice, skills, and knowledge.		10/1/2017 - 9/30/2018						
<b>Strategy 3:</b>	Implement cross-sector use of consistent ECOP healthy weight messaging, 9 Ways to Grow Healthy Colorado Kids, alone or in alignment with other messaging such as 5-2-1-0 or Let's Move, among community providers in primary care, child care and public health settings, and other community organizations.							
<b>Objective A: REQUIRED</b>	Increase the number of target community-based providers and organizations that promote ECOP messages in <geographical region/community> from X number to X number by 2018 as measured by local surveys.	<b>Data Source:</b>	CDPHE electronic survey and CDPHE LPHA shared outreach tracking document	<b>Target</b>	<b>12/30/15</b>	<b>3/30/16</b>	<b>6/30/16</b>	<b>9/30/16</b>
<b>Key Activities</b>	<b>Start and End Date (MM/YY - MM/YY)</b>	<b>Responsible Persons or Group</b>			<b>Progress Status (c, o, b, n)</b>			
					<b>12/30/15</b>	<b>3/30/16</b>	<b>6/30/16</b>	<b>9/30/16</b>

<p>Explore healthy weight data and messaging in the community: gather WIC agency or county -specific overweight/obesity data on children aged 2 through 4 year old; watch the webinar, Speak with one voice: 9 Ways to Grow Healthy Colorado Kids!; identify a couple inconsistent healthy lifestyle messages consumers receive in your community; and identify potential benefits for the community with consistent healthy weight messaging.</p>	<p>10/1/2016 - 12/1/2016</p>					
<p>Develop and engage community-based partners from two or more sectors (e.g., child care, public health, primary care, libraries, recreation) to participate on a work group to develop a plan to disseminate healthy weight messaging throughout the community. Engage partners using tools such as the Speak with one voice webinar or the poster presentation, and local data to illustrate a need in your community.</p>	<p>10/1/2016 - 12/1/2016</p>					

<p>Engage work group to develop a messaging dissemination goal and plan to include: the proposed number and target audience (child care providers, health care providers, public health providers, recreation centers, libraries, churches, grocery stores, county services, etc.), a timeline, identify who will reach out to audience and how (e.g. a paced rollout of messages to align with local, state and national campaigns; several at a time; all at once); in alignment with other healthy messaging initiatives actively present in the community. Consider the methods (e.g., social media, newsletters, presentations, print materials) you will use to reach audiences. Consider how you will know you are successful and develop or use CDPHE evaluation tool/plan to measure. Consider the challenges you might experience and how you can plan for those (e.g., conflicting messages from other community providers).</p>	<p>10/1/2016 - 12/1/2016</p>					
<p>Communicate the plan with partners, consider a shared tracking document to document reach and avoid duplication of outreach efforts, and acquire materials.</p>	<p>12/1/2016 - 3/1/2017</p>					
<p>Implement dissemination plan documenting individuals and organizations receiving the materials along with their plans for dissemination (e.g., posters and #handouts provided to a primary care clinic to be given to prenatal patients).</p>	<p>2/1/2017 - 3/1/2017</p>					
<p>Implement evaluation plan (use or adapt CDPHE tools) and report findings to partners.</p>	<p>3/1/2017 - 6/1/2017</p>					

Continue to refresh the promotion of messages (such as at health fairs, educational sessions) integrating with annual campaigns (e.g., world breastfeeding month, TV turnoff week).	6/1/2017 - 6/30/2018					
Implement evaluation of message dissemination effort at a minimum of once a year.	7/1/2018 - 9/30/2018					