

KEYS 4 HealthyKids

CASE REPORT

CHARLESTON, WEST VIRGINIA

Evaluation of the Healthy Kids, Healthy Communities National Program

December 2009 to December 2013



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BACKGROUND

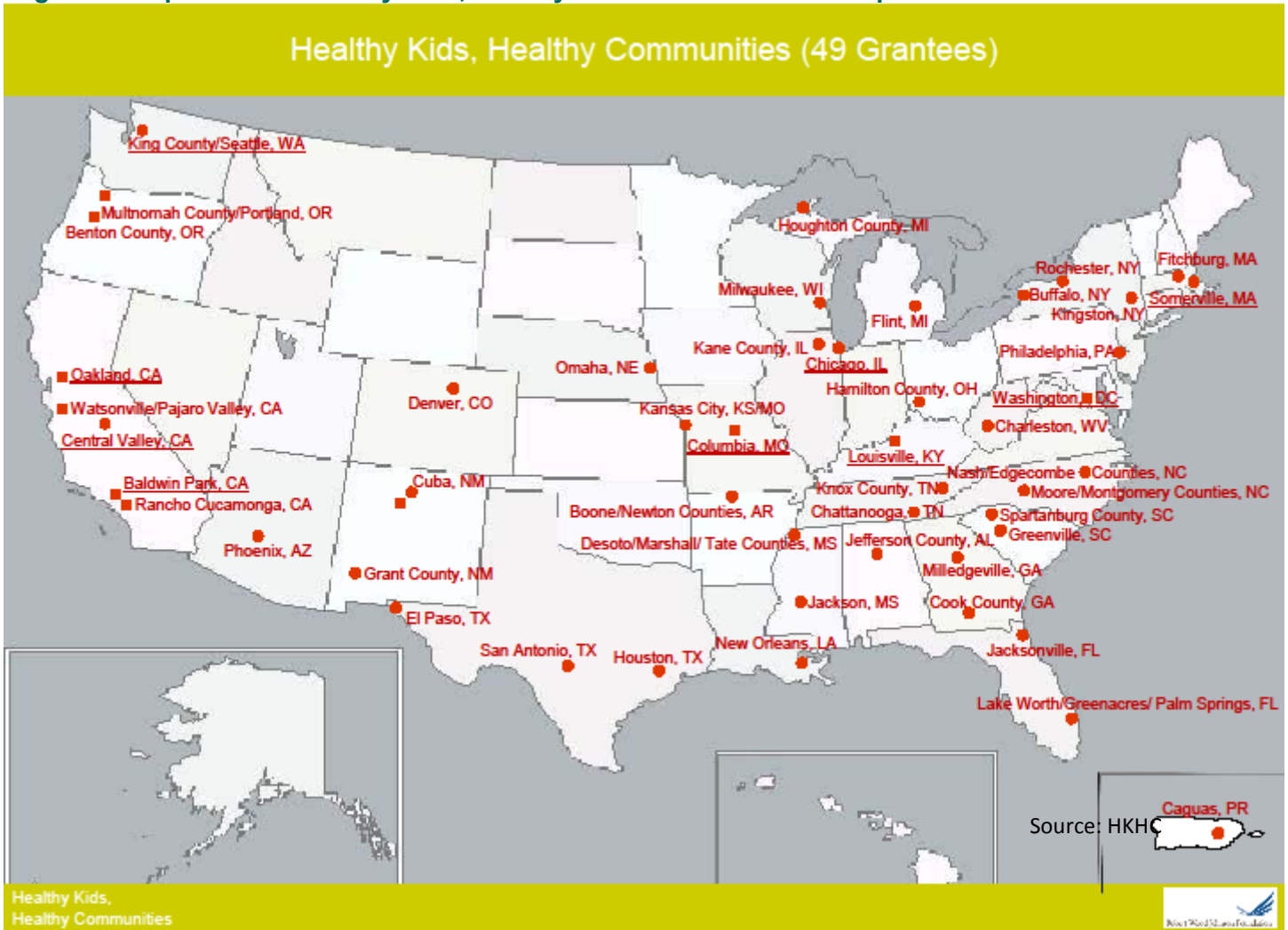
Healthy Kids, Healthy Communities National Program

With the goal of preventing childhood obesity, the Healthy Kids, Healthy Communities (HKHC) national program, funded by the Robert Wood Johnson Foundation (RWJF), provided grants to 49 community partnerships across the United States (Figure 1). Healthy eating and active living policy, system, and environmental changes were implemented to support healthier communities for children and families. The program placed special emphasis on reaching children at highest risk for obesity on the basis of race, ethnicity, income, or geographic location.¹

Project Officers from the HKHC National Program Office assisted community partnerships in creating and implementing annual workplans organized by goals, tactics, activities, and benchmarks. Through site visits and monthly conference calls, community partnerships also received guidance on developing and maintaining local partnerships, conducting assessments, implementing strategies, and disseminating and sustaining their local initiatives. Additional opportunities supplemented the one-on-one guidance from Project Officers, including peer engagement through annual conferences and a program website, communications training and support, and specialized technical assistance (e.g., health law and policy).

For more about the national program and grantees, visit www.healthykidshealthycommunities.org.

Figure 1: Map of the 49 Healthy Kids, Healthy Communities Partnerships



Evaluation of Healthy Kids, Healthy Communities

Transtria LLC and Washington University Institute for Public Health received funding from the Robert Wood Johnson Foundation to evaluate the HKHC national program. They tracked plans, processes, strategies, and results related to active living and healthy eating policy, system, and environmental changes as well as

influences associated with partnership and community capacity and broader social determinants of health. Reported “actions,” or steps taken by community partnerships to advance their goals, tactics, activities, or benchmarks from their workplans, formed community progress reports tracked through the HKHC Community Dashboard program website. This website included various functions, such as social networking, progress reporting, and tools and resources to maintain a steady flow of users over time and increase peer engagement across communities.

In addition to action reporting, evaluators collaborated with community partners to conduct individual and group interviews with partners and community representatives, environmental audits and direct observations in specific project areas (where applicable), and group model building sessions. Data from an online survey, photos, community annual reports, and existing surveillance systems (e.g., U.S. census) supplemented information collected alongside the community partnerships.

For more about the evaluation, visit www.transtria.com/hkhc.

KEYS 4 HealthyKids

In December 2009, KEYS 4 HealthyKids partnership received a four-year, \$360,000 grant as part of the HKHC national program. Charleston Area Medical Center Health Education and Research Institute (CAMC Institute) was the lead agency for the HKHC grant. The partnership focused on increasing access to fresh and affordable foods and increasing physical activity opportunities within Charleston’s East End and West Side neighborhoods. The partnership’s reach expanded throughout Kanawha County and the surrounding nine counties in later years of HKHC funding.

The partnership and capacity building strategies of the partnership also included:

- **KEYS Youth Council:** KEYS 4 HealthyKids collaborated with the local YMCA to form the KEYS Youth Council in 2010. The council focused on childhood obesity prevention and advocacy and was comprised of middle school students from Kanawha County.
- **Community Action Toolkit:** The partnership created a KEYS 4 HealthyKids Toolkit to guide participating communities and organizations’ efforts in implementing policy and environmental change. KEYS offered technical assistance and developed a Peer Learning Network to provide ongoing support.

See Appendix A: KEYS 4 HealthyKids Evaluation Logic Model and Appendix B: Partnership and Community Capacity Survey Results for additional information.

Along with partnership and capacity building strategies, the KEYS 4 HealthyKids partnership incorporated assessment and community engagement activities to support the partnership and the healthy eating and active living strategies. The healthy eating and active living strategies of KEYS 4 HealthyKids included:

- **Child Care Nutrition and Physical Activity Standards:** KEYS 4 HealthyKids partnered with 18 child care centers to improve nutrition and physical activity standards in child care settings. Eighteen centers participated to improve standards using the Nutrition and Physical Activity Self-Assessment for Child Care Centers (NAP SACC) tool.
- **Parks and Play Spaces:** The partnership successfully advocated for and supported implementation of new parks and play spaces and modifications to existing ones. Many of the repairs and park improvements were a result of the Youth Council’s advocacy and involvement with the Charleston City Council Parks and Recreation Committee and the Parks and Recreation Department.
- **City Comprehensive Planning:** Partnership staff provided extensive input into the City of Charleston’s new comprehensive plan, *Imagine Charleston*. Adopted in 2013, *Imagine Charleston* was the first Charleston comprehensive plan to incorporate a health section that included healthy eating and active living. Policies recommended by KEYS and adopted into the final plan included access to healthy, affordable food, and access to places for families and children to be active.
- **Access to Healthy Food:** KEYS collaborated with community members, schools, and child care centers to improve access to healthy and affordable food in a wide variety of areas including farmers’ markets, food pantries, community gardens, and school and youth gardens.

COMMUNITY DEMOGRAPHICS

The capital city of Charleston, West Virginia is the most populated city in the state with a population of 51,400. Charleston is the county seat of Kanawha County, with a population of 193,063.² Many of the residents in the surrounding county and region commute to Charleston daily, doubling its population during the work day (Figure 2).

The KEYS 4 HealthyKids partnership focused on two low-income neighborhoods within Charleston: East End and West Side (see Table 1). These neighborhoods were targeted because of their similar disparities and current neighborhood revitalization efforts. Both neighborhoods lacked safe places to play and access to affordable, healthy food. The partnership initially focused its efforts around two elementary schools in these neighborhoods:

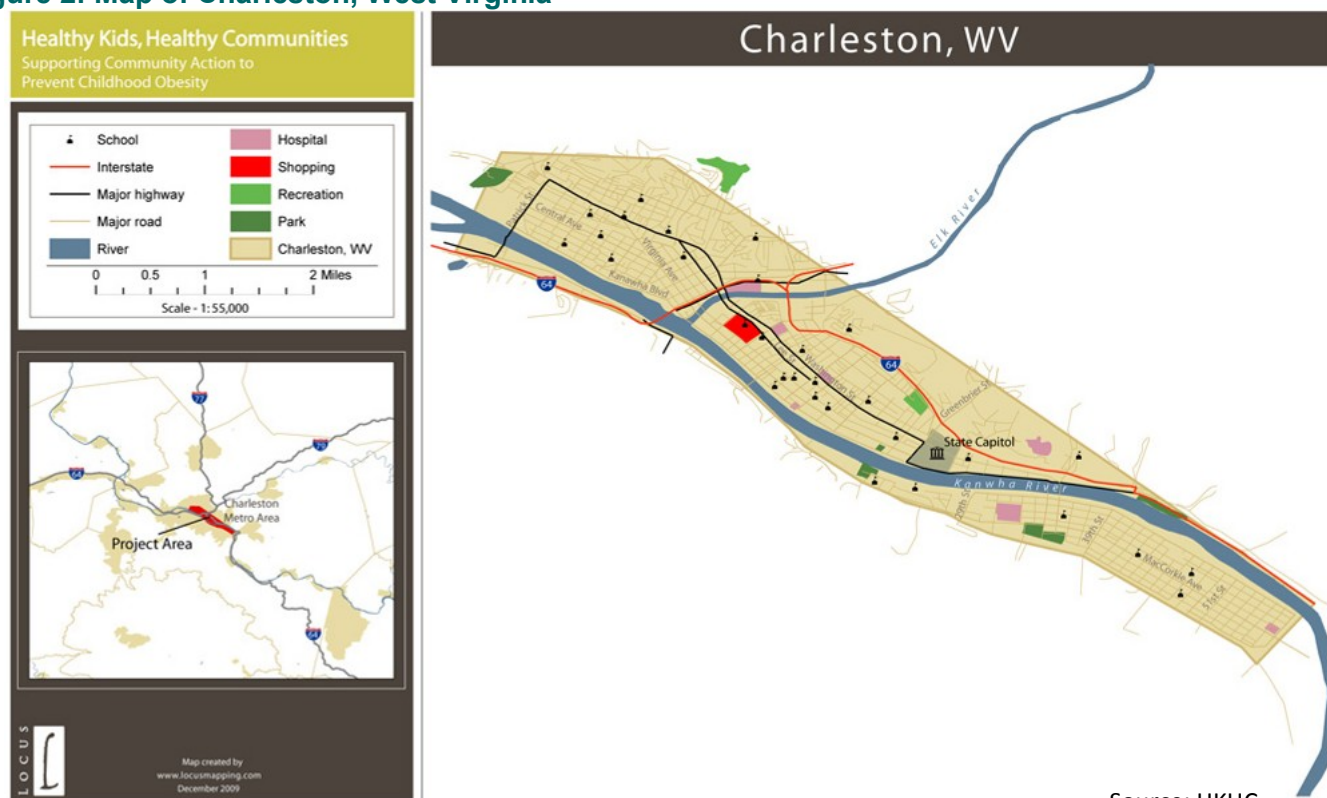
- Piedmont Elementary³ was home to 376 students, 80% of whom participate in the free and reduced-price lunch program.
- West Side Elementary⁴ was home to 409 students, 97% of whom participate in the free and reduced-price lunch program.

Starting in 2012, the partnership expanded its efforts to additional Charleston neighborhoods and communities throughout Kanawha County and nine surrounding counties.

Table 1: Charleston, West Virginia Area Demographics

	Population	African American	Hispanic/Latino (of any race)	White	Poverty Rate	Per Capita Income	Median Household Income
Charleston	51,400 ⁵	15.5% ⁵	1.4% ⁵	78.4% ⁵	16.4% ⁶	\$35,191 ⁶	\$46,004 ⁶
Kanawha County	193,063 ⁵	7.3% ⁵	.99% ⁵	89.1% ⁵	14.1% ⁶	\$26,790 ⁶	\$44,265 ⁶

Figure 2: Map of Charleston, West Virginia⁶



INFLUENCE OF SOCIAL DETERMINANTS

Access to Food

There are no grocery stores in the East End neighborhood. Community members and key stakeholders met to address this need, but were concerned that there would not be enough local support to build a grocery store. Many residents in the East End purchase food and groceries from convenience stores and dollar stores, which predominantly offer processed and unhealthy foods.

Community Engagement

Historically, community involvement has been limited in Charleston, not solely for the partnership, but for many working in the community. Aware of the low resident involvement, particularly in the West Side neighborhood, partnership leadership attended neighborhood association and resident meetings regularly to keep residents informed and encourage involvement. Although networking at the meetings was valuable, following up with those contacts and sustaining resident involvement with the partnership was a challenge. Some partnership leadership expressed a lack of grassroots community support. This lack of involvement was seen as a community challenge and not necessarily specific to the partnership. The partnership discussed forming a resident's council, but there was not enough interest. The West Side neighborhood initially had limited community engagement with the partnership, but that improved over time. KEYS experienced more community engagement and overall partnership success from the East End neighborhood throughout the project.

Access to Safe Physical and Recreational Opportunities

The West Side neighborhood lacks safe places for children and families to be active close to home.

KEYS 4 HEALTHYKIDS PARTNERSHIP

Lead Agency and Leadership Teams

In 1994, concerned about the health of the county's residents, the hospitals and many area organizations joined together to form the Kanawha Coalition for Community Health Improvement. Under the guidance of health assessments conducted every three years, the coalition and its steering committee formed obesity and physical activity workgroups. Realizing the need for targeted policy and environment change in December 2008, the Coalition partnered with the Charleston Area Medical Center Health Education and Research Institute (CAMC Institute) for the HKHC grant application to Robert Wood Johnson Foundation (RWJF).

CAMC Institute, the lead agency and fiscal agent for the KEYS partnership, was established in 1996 for charitable, scientific, and educational purposes. The new partnership, KEYS 4 HealthyKids, was formed.

The main purpose of the KEYS 4 HealthyKids partnership was to increase both access to fresh and affordable foods and physical activity opportunities within the community. Initially the partnership teams met frequently to establish the workplan, but as the workplan took shape, partnership meeting attendance shifted to key leader and steering committee members rather than full membership participation. KEYS 4 HealthyKids successfully convened many traditional and non-traditional partners to address childhood obesity in Charleston. A core of 10-15 partners regularly participated and led workgroup efforts, and other partners engaged when the work complemented their strategy area. Over 40 organizations were members of the partnership. (See Appendix C for a list of all partners).

The partnership created work teams, headed by a member of the steering committee, to guide their partnership strategies:

- **Knowledge Team:** a team focused on messaging and partnership promotion based on the 5210 social media campaign (see page 14);
- **Eating Healthy Team:** a team focused on community gardens, school and youth gardens, and corner stores;
- **Youth Being Active:** a team engaged in community mapping of physical activities and healthy eating opportunities;
- **Safety and Empowerment Team:** a policy team focused on joint use agreements, the city comprehensive plan, and healthy eating and active living advocacy;
- **Child care Committee:** a team focused on nutrition and physical activity standards in child care centers; and
- **School Physical Activity Committee:** A committee formed in 2013 to address the need for additional physical activity for children before, during, and after school. The team focused on addressing lack of physical activity in schools through state-level policy initiatives.

The Project Director and Project Coordinator shared many of the same roles, guiding the partnership and ensuring partnership work aligned with the workplan, and that the workplan was built upon proven, evidence-based methods.

The Project Director was a pediatrician and served as Medical Director of the Children's Medicine Center and HealthyKids Pediatric Weight Management Program. Operating the pediatric weight management clinic, she saw firsthand the difficulties in addressing and managing obesity; the recommendations she gave to modify a child's behavior were not realistic or possible because of environmental and policy related barriers. Her experience led her to be a cheerleader and champion for community efforts to impact childhood obesity. The Project Director also led the KEYS child care initiative. The Project Coordinator was the Executive Director of Kanawha Coalition for Community Health Improvement. Additional partnership staff included a project assistant.

The Steering Committee consisted of work team leaders from the following organizations: Charleston Area Alliance, Kanawha-Charleston Health Department, West Virginia State Extension, WVU Extension, and Center for Economic Options.

PARTNERSHIP FUNDING

As part of the HKHC program, grantees were expected to secure a cash and/or in-kind match to equal at least 50% of the RWJF funds over the entire grant period. In addition to the matching funds, the partnership was successful in leveraging additional funds, as a result of the CAMC Institute, Kanawha Coalition for Community Health Improvement, and other key partners' leadership and community presence. The partnership worked to strategically link available funds to projects to best utilize their resources. Those pledging support were asked to commit to four years so that funding was secured each year. Additional support was applied to the partnership's workplan.

KEYS allocated portions of its HKHC funds directly to partners for strategy-specific work. The first iteration, Neighborhood Action Funds, was distributed for parks and play spaces, child care NAP SACC workshops, and community gardens. All matching funds went directly for community lead projects, the Community Action Toolkit, and Peer Learning Network (i.e., mini-grants and technical assistance to selected communities).

These matching funders included:

- CAMC Foundation (\$40,000)
- Central Counties Area Health Education Center (\$4,000)
- Charleston Area Alliance (\$5,000)
- City of Charleston (\$10,000)
- Claude Worthington Benedum Foundation (\$75,000)
- Family Care Health Center (\$4,000)
- Thomas Health Systems (\$40,000)

In addition to the partnership's original matching funds, grant funding was secured from:

- CAMC Civic Affairs (\$2,500) for community gardens
- Charleston-Kanawha Health Department/ Community Transformation Grant corner store initiative (\$40,000) for refrigeration units and produce display baskets
- City of Charleston (\$37,000) for playground equipment
- Claude Worthington Benedum Foundation (\$5,000) for statewide focus groups on childhood obesity
- The Greater Kanawha Valley Foundation (\$10,000) for the Youth Scholarship Program
- West Virginia Community Development Hub (\$8,420) for development and maintenance of a community garden website
- West Virginia Office of Healthy Lifestyle (\$50,000) for six community gardens, two playgrounds, and support for NAP SACC workshops and community garden tool lending programs

For additional funding information, see Appendix D: Sources and Amounts of Funding Leveraged.

COMMUNITY ASSESSMENT

General Assessments

In 2010, several assessments were conducted by the partnership, community residents, and the Youth Council. Thirty walkability and bikeability audits were completed near the King Community Center and Kanawha Boulevard by youth and families at the East End Family Resource Center Block Party. The results from the audits were used to prioritize workplan strategies and to inform community members and leaders.

The KEYS Youth Being Active Team completed a physical activity inventory for physical activity opportunities and food sources on the West Side and East End. The inventory included hours of operation, cost, and activities available. Food deserts and a lack of physical activity opportunities were identified. Printed and web-based maps of the West Side and East End were created. Two thousand maps were distributed throughout Charleston and also were available on the Kanawha-Charleston Health Department website to serve as a resource for community members. Combined census data maps and the West Side physical activity inventory data showed that the two most populated areas had no physical activity options and were food deserts. KEYS also completed two community forums and a survey of Charleston residents (see Table 2).

Table 2: Community Forum and Survey Results

<p>Two Initial Community Forums, April 2010 (n=47); Youth Focus Groups, May 2010; Two Follow up Forums, November 2011</p> <ul style="list-style-type: none"> • Some dissatisfaction with Capitol Market regarding cost, hours, and lack of transportation • Desire for community gardens and pocket parks • Sidewalks in disrepair • Safety • Lack of crosswalks and rushing traffic cited when using Kanawha Boulevard for physical activity 	<p>Resident Survey, July 2010 (n=101)</p> <ul style="list-style-type: none"> • Spoilage and cost limits the purchase of fruits and vegetables • Unsafe neighborhoods and lack of local parks, sidewalks, and transportation to access physical activity opportunities limit active play for children • Children engage in 1-2 hours of screen time per day
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Physical Activity

The partnership conducted assessments to inform parks and play spaces and school wellness efforts:

- The Youth Council conducted a Photovoice project and environmental audits, which it presented to the City Council Parks and Recreation Committee in spring 2013. At the request of the committee, the council then conducted follow-up environmental audits in Summer 2013. Based on the findings, the Youth Council recommended that the city: a) host community activity nights at different parks to increase park awareness and usage for both adults and children, b) add playground equipment and remove obstacles at specific parks. The City Council Parks and Recreation Committee agreed to continue its partnership with the Youth Council and asked Charleston Parks and Recreation staff to make the recommended changes.
- An analysis of existing policy and plans for joint use agreements in Charleston and Kanawha County found that the Kanawha County Board of Education was lacking formalized policies on joint use and that church facilities could be a potential focus for joint use agreements.
- An analysis of existing school physical activity and physical education policies in West Virginia revealed a lack of accountability, training for teachers, and specificity for physical activity and physical education requirements in West Virginia schools.

Childcare Nutrition and Physical Activity Standards

The partnership’s strategy for improving nutrition and physical activity standards at child care centers heavily focused on assisting participating centers in completing Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC). Eighteen centers completed NAP SACC before participating in workshops and implementing policy and environment changes. The partnership also conducted direct observations and

environmental audits at St. Agnes and Teays Valley centers (see Table 3 and Appendix E: Child Care Nutrition and Physical Activity Standards Enhanced Evaluation Report).

Table 3: Direct Observation and Environmental Audit Selected Results

St. Agnes	Teays Valley
<p>Direct Observation</p> <ul style="list-style-type: none"> • Pre-intervention, the majority of children’s activity levels were recorded as sedentary (48%). Post-intervention, the majority of children’s activity levels were recorded as moderate behavior (49%). • From pre to post, sedentary activity decreased (48% to 41%) and moderate-vigorous physical activity increased (52% to 59%). • From pre to post, average number of calories, fat, sodium, and sugar decreased for meals provided; the average saturated fat increased. • From pre to post, the average number of calories, fat, sodium, and sugar decreased for meals consumed; the average saturated fat increased. 	<p>Direct Observation</p> <ul style="list-style-type: none"> • From pre to post, sedentary physical activity increased from 44 to 60% and moderate-vigorous activity decreased 56 to 40%. • From pre- to post-intervention, the children’s activity levels recorded as sedentary increased from 44% to 60%. This was due to less outdoor playground availability and construction which supports environmental improvement leading to more physical activity. • From pre to post, average amount of sugar decreased for the meals provided; the average amount of calories, fat, saturated fat, and sodium increased. • From pre to post, average number of calories and sugar decreased for meals consumed; the average fat, saturated fat, and sodium increased.
<p>Environmental Audit</p> <ul style="list-style-type: none"> • Differences observed post-audit (either real or error) included addition of benches, marked path, hopscotch and four-square, green space, and stationary and portable play equipment. • Differences observed post-audit (either real or error) included addition of fresh fruit and vegetables and healthier snacks and the absence of fried meats, high-fat meats, and biscuits. 	<p>Environmental Audit</p> <ul style="list-style-type: none"> • Differences observed post-audit (either real or error) included addition of stationary and portable play equipment and the absence of play space and portable equipment (half of playground closed for re-design). • Differences observed post-audit (either real or error) included addition of fresh and no syrup-canned fruit and absence of frozen or canned fruit or vegetables and healthier breakfast options.

Access to Healthy Food

The partnership conducted healthy eating assessments to inform access to healthy food efforts:

- KEYS conducted corner store inventory surveys in April 2010. Assessment results of 32 stores, including Fas Chek and Save-A-Lot from the West Side, noted a lack of sufficient variety of fresh fruits and vegetables, minimal or non-existent fresh produce displays, and less availability of low-fat milk than whole or reduced fat (2%) milk.
- Community members (n=13) from West Side of Charleston who grocery shopped at the study grocery stores (Fas Chek and Save-A-Lot) participated in a focus group conducted by Penn State University and Community Service Learning. Participants answered questions related to food shopping habits and opportunities for healthy and affordable foods.
- As part of the Community Action Toolkit, KEYS partnered with Common Grounds food pantry to conduct client interviews, pre- and post-surveys with staff, and nutrient analysis of client food boxes to improve nutrition policies.

Active Transportation

The partnership conducted active transportation assessments to inform comprehensive plan efforts:

- The Youth Being Active Team conducted walkability audits around West Side Elementary School/Florida Street. The Youth Council conducted walkability audits at five intersections along Kanawha Boulevard. Both results were incorporated into the Imagine Charleston comprehensive plan and used to advocate for stoplights along Kanawha Boulevard.
- A walkability audit was conducted around Magic Island.
- As part of the Community Action Toolkit, KEYS assisted Healthy Clendenin in performing a walkability and bikeability audit on a path that connected the school, health center, and town. The Clendenin mayor pledged to repair sidewalks in response to the audits.
- KEYS conducted a policy and plan analysis to inform its active transportation strategy.

PLANNING AND ADVOCACY EFFORTS

Community Outreach and Engagement

KEYS 4 HealthyKids identified the need to involve the community for the success and sustainability of the partnership. The partnership engaged residents to support the overall partnership and to advance and support its strategy-specific work.

Community Action Toolkit and Peer Learning Network

In 2012, KEYS developed a Community Action Toolkit and a Peer Learning Network to support new communities and organizations in Kanawha County and surrounding counties in their active living and healthy eating efforts. The Community Action Toolkit was designed to assist communities and organizations prioritize efforts, create a workplan, and implement policy, practice, and environmental changes. The toolkit included a guidebook, video, and 5210 promotional materials, and was made available to the public on the KEYS website. The Peer Learning Network was created for KEYS to provide technical assistance and to encourage cross-site learning from participants. The Community Action Toolkit and Peer Learning Network were open to Kanawha County applicants in 2012. The following year they were made available to a ten-county area: Boone, Clay, Fayette, Jackson, Kanawha, Lincoln, Nicholas, Putnam, Raleigh, and Roane counties.



“...we’re trying to take what we’ve learned and help other communities assess their own community for what policy changes might need to happen, and what environmental barriers are keeping people from living healthier lifestyles.” - Partnership staff

The partnership received funding from Claude Worthington Benedum Foundation to create the toolkit and offer funds to participating communities. The first year, mini-grants from \$3,000-\$6,000 were available to applicants partnering with at least two other organizations who would collectively start a community assessment. The assessment results would drive the communities’ healthy and active living initiatives. In 2013, KEYS provided funds to new expansion communities for expenses directly related to improving food access and for increasing physical opportunity. The initial meeting of the Peer Learning Network was facilitated by KEYS Steering Committee, and over 50 partners and media contacts attended the press conference. KEYS provided ongoing technical assistance to the organizations through the Peer

Learning Network.

Community Action Toolkit and Peer Learning Network participants included:

- 2012: Common Grounds food pantry in Kanawha City, City of Clendenin, Thomas Hospital Foundation for the North Charleston neighborhood, the county-wide School and Youth Garden Support Network (SYGSN)
- 2013: City of Richwood, City of Ripley, Regional Education Service Agency 1, Clay Elementary, Hamlin PK-8 Elementary in Lincoln County, Build it Up! WV, Raleigh County Community Council, Step by Step

School and Youth Garden Support Network

KEYS and West Virginia University Extension partnered to develop the School and Youth Garden Support Network (SYGSN) to enhance sustainability of gardens. The Network was created as part of the first round of Community Action Toolkit and Peer Learning Network recipients. It provided garden-based training to local educators, developed curricula for schools, and built raised bed gardens at area schools and afterschool programs. SYGSN partnered with Food and Farm Coalition and leveraged funds to develop and maintain a community garden website that featured garden curriculum for teachers to meet core curriculum standards. There were 13 schools, 26 classrooms, and 700 kids participating in the school and youth garden support network. Approximately 1,500 kids were sent home with plants from the West Virginia University Nutrition Extension Outreach Instructors. In 2013, a School Garden Symposium was held with attendance from 60 teachers across the state.

Kanawha Urban Ag Alliance

Hoping to build capacity and sustainability for its community garden initiative, the partnership formed a KEYS Gardening Network. Concurrently, the West Virginia University Extension had been looking to expand the existing West Virginia University Extension's Community Garden Association into a county-wide gardening association, so the two groups merged into a more formal association. The first meeting between the then-named Kanawha Community Garden Association and the KEYS Gardening Network occurred in February 2011. The Kanawha Community Garden Association changed its name to Kanawha Urban Ag Alliance in 2013 to expand its focus and interest outside of community gardens. It participated in county and statewide fairs and festivals to recruit people and property for gardens. The Alliance received grant funds that were directed to the gardens; for example, it received \$5,000 from BB&T Bank as part of the bank's annual community support program. The funds were used to purchase and distribute rain barrels, benches, wheelbarrows, and other gardening equipment to various gardens.

"...it's not only getting that garden started, and the beds built for the first time, which tends to be the most cost up front, but then, it's what's going to happen in five years from now and ten years from now." -Partnership staff

Imagine Charleston

Beginning in 2012, Charleston began a visioning and planning process to create a new city comprehensive plan, Imagine Charleston. KEYS 4 HealthyKids played a key role in leading and supporting the community engagement component for Imagine Charleston. KEYS provided funds to advertise for the Imagine Charleston Open House and utilized a \$5,000 grant from West Virginia Department of Health and Human Resource's Bureau for Public Health to place ads in the Charleston newspaper and website. The partnership encouraged residents to give feedback at public events for Imagine Charleston. One hundred partners and community members attended the afternoon session, and 50 partners and community members attended the evening session. The Imagine Charleston consultants noted that there was more participation by residents in Charleston at the open house than at any other event they had hosted. Not only did residents participate, but their comments focused on health and wellness. The consultants also recognized the partnership's workplan and strategies as a model for implementing the city comprehensive plan.

Advocacy

KEYS Youth Council

Recognizing the importance of engaging the youth of Charleston, KEYS 4 HealthyKids collaborated with the local YMCA to form the KEYS Youth Council in 2010. Housed and sponsored by the YMCA, the council focused on childhood obesity prevention and advocacy and was comprised of middle school students from Kanawha County. The youth met monthly to identify and address opportunities and challenges to physical activity and nutrition. Youth Council activities and accomplishments included:

"It is important for youth to have a voice in the fight against childhood obesity because we are the ones living it. In order to combat the problem, those who experience the problem must be involved in the solution." -Charleston youth activist

- annual advocacy and Photovoice training for current and new Youth Council members. The first Photovoice project focused on school lunches and was presented to the Kanawha County Schools Wellness Committee.
- walkability and bikeability audits in 2010 and 2011.
- participation in a grocery store tour with Congresswoman Shelly Moore Capito and West Virginia Delegate Mesha Poore.
- participation in advocacy training with Charleston City Council members, KEYS staff, and YMCA staff. As a result of the training, the City Council members formally requested the Youth Council's assistance in assessing city-operated parks and making recommendations for improvements.
- a presentation by the KEYS Youth Council President on school wellness initiatives and youth engagement in wellness planning at the West Virginia State Department of Education's KidStrong Conference in his role as National Advisory Council Member of the Alliance for a Healthier Generation.

Local Advocacy Efforts

KEYS advocated to the Charleston City Council on active transportation and healthy eating strategies:

- The partnership wrote letters in support of street design improvements to create safe passage to Magic Island over the four-lane Kanawha Boulevard.
- KEYS wrote a letter to the Charleston City Manager in support of a policy change eliminating through traffic lights on Kanawha Boulevard as a traffic calming measure.
- In collaboration with WVU Extension, a KEYS 4 HealthyKids Steering Committee member advocated for the Urban Agriculture Ordinance for the City of Charleston. The KEYS East End Community Garden was identified as an example that community gardens can increase food access.

Statewide Advocacy Efforts

KEYS played an active role in policy recommendations and partnership staff were requested to provide expert testimony to the Healthy Lifestyle Coalition and Subcommittee on Health for West Virginia Senate regarding policy for childhood obesity. The West Virginia Healthy Lifestyle Coalition final policy recommendations presented to the Joint Committee in Health included:

- eliminating the sale and distribution of unhealthy, sugar-sweetened beverages in West Virginia public schools.
- requiring at least 50% of physical education class time be spent in moderate to vigorous activity.
- encouraging the State Board of Education to support joint use agreements for the school facilities to promote access to physical activity opportunities.
- supporting policies that encouraged farmers' markets, farm-to-school initiatives, and comprehensive strategies to reduce overconsumption of sugar-sweetened beverages.

KEYS Project Director was invited to speak at West Virginia Joint Committee on children and families regarding childhood obesity and physical activity purpose.

KEYS and WVU Extension partnered with the West Virginia HealthyKids and Families Coalition to create a statewide school physical activity policy, Move to Improve bill. Final recommendations required every Pre-K-8 child in West Virginia get a minimum of 30 minutes of physical activity each day. The Move to Improve Act passed the West Virginia Senate in February 2014, but died in the house. The West Virginia State Board of Education updated Policy 2510 that added physical activity as a core subject and ensured 30 minutes of physical activity be integrated throughout the school day.

Programs

KEYS used the American Academy of Pediatrics' 5210 Keep Me Healthy Toolkit (see Figure 3) to promote the partnership and establish a common logo and message throughout the community and at project locations (e.g., community gardens). KEYS hosted and sponsored neighborhood and citywide events to promote the partnership's message. It also helped shift local celebrations to focus on healthy eating and physical activity with a heavy emphasis on 5210. The 5210 program included: neighborhood block parties featuring the 5210 messaging to help focus community events on healthy snacks, serving water, and active play opportunities; and area schools incorporating 5210 messaging into school curriculum and garden based learning. Clendenin Elementary incorporated 5210 as part of the Community Action Toolkit strategy.

The partnership also hosted an annual obesity conference, in collaboration with the Charleston Area Medical Center, CAMC Institute, CAMC Weight Loss Center, and the Claude Worthington Benedum Foundation.

Figure 3: 5210 Messaging



IMAGINE CHARLESTON—CITY COMPREHENSIVE PLAN

Partnership staff provided extensive input to the City of Charleston's new comprehensive plan, Imagine Charleston. Imagine Charleston is the first Charleston comprehensive plan to incorporate a health section that includes healthy eating and active living.

Policy, Practice, and Environmental Changes

Imagine Charleston was adopted by Charleston City Council in October 2013. Policies recommended by KEYS and adopted into the final plan included access to both healthy, affordable food and places to be active for families and children. The partnership was identified as the lead responsible for implementing the many health components of Imagine Charleston.

Implementation

In 2012, the City of Charleston began the process of creating a new city comprehensive plan. This 15-20 year plan was funded by the City of Charleston, Charleston Urban Renewal Authority, Charleston Area Alliance, and The Greater Kanawha Valley Foundation. The visioning and planning process was branded, "Imagine Charleston." The city hired planning and design consultants to lead citizens and community leaders through a visioning process. KEYS was a key leader in coordinating and promoting the community engagement process which included resident focus groups and public comment forums. KEYS also made it a priority to partner with the city and consultants to ensure that health considerations were part of the planning and decision making process. The partnership's project director was a member of the advisory committee and partnership staff participated in focus groups, weekly conference calls with the local planning committee and consultants, and met directly with the consulting team, providing input, suggestions, and examples of policies encouraging healthy eating and active living. KEYS provided the consultants with the physical activity opportunity maps and the Kanawha Boulevard walkability audits. The wide-ranging collaboration allowed for better coordination of services and additional input to the planning process.

Population Reach

Imagine Charleston has been targeted to the Charleston community, and will impact not only residents but daily commuters.

Population Impact

The plan includes construction of a pair of east/west bike lanes along Kanawha Boulevard from Magic Island to Patrick Street. It also makes official an ordinance passed by City Council in June 2013, setting formal rules for raising egg-laying hens and honeybees and planting community gardens.

KEYS contributed heavily to the Quality of Life section of the plan. Examples of policies in the plan included: healthy vendors at city-sponsored events, healthy vending policy in all city-owned buildings, community gardening, urban agriculture, farm-to-school, mobile farmers' markets, and multi-use transportation.

Challenges

While there have been many good intentions for the plan, Charleston has struggled financially, and funding for environment changes recommended by the comprehensive plan will be difficult to fund. The planning process has included funding recommendations and goal prioritization, but the committee is aware that there will be many recommendations and plans that the city is not able to afford. Lack of funding is difficult to communicate to the community, especially after specifically seeking its input.

"One of our goals for the city comp plan, is not only that this could be a good plan for setting on the shelf, but we want...to see it in action and we want our residents to be able to see it in action..."-Partnership staff

CHILDCARE NUTRITION AND PHYSICAL ACTIVITY STANDARDS

KEYS 4 HealthyKids partnered with 18 child care centers and after school programs to improve nutrition and physical activity standards at each facility. Eighteen centers participated in several NAP SACC workshops and received ongoing technical assistance to implement policy and environmental change in their facilities.

Policy, Practice, and Environmental Changes

Across the 18 participating child care centers and after school programs, the following policy and environmental changes were implemented:

- Nutrition: 192 new and improved policy and practice changes (i.e., increased fruit/vegetable servings, increased access to water, decreased access to vending)
- Physical Activity: 63 new and improved policy and practice changes and 28 new and improved environmental changes (i.e., increased indoor and outdoor physical activity time, increased equipment for play time)



Source: KEYS

In addition, the East End Family Resource Center and YMCA Preschool enrolled in the Federal Children and Adult Care Food Program to improve the nutrient intake of children by providing reimbursement for meals served that met minimum nutritional standards.

Complementary Programs/Promotions

KEYS used the 5210 messaging along with NAP SACC materials to encourage policy, practice, and environmental change in the child care setting. The partnership also utilized open street block parties and fruit and vegetable tasting challenges to encourage and build momentum for policy changes in the child care centers.

Implementation

As the Medical Director of Children’s Medicine Center in Charleston, the KEYS project director came face to face with the rising obesity levels in children. Dr. Jeffrey and colleagues conducted a body mass index (BMI) study among their patients and found that 44% of children aged 2-14 had overweight or obese BMI scores. Looking at the data further, they were surprised to notice that two age groups showed a jump in BMI scores, ages 3-4 and ages 7-8. With a high population of children in some form of child care, KEYS partnered with child care centers to provide education and technical assistance to improve nutrition and physical activity standards in child care settings.

“What’s really been magical is the sharing and support that happened when the childcare directors, staff, and cooks were all sitting around the same table. This led to action and it was so much more powerful than ‘talk’” - Partnership staff

In 2010, The partnership hired a consultant from the NAP SACC team to conduct a “train the trainer” workshop. Partnership staff, community members, Head Start staff, West Virginia Health Consultants from West Virginia Department of Health and Human Resources, dietitians, and Masters of Public Health students attended the workshop. The workshop attendees were trained to assist child care centers in Charleston and throughout West Virginia to improve their nutrition and physical activity standards.

Beginning in 2011, KEYS 4 HealthyKids conducted annual NAP SACC workshops. Seventeen Charleston and Kanawha County child care centers participated:

- 2011: First Presbyterian, East End Family Resource Center, YMCA Preschool, YMCA After School and Summer Camp, Mom’s Helping Hand

- 2012: Vista View Learning Center; East End Family Resource Center; The Bob Burdette Centers of Emmanuel, Calvary, and West Charleston; the four Partnership of African American Churches Centers, and Salvation Army Boys and Girls Club
- 2013: St. Agnes and Teays Valley, Linwood Community Daycare

Workshop topics included an overview of nutrition and physical activity policies, menu planning with registered dietitians, physical activity improvement opportunities, incorporating families into nutrition and physical activity goals, worksite wellness, and goal setting to measure progress. In addition, partnership staff conducted site visits and held bi-monthly conference calls with the participating centers to review goals and barriers to policy and environmental changes in the centers. Participating centers were able to discuss and brainstorm as a group on goals and solutions for implementation. The partnership's project director was approved by West Virginia Department of Health and Human Resources as a certified State Training and Registry System (STARS) continuing education provider. Child care centers and employees attending the partnership's NAP SACC workshops received STARS credits for their participation.

Some unintended benefits of this work included:

- KEYS coordinated meetings with West Virginia Department of Health and Human Resources (licensing and childcare center inspections), Office of Early Education (education/outreach/curriculum), and the Bureau of Public Health to incorporate NAP SACC into child care licensing requirements across the state of West Virginia.
- NAP SAAC motivated individuals (e.g., parents and staff) to make personal changes to their lifestyles.

Population Reach

The child care nutrition and physical activity standards targeted the children enrolled in each of the 18 centers. Enrollment at the 18 sites was approximately 897 birth to high school-aged students.

Challenges

Workshop participants discussed challenges associated with implementing policy, practice, and environmental changes in the centers. Some challenges noted by child care center staff included:

- child care staff blaming families for not preparing better food for their children.
- concerns about lack of knowledge of age-appropriate portion sizes and menu planning. Centers rarely thought about portions and often used the same scoop for every age. Additionally, staff noted that they had a desire to implement appropriate nutrition and physical activity standards but didn't always know how. Partnership staff helped the child care center staff look at their processes and coached them to make positive changes. A menu planning session by a local dietitian was added to the NAP SACC workshops based on feedback from the centers.

Sustainability

Presentations were used to build awareness and interest in utilizing NAP SACC and instituting physical activity and nutrition standards in the child care setting. In addition to training the Charleston sites, the partnership trained and educated many child care facilities and related professionals county and statewide to encourage the use of NAP SACC as an evaluation tool for other grants and programs. NAP SACC workshops and technical assistance are included in the partnership's 2014 Sustainability Plan and funding from CAMC Foundation, State of West Virginia, and the United States Department of Agriculture was received to continue the initiative. The partnership also plans to encourage previous participants to conduct NAP SACC again to demonstrate improvement and identify additional areas for improvement.

PARKS AND PLAY SPACES

KEYS 4 HealthyKids partnered with Charleston Parks and Recreation, child care centers and after school programs, local businesses and organizations to implement policy, practice, and environmental changes at parks and play spaces in Charleston and Kanawha County. Several of these changes occurred because of participation in the KEYS Community Action Toolkit and Peer Learning Network and as a result of the Youth Council's presentation to Charleston City Council Parks and Recreation Committee and the ongoing dialogue between the youth and Charleston Parks and Recreation staff identifying barriers to play.

Policy, Practice, and Environmental Changes

The partnership advocated for and supported the installation of one new pocket park, four new playgrounds and/or natural learning areas, and modifications to several parks and play spaces.

New Parks and Play Spaces

- A pocket park with playground equipment was installed at East End Family Resource Center.
- Playground equipment was installed at Magic Island, as shown below.
- CAMC and KEYS partnered to install a new Play Patch Playground in Charleston Town Center featuring the 5210 healthy eating and active living message. The playground was designed for children under four feet tall and had ample seating for parents to directly observe their children playing and climbing in the Play Patch consisting of fruit and vegetable play structures.
- A community playground was installed at Charleston Montessori School on the West Side.
- A new play structure was installed at Clendenin Elementary.



Magic Island Playground. Photo source: KEYS

New Parks and Play Space Equipment

- Physical activity equipment for North Charleston Baptist Church was purchased to use in the community gymnasium.
- KEYS partnered with Orchard Manor Residential Association and Kanawha Housing to increase multi-generational physical activity opportunities for residents at Orchard Manor. Office for Healthy Lifestyles funds were used to purchase indoor physical activity equipment and to mark a new walking trail.
- Salvation Army Boys and Girls Club afterschool program purchased electronic physical activity equipment and compiled best practice policy guidelines for the equipment with Office for Healthy Lifestyles funding.

Modified Parks and Play Spaces

- Improvements were made to the existing Celebration Station Park as a result of youth environmental audits. The park revitalization project included new basketball rims, new and repaired swings, slides, various play structures and wood replacement.

Shared Use Agreements

- A formal shared use agreement was created between Charleston Montessori School and Grace Covenant Baptist Church to allow Montessori student and community access to the playground. The

agreement stated that the school was responsible for the liability of the community playground.

- North Charleston Baptist Church created an informal shared use agreement to open its gymnasium to community members on Wednesday evenings and Sunday afternoons.

Complementary Programs/Promotions

Youth Scholarship Program

KEYS created the Youth Scholarship Program to provide financial assistance and equipment for after school sports programs to increase participation in disadvantaged youth on the West Side and East End. In addition to fees and equipment needs, transportation was identified as a key barrier to participation. KEYS committed \$2,000 to the program and utilized additional grant funds from Greater Kanawha Valley Foundation (non-matching, \$10,000 in 2012) to support the program. Additionally, 875 children (grades K-5) at low-income, year-round Charleston schools (Piedmont and West Side Elementary) received soccer instruction five days a week for three weeks with every child receiving an opportunity for a \$75 West Side Soccer League Scholarship. Approximately 40 children took advantage of the scholarship. In addition, five children from Piedmont and West Side received full scholarships and uniforms for Jiu Jitsu training. Local sports organizations partnered to continue offering programs and scholarships to the students at Piedmont and West Side Elementary.

Implementation

KEYS partnered with Charleston Park and Recreation Department to purchase playground equipment for parks in Charleston. KEYS contributed \$14,000 toward playground equipment so that Charleston Parks and Recreation could reach the \$50,000 minimum to purchase equipment at a discounted rate. The equipment was installed at the East End Family Resource Center, and Magic Island.

Because of the environmental audit completed by the Youth Council, Charleston Parks and Recreation made repairs and improvements to area parks. Parks and Recreation requested that the youth continue to conduct audits and submit the data to expedite repairs.

East End Park

Results from the partnership's comparison of physical activity mapping to census tract data prompted Charleston Parks and Recreation to agree to add an additional park to the East End neighborhood. Charleston Urban Renewal Authority donated a lot adjacent to East End Family Resource Center, which houses an after school program for low-income African American youth ages 5-18. Youth at the East End Family Resource Center voted on the color scheme for the playground.

Celebration Station Park

Several youth from the East End Family Resource Center attended the community forums held by the partnership. When asked about their utilization of Celebration Station, youth stated that they did not like the basketball rims and chose not to use them. In response, the partnership installed new rims. The existing play structure was also repaired and modified. Additional funds were used to hire a consultant from the original playground designer, Leather Associates, to create a long-term plan for repair and replacement of park structures.



Celebration Station Park. Photo source: Transtria LLC

Population Reach

The parks and play spaces improvements targeted the entire Charleston population, but the partnership specifically advocated for the placement of new play structures in the targeted low-income West Side and East End neighborhoods and near school, after school, and child care property. The Orchard Manor play space and trail were built at the Orchard Manor housing development on the West Side. Orchard Manor has many multi-generational families and grandparents serving as primary caregivers in its 150 households.

Challenges

One challenge identified with pursuing shared use agreements was that many organizations had informal/ verbal shared use agreements and were unwilling to pursue formal agreements.

Sustainability

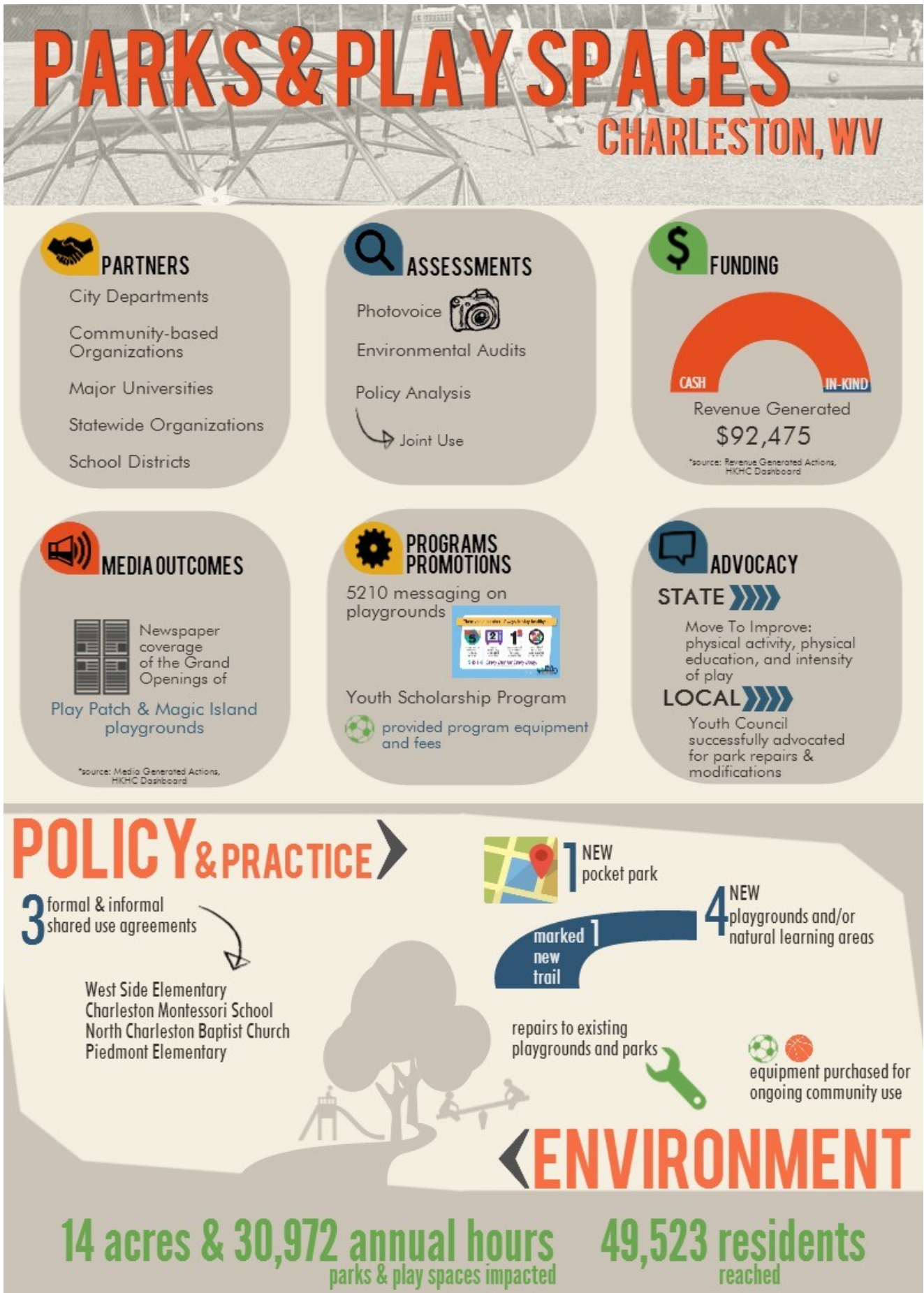
A Natural Learning Initiative is part of the KEYS 2014 Sustainability Plan. The partnership received funding from the Greater Kanawha Valley Foundation (\$20,000) to create playground plans and upgrades at locations throughout the Charleston region. In collaboration with a contractor, KEYS staff will create a site design and help implement the design with assistance of volunteers. Various sites will receive natural learning elements in existing playscape, and some will build an entirely new playscape. The playscapes are designed to include natural learning elements to increase physical activity and will have edible plants to increase exposure to fruits and vegetables.

For additional information, see Figure 4: Parks and Play Spaces Infographic.



Natural Learning Environment. Photo source: KEYS

Figure 4: Parks and Play Spaces Infographic



ACTIVE TRANSPORTATION

Policy, Practice, and Environmental Changes

Active Transportation policy, practice, and environmental changes included:

- Five crosswalks installed around West Side Elementary School as a result of a walkability audit conducted in 2010.
- Sharrows, accessible ramps, crosswalks, a bike, and a gazebo were installed around Piedmont Elementary in the East End neighborhood.
- KEYS supported AARP to advocate for the passing of a statewide Complete Streets policy.

Population Reach

The active transportation environmental changes occurred around Piedmont Elementary and West Side Elementary School.

ACCESS TO HEALTHY FOOD

KEYS collaborated with community members, schools, and child care centers to improve access to healthy and affordable food in a wide variety of areas including farmers' markets, food pantries, and community gardens.

Policy, Practice, and Environmental Changes

Access to Healthy Food policy, practice, and environmental changes included:

Farmers' Markets

- An Electronic Benefits Transfer (EBT) machine was added to the West Side Farmers' Market, providing Supplemental Nutrition Assistance Program (SNAP) recipients access to fresh produce closer to home.

Corner Stores

- Six refrigeration units were placed in area corner stores to hold water and fresh produce. The units were purchased from funds from Office of Healthy Lifestyles.

Community-Based Organizations

- A refrigerator and freezer were installed at the Common Grounds food pantry to store fresh and frozen produce for pantry families. Common Grounds partnered with West Virginia University (WVU) Extension for use of its commercial kitchen.
- The Common Grounds food pantry adopted nutrition policies for its food boxes including an increase in the number of fruits, vegetables, and whole grains and a reduction in foods high in fat and sodium. The pantry also adopted a policy to encourage healthy purchases and a policy to recommend healthy donations.
- North Charleston Baptist Church adopted a healthier menu for church functions.
- As part of the Community Action Toolkit, Southern West Virginia Multicultural Museum and Community Center adopted a policy to no longer provide children in the center with soda.
- Big Ugly Community Center adopted policies that prohibited the use of program funds for sugar-sweetened beverages purchases and prioritized the purchase of local produce.

Schools

- KEYS helped to revise the Kanawha County School Wellness Policy so that the nutrition education component was in line with United States Department of Agriculture dietary guidelines and what constitutes "extreme weather" was clarified for when considering outdoor versus indoor recess.

Community Gardens

- KEYS collaborated with community members, schools, and child care centers to install or improve seven community gardens in Charleston.
- The School and Youth Garden Network created 12 food production areas at local schools. Food production areas included raised beds, container gardens, and indoor growing space.
- The School and Youth Garden Network provided curriculum, agriculture, and material supplies in the first year and distributed over 500 cherry tomato plants to students.
- Charleston City Council passed an urban agriculture bill, permitting community gardens and up to six hens and three beehives on city property.

Complementary Programs/Promotions

As part of the Common Grounds food pantry's participation in the Community Action Toolkit program, pantry customers participated in monthly cooking classes to learn how to prepare food available from the pantry.

KEYS also helped create healthy donation and suggestion lists and developed fruit and vegetable recipe cards for churches and schools to distribute.

Tool Lending Program

KEYS eating healthy team leaders established a tool lending program in partnership with WVU Extension, Kanawha Community Garden Association, and Rock Lake Community Garden. Funds from West Virginia's Office of Healthy Lifestyles were used to purchase small equipment for partnership gardens. Many organizations did not want to house the equipment on their property due to liability and dangers associated with storing the equipment. KEYS purchased sheds to be placed at several gardens and created Google documents for check-outs and waivers. The garden coordinator trained gardeners on how to use the Google documents and components of the tool lending program.

Implementation

Many healthy eating policy, practice, and environmental changes occurred out of participation in the Community Action Toolkit program. Corner store work was done in partnership with the Kanawha County Health Department as part of its Community Transformation Grant. WVU Extension and a KEYS partner were strong advocates for moving the urban agriculture bill through multiple committee and city departments before it was adopted by the Charleston City Council.

A desire for community garden development and revitalization had been expressed by neighborhood residents. KEYS focused on both building and revitalizing gardens throughout Charleston and on creating and supporting networks of gardeners to sustain the garden work. The partnership approached WVU Extension regarding the community garden strategy to provide garden education, community organization, and development for community gardens. Extension staff helped develop leadership with residents and garden communities.

“So I think community gardens is more about building self-reliance and building skill sets among people so that they can feed themselves, but also, it's also, community development, leadership development...” –Community partner

Population Reach

Many healthy eating strategies were targeted to low-income Charleston residents and organizations that serve low-income residents in the region. The Common Grounds food pantry serves children and families that have an income of no more than 150% of the federal poverty level. Over 500 area youth were involved in growing and harvesting fresh produce as a result of the School and Youth Garden Network.

Population Impact

The gardens were utilized for child care, after-school, and in-school programming. Much of the produce was donated to neighborhood residents or area food banks. Two of the new West Side gardens began the practice of distributing fresh produce to area low-income housing developments, transitional homeless housing sites and needy families in the neighboring community.

Lessons Learned

Having a garden champion or a group of core volunteers that is strongly invested in the garden is instrumental to the success of a garden. Many gardeners express concern about liability and insurance. Locating gardens on private property (i.e., church, child care centers) allowed the property owner to be responsible for liability insurance.

Sustainability

The Kanawha Charleston County Health Department plans to continue and further the corner store work. The initiative hopes to create healthy corner stores and check-out aisles in the region by sharing promotional materials and providing equipment and signage to corner stores and staff.

The KEYS Garden Network's incorporation into the Kanawha Urban Ag Alliance and the creation of the School and Youth Garden Support Network were established to build capacity for community gardens, support sustainability, and maintain community momentum around community gardening.

SUSTAINABILITY

Over the course of the project, partnership leadership worked to sustain each individual project and the partnership as a whole. In the last year of funding, KEYS created a 2014-2016 Sustainability Plan to ensure the work continued into the future. As part of the planning process, KEYS surveyed past and current partners to determine interest and level of commitment for projects and focus areas. The survey was used to prioritize strategies. The partnership also conducted a formative self-assessment and cost analysis for focus areas moving forward. As a result of the sustainability planning process, KEYS 4 HealthyKids was able to focus its future direction on high priority strategies. Additional funding will enable KEYS to continue to operate with partnership staff, a steering committee, and workgroups. The partnership committed to moving forward in the following areas:

- Community Action Toolkit and Peer Learning Network
- School and Youth Garden Network
- Natural Learning Environments and edible gardens at child care and after school facilities
- NAP SACC in Charleston and across the state
- Imagine Charleston policy development
- KEYS Youth Council

The partnership also committed to expanding its efforts to include involvement in the statewide Try This Initiative to network and share healthy eating and active living efforts across West Virginia, expanded access to healthy food efforts (i.e., Farm-to-Preschool, Farm-to-School, community gardens, and urban agriculture), and state and local physical activity policy advocacy.

Future Funding

As part of the partnership's sustainability planning in 2013, partnership staff applied for and received funding to continue its work. Future funding included:

- CAMC Foundation (\$45,000) to continue work on natural learning environments, school gardens, and NAP SACC centers
- CAMC Health Systems (\$20,000, in-kind) to support the KEYS 2014 workplan and provide office space, printing, a desktop computer, three laptop computers, and general use of office equipment
- The Greater Kanawha Valley Foundation (\$20,000) for Natural Learning Environments for four child care centers
- State of West Virginia, SNAP-Ed Program, (\$150,000) for school gardens, NAP SACC centers, and school wellness committees
- Bureau of Public Health (\$19,600) for Kidz Bite Back, a youth leadership program, and Farm-to-Preschool a Community Supported Agriculture (CSA) and food cooperative for child care centers
- AmeriCorps VISTA employee, in partnership with West Virginia University Extension, for the KEYS 2014 workplan
- Coventry Cares (\$13,150) for Kidz Bite Back.

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APPENDIX A: KEYS 4 HEALTHYKIDS EVALUATION LOGIC MODEL

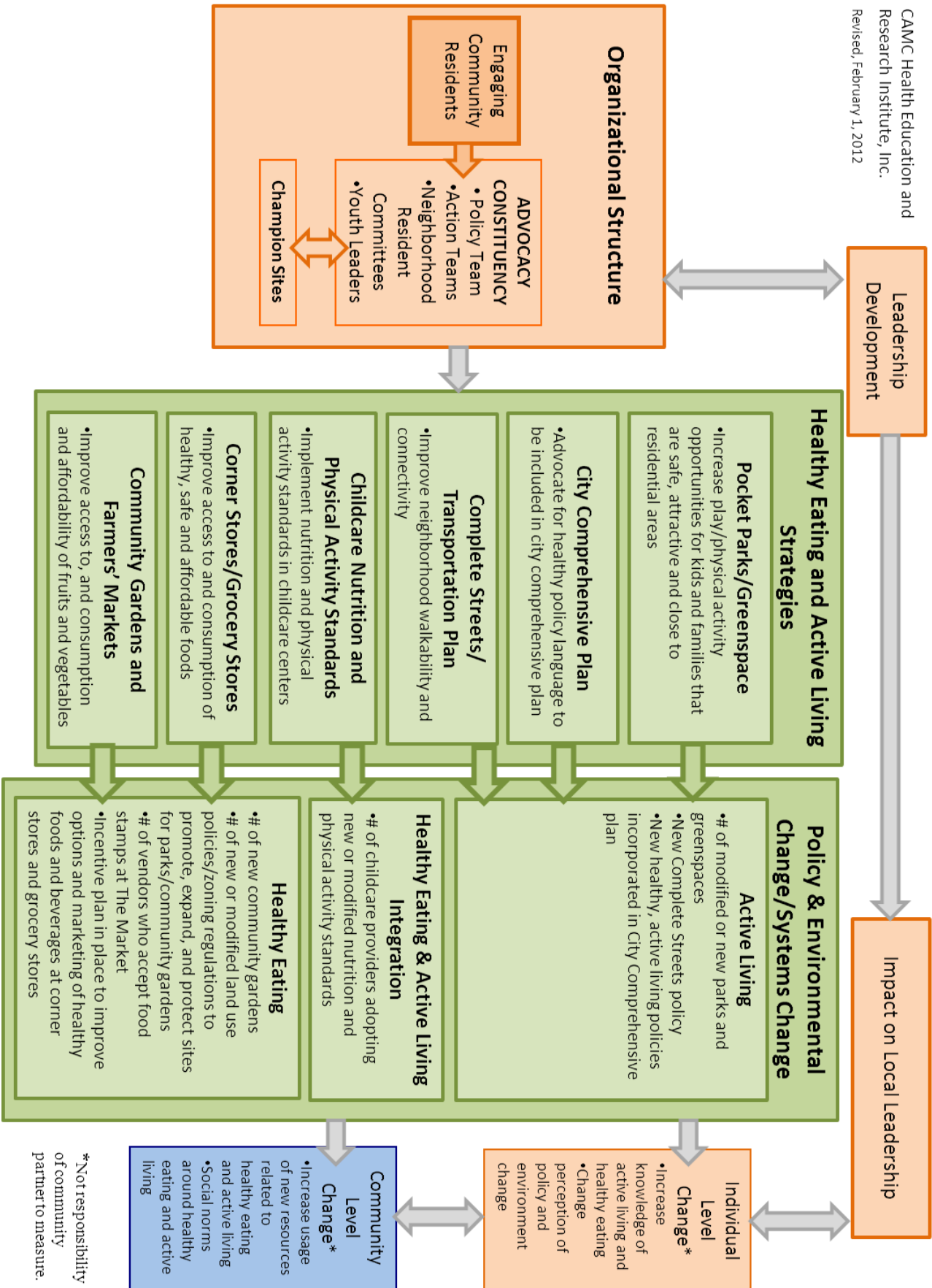
In the first year of the grant, this evaluation logic model identified healthy eating and active living strategies with associated short-term, intermediate, and long-term community and system changes for a comprehensive evaluation to demonstrate the impact of the strategies to be implemented in the community. This model provided a basis for the evaluation team to collaborate with the KEYS 4 HealthyKids partnership to understand and prioritize opportunities for the evaluation. Because the logic model was created at the outset, it does not necessarily reflect the four years of activities implemented by the partnership (i.e., the workplans were revised on at least an annual basis).

The healthy eating and active living strategies of KEYS 4 HealthyKids partnership included:

- *Child Care Nutrition and Physical Activity Standards*: KEYS 4 HealthyKids partnered with 18 child care centers to improve nutrition and physical activity standards in child care settings. Eighteen centers participated improved standards using the Nutrition and Physical Activity Self-Assessment for Child Care Centers (NAP SACC) tool.
- *Parks and Play Spaces*: The partnership created new parks and play spaces and worked to improve existing ones. Many of the repairs and park improvements were a result of the Youth Council's advocacy and involvement with the Charleston City Council Parks and Recreation Committee and the Parks and Recreation Department.
- *City Comprehensive Planning*: Partnership staff provided extensive input into the City of Charleston's new comprehensive plan, Imagine Charleston. Adopted in 2013, Imagine Charleston was the first Charleston comprehensive plan to incorporate healthy eating and active living. Policies recommendations included: allowing mobile farmers' markets, supporting Farm to School initiatives, improving access to fresh, local food, and creating more spaces for physical activity opportunity.
- *Access to Healthy Food*: KEYS collaborated with community members, schools, and child care centers to improve access to healthy and affordable food in a wide variety of areas including farmers' markets, food pantries, and community gardens.

Charleston, WV HKHC Logic Model

CAMC Health Education and Research Institute, Inc.
Revised, February 1, 2012



*Not responsibility of community partner to measure.

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS**Partnership and Community Capacity Survey**

To enhance understanding of the capacity of each community partnership, an online survey was conducted with project staff and key partners involved with KEYS 4 HealthyKids during the final year of the grant. Partnership capacity involves the ability of communities to identify, mobilize, and address social and public health problems.¹⁻³

Methods

Modeled after earlier work from the Prevention Research Centers and the Evaluation of Active Living by Design,⁴ an 82-item partnership capacity survey solicited perspectives of the members of the KEYS 4 HealthyKids partnership on the structure and function of the partnership. The survey questions assisted evaluators in identifying characteristics of the partnership, its leadership, and its relationship to the broader community.

Questions addressed respondents' understanding of KEYS 4 HealthyKids in the following areas: structure and function of the partnership, leadership, partnership structure, relationship with partners, partner capacity, political influence of partnership, and perceptions of community members. Participants completed the survey online and rated each item using a 4-point Likert-type scale (strongly agree to strongly disagree). Responses were used to reflect partnership structure (e.g., new partners, committees) and function (e.g., processes for decision making, leadership in the community). The partnership survey topics included the following: the partnership's goals are clearly defined, partners have input into decisions made by the partnership, the leadership thinks it is important to involve the community, the partnership has access to enough space to conduct daily tasks, and the partnership faces opposition in the community it serves. The survey was open between September 2013 and December 2013 and was translated into Spanish to increase respondent participation in predominantly Hispanic/Latino communities.

To assess validity of the survey, evaluators used SPSS to perform factor analysis, using principal component analysis with Varimax with Kaiser Normalization (Eigenvalue >1). Evaluators identified 15 components or factors with a range of 1-11 items loading onto each factor, using a value of 0.4 as a minimum threshold for factor loadings for each latent construct (i.e., component or factor) in the rotated component matrix.

Survey data were imported into a database, where items were queried and grouped into the constructs identified through factor analysis. Responses to statements within each construct were summarized using weighted averages. Evaluators excluded sites with ten or fewer respondents from individual site analyses but included them in the final cross-site analysis.

*Findings***Structure and Function of the Partnership (n=5 items)**

A total of 18 individuals responded from KEYS 4 HealthyKids partnership. Of the sample, 14 were female (78%) and 4 were male (22%). The majority of respondents were between the ages of 26-45 (9, or 50%) or 46-65 (7, or 39%). One respondent was between 18-25, and one was 66 or older. Eighty-nine percent of respondents identified themselves as White, 5% as African American, and 5% as Hispanic or Latino. No other races or ethnicities were identified.

Respondents were asked to identify their role(s) in the partnership or community. Of the 34 identified roles, four were representative of the Community Partnership Lead (12%) and fifteen were Community Partnership Partners (44%). Four respondents self-identified as Community Partnership Leaders (12%) and eight as Community Members (24%). Two respondents were identified as Public Officials (6%), and one individual identified another role (3%). Individuals participating in the survey also identified their organizational affiliation. Twenty-seven percent of respondents indicated affiliation to a local government agency (n=5) or health care organizations (n=5). Three respondents claimed affiliation to university or research/evaluation organizations (17%). Two respondents identified themselves with child care or afterschool organizations (11%) or other organizations (11%), and one respondent was associated to a faith- or community-based organization (6%). No respondents were affiliated to or health care organizations, neighborhood organizations, or schools/school districts.

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS, cont.**Leadership (n=8 items)**

Overall, responses showed agreement or strong agreement (100% total) to statements suggesting that the partnership had an established group of core leaders who had the skills to help the partnership achieve its goals. Responses also indicated that participants in the survey felt the core leadership is organized and retains the skills to help the partnership and its initiatives succeed. Respondents strongly agreed or agreed (100%) that leaders worked to motivate others, work with diverse groups, and strived to follow through on initiative promises. Responses to the survey showed the belief that at least one member of the leadership team lived in the community (78% agree/strongly agree), and leaders were unanimously perceived to have shown compassion to the community members with whom they worked (100% agree/strongly agree).

When asked if they agreed with statements suggesting that at least one member of the leadership team retained a respected role in the community, 100% of respondents agreed or strongly agreed.

Partnership Structure (n=24 items)

While respondents generally felt that the partnership adequately provided the necessary in-kind space, equipment and supplies for partners to conduct business and meetings related to partnership initiatives (60% agree/strongly agree), 40% of respondents felt unsure provision of space and equipment was sufficient. Most (81%) agreed that the partnership has processes in place for dealing with conflict, organizing meetings, and structuring goals, although 13% responded “I don’t know”, indicating a lack of familiarity in this area, and 6% felt these processes were not established. Partnership members (leadership and partners) were generally perceived by respondents to be involved in other communities and with various community groups, bridging the gaps between neighboring areas and helping communities work together (93%), though 7% did not agree with these claims.

Though the majority (67%) of respondents indicated agreement with statements about the partnership’s effectiveness in seeking learning opportunities, developing the partnership, and planning for sustainability, 16% of responses disagreed, and 16% were not aware of partnership activities specific to development and sustainability.

Relationship with Partners (n=4 items)

Ninety-six percent of responses to statements about leadership and partner relationships were positive (agree or strongly agree), indicating that the majority of respondents felt the partners and leadership trusted and worked to support each other.

Partner Capacity (n=18 items)

Nearly all responses (95% agree/strongly agree) indicated that respondents felt partners possess the skills and abilities to communicate with diverse groups of people and engage decision makers (e.g., public officials, community leaders). Furthermore, 89% of individuals responding to the survey felt that partners were dedicated to the initiative, interested in enhancing a sense of community, and motivated to create change.

Political Influence of Partnership (n=2 items)

Respondents felt that the leadership is visible within the community, with 81% of responses supporting statements that the leadership is known by community members and works directly with public officials to promote partnership initiatives. Eleven percent of survey participants responded “I don’t know” to these statements.

Perceptions of Community and Community Members (n=22 items)

Statements suggesting that the community was a good place to live, with community members who share the same goals and values, help each other, and are trustworthy were supported by 75% of survey responses, while 18% of respondents indicated a lack of knowledge about these community attributes. Respondents also strongly supported suggestions that community members help their neighbors, though respondents also agreed that some community members may take advantage of others if given the chance (90% agree/strongly agree). Respondents were less convinced that community members would intervene on behalf of

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS, cont.

another individual in their community in cases of disrespect, disruptive behavior, or harmful behavior. While 69% agreed or strongly agreed, 20% disagreed/strongly disagreed. The remaining 11% of responses indicated that some respondents did not know how community members would act in these situations.

Most survey participants (72%) felt community members were aware of the partnership's initiatives and activities; however, 22% of those responding to the survey disagreed with these statements and 5% strongly felt community members were not aware. Eighty-three percent of respondents agreed that the partnership equally divides resources among different community groups in need (e.g., racial/ethnic minorities, lower-income), though 11% disagreed and felt resources were not equally distributed.

Overall, respondents agreed or strongly agreed that partners and members of the community maintained active involvement in partnership decisions and activities (93%), and also agreed that residents and partners have the opportunity to function in leadership roles and participate in the group decision-making process (94%).

References

1. Goodman RM, Speers MA, McLeroy K, et al. *Identifying and defining the dimensions of community capacity to provide a basis for measurement*. Health Educ Behav. Jun 1998;25(3):258-278.
2. Israel BA, Schulz AJ, Parker EA, Becker AB. *Review of community-based research: assessing partnership approaches to improve public health*. Annu Rev Public Health. 1998;19:173-202.
3. Roussos ST, Fawcett SB. *A review of collaborative partnerships as a strategy for improving community health*. Annu Rev Public Health. 2000;21:369-402.
4. Baker E, Motton F. *Is there a relationship between capacity and coalition activity: The road we've traveled*. American Public Health Association 131st Annual Meeting. San Francisco, CA; 2003.

Partnership and Community Capacity Survey Respondent Summary

Community Partnership

Charleston

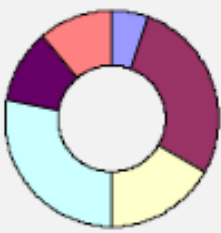
Respondents (n= 18)

Respondent Characteristics

Gender		Identified Race/Ethnicity				Identified Role	
Female	14	American Indian or Alaskan Native	0	Hispanic or Latino	0	Community Partnership Lead	4
Male	4	Asian	0	Not Hispanic or Latino	1	Community Partnership Partner	15
No response	0	White	17	Don't know/ Unsure ethnicity	0	Community Leader	4
Age Range		African American/ Black	1	Refused to identify ethnicity	0	Community Member	8
18-25	1	Pacific Islander/ Native Hawaiian	0	Other ethnicity	0	Public Official	2
26-45	9					Other role	1
46-65	7						
66+	1						
No response	0						

Type of Affiliated Organization

Faith- or Community Based Organization	1	5.6%	(1)
School (district, elementary, middle, high)	0	0.0%	(2)
Local Government Agency (city, county)	5	27.8%	(3)
University or Research/Evaluation Organization	3	16.7%	(4)
Neighborhood Organization	0	0.0%	(5)
Advocacy Organization	0	0.0%	(6)
Health Care Organization	5	27.8%	(7)
Child Care or Afterschool Organization	2	11.1%	(8)
Other	2	11.1%	(10)
No response	0	0.0%	(999)



1
3
4
7
8
10

Partnership and Community Capacity Data

Provision of required space and equipment

Participants provided level of agreement to statements indicating the community partnership provided adequate space, equipment, and supplies to conduct business and meetings.

Strongly agree	36.42%	Strongly disagree	0.62%
Agree	23.46%	I don't know	39.51%
Disagree	0.00%	No response	0.00%

Partner skills and communication

Participants provided level of agreement to statements supporting partner skills and ability to communicate with and engage multiple types of people (e.g., public officials, community leaders).

Strongly agree	48.48%	Strongly disagree	0.00%
Agree	46.97%	I don't know	3.03%
Disagree	1.01%	No response	0.51%

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS, cont.

Community Partnership

Community and community members			
Participants provided level of agreement to statements suggesting the communities are good places to live, and that community members are helpful, can be trusted, and share the same goals or values.			
Strongly agree	33.33%	Strongly disagree	1.01%
Agree	41.92%	I don't know	18.18%
Disagree	5.56%	No response	0.00%
Partner and community involvement			
Participants provided level of agreement to statements indicating partners and the community were actively involved in partnership activities, meetings, and decisions.			
Strongly agree	44.44%	Strongly disagree	0.00%
Agree	48.89%	I don't know	0.00%
Disagree	6.67%	No response	0.00%
Partner and partnership development			
Participants provided level of agreement to statements suggesting the partnership and its partners seek ways learn, develop, and enhance sustainability.			
Strongly agree	30.00%	Strongly disagree	2.22%
Agree	36.67%	I don't know	15.56%
Disagree	13.33%	No response	2.22%
Partnership structure, organization, and goals			
Participants provided level of agreement to statements suggesting partnership has processes in place related to structure, meeting organization, and goals.			
Strongly agree	44.44%	Strongly disagree	0.00%
Agree	37.04%	I don't know	12.96%
Disagree	5.56%	No response	0.00%
Relationship between partners and leadership			
Participants provided level of agreement to statements indicating the leadership and partners trust and support each other.			
Strongly agree	51.39%	Strongly disagree	0.00%
Agree	44.44%	I don't know	4.17%
Disagree	0.00%	No response	0.00%
Community members intervene			
Participants provided level of agreement to statements indicating that community members can be counted on intervene in instances where someone is disrespectful, disruptive, or harmful to another community member.			
Strongly agree	25.93%	Strongly disagree	5.56%
Agree	42.59%	I don't know	11.11%
Disagree	14.81%	No response	0.00%
Leadership motivation			

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS, cont.

Community Partnership

Participants provided level of agreement to statements suggesting the leadership is motivated to help others, work with diverse groups, shows compassion, and follows through.			
Strongly agree	61.11%	Strongly disagree	0.00%
Agree	38.89%	I don't know	0.00%
Disagree	0.00%	No response	0.00%

Community member and partner participation

Participants provided level of agreement to statements indicating that community members and partners have opportunities to serve in leadership roles and participate in group decision-making.			
Strongly agree	57.41%	Strongly disagree	0.00%
Agree	37.04%	I don't know	3.70%
Disagree	1.85%	No response	0.00%

Involvement in other communities

Participants provided level of agreement to statements suggesting leadership and partners are involved in other communities and various community groups, and help communities work together.			
Strongly agree	44.44%	Strongly disagree	0.00%
Agree	47.22%	I don't know	5.56%
Disagree	2.78%	No response	0.00%

Community member willingness to assist

Participants provided level of agreement to statements suggesting most community members help neighbors and solve community problems. It also suggested some community members may take advantage of others.			
Strongly agree	58.33%	Strongly disagree	0.00%
Agree	31.94%	I don't know	5.56%
Disagree	4.17%	No response	0.00%

Core leadership and leadership skills

Participants provided level of agreement to statements suggesting the community partnership has a core leadership group organizing efforts, and that leaders have the skills to help the partnership achieve its goals.			
Strongly agree	55.56%	Strongly disagree	0.00%
Agree	44.44%	I don't know	0.00%
Disagree	0.00%	No response	0.00%

Partner motivation

Participants provided level of agreement to statements indicating that partners won't give up in their efforts to create change and increase sense of community through the partnership.			
Strongly agree	29.63%	Strongly disagree	0.00%
Agree	59.26%	I don't know	7.41%
Disagree	3.70%	No response	0.00%

Visibility of leadership

Participants provided level of agreement to statements suggesting the leadership is known in the community and works with public officials.			
Strongly agree	36.11%	Strongly disagree	0.00%
Agree	44.44%	I don't know	11.11%
Disagree	8.33%	No response	0.00%

APPENDIX B: PARTNERSHIP AND COMMUNITY CAPACITY SURVEY RESULTS, cont.

Community Partnership

Leadership lives in the community			
Participants provided level of agreement to a statement indicating that at least one member of the leadership resides within the community.			
Strongly agree	55.56%	Strongly disagree	5.56%
Agree	22.22%	I don't know	11.11%
Disagree	5.56%	No response	0.00%
Leadership has a respected role in the community			
Participants provided level of agreement to a statement that suggests at least one member of the leadership team has a respected role in the community.			
Strongly agree	61.11%	Strongly disagree	0.00%
Agree	38.89%	I don't know	0.00%
Disagree	0.00%	No response	0.00%
Community partnership initiatives are known			
Participants provided level of agreement to a statement suggesting that community members are aware of the partnership's initiatives and activities.			
Strongly agree	38.89%	Strongly disagree	0.00%
Agree	33.33%	I don't know	5.56%
Disagree	22.22%	No response	0.00%
Division of resources			
Participants provided level of agreement to a statements suggesting that resources are equally divided among different community groups (e.g., racial/ethnic, lower income).			
Strongly agree	27.78%	Strongly disagree	0.00%
Agree	55.56%	I don't know	5.56%
Disagree	11.11%	No response	0.00%

APPENDIX C: PARTNER LIST

KEYS 4 HealthyKids	
Organization/Institution	Partner
Business/Industry/Commercial	West Virginia Dairy Council Charleston Area Alliance Valley Health Systems, Inc. WIC Program Capital Market Three Trees Design and Landscaping
Civic Organization	United Way of Central West Virginia Salvation Army Boys and Girls Club YMCA of Kanawha Valley
College/University	West Virginia University Central Counties Area Health Education Center (CC AHEC) WVU Extension Prevention Research Center West Virginia State University Extension
Foundation	Claude Worthington Benedum Foundation Charleston Area Medical Center Foundation Charleston Area Medical Center Health Education and Research Institute, Inc. (CAMC Institute)
Government	City of Charleston Charleston Urban Renewal Authority (CURA) City of Charleston City Council and Mayor City of Charleston Mayor’s Office of Economic and Community Development City of Charleston Parks and Recreation Department City of Charleston City Council Parks and Recreation Committee Charleston Land Trust Kanawha-Charleston County Health Department Kanawha-Charleston Housing Authority Orchard Manor Resident Management Corp West Virginia Office of Healthy Lifestyles West Virginia Development Office
Medical/Health Organizations	Cabin Creek Health Systems Charleston Area Medical Center Health Systems, Inc. Charleston Area Medical Center Family Resource Center Charleston Area Medical Center Civic Affairs Council Thomas Health Systems, Inc.
Other Community-Based Organizations	Bob Burdette Center Bryan Boyd Creative Group Charleston Kiwanis Club Charleston Montessori School Common Grounds Food Pantry East End Family Resource Center (EEFRC) East End Community Association East End Community Organization Family and Youth Development Services, Inc. Family Care Health Center Friends of the Kanawha Trestle Trail Kanawha Coalition for Community Health Improvement Main Street Programs NeighborWoods Partnership of African American Churches Wellness Council of West Virginia West Side Neighborhood Association West Virginia Council of Churches West Virginia on the Move
Policy/Advocacy Organization	West Virginia Healthy Kids and Families Coalition
School	Kanawha County Schools

APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED

Sources of Revenue

Community Partnership

Resource source Amount Status

Business Year

2010 Annual total

\$10,000.00 *Accrued*

\$5,000.00 *Accrued*

\$5,000.00 *Accrued*

2011 Annual total

\$10,000.00 *Accrued*

2012 Annual total

\$10,000.00 *Accrued*

2013 Annual total

\$10,000.00 *Accrued*

2011 Annual total

\$500.00 *Accrued*

\$182,523.00 *Accrued*

2013 Annual total

\$3,000.00 *Accrued*

\$765.00 *Accrued*

\$30,000.00 *Approved*

Sum of revenue generated by resource source

Individual/private donor Year

2013 Annual total

\$1,500.00 *Accrued*

\$210.00 *Accrued*

Sum of revenue generated by resource source

Local government Year

2010 Annual total

\$5,795.00 *Accrued*

APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED, cont.

Community Partnership	Charleston	Amount	Status
Resource source		\$10,000.00	Accrued
	2011		Annual total \$5,795.00
		\$5,795.00	Accrued
	2012		Annual total \$5,795.00
		\$5,795.00	Accrued
	2013		Annual total \$5,795.00
		\$5,795.00	Accrued
	Other		
	2012		Annual total \$78,770.55
		\$40,000.00	Accrued
		\$36,000.00	Accrued
		\$2,770.55	Accrued
	2013		Annual total \$37,000.00
		\$37,000.00	Accrued
Sum of revenue generated by resource source		\$148,950.55	
State government	Year	Amount	Status
	Other		
	2012		Annual total \$55,194.75
		\$4,000.00	Accrued
		\$3,394.75	Accrued
		\$4,975.00	Accrued
		\$8,420.00	Accrued
		\$10,250.00	Accrued
		\$3,600.00	Accrued
		\$4,500.00	Accrued
		\$2,005.00	Accrued
		\$5,000.00	Accrued
		\$5,000.00	Accrued
		\$4,050.00	Accrued
	2013		Annual total \$169,600.00
		\$150,000.00	Accrued
		\$19,600.00	Accrued

APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED, cont.

Community Partnership		Charleston	
Resource source		Amount	Status
Sum of revenue generated by resource source		\$224,794.75	
Foundation	Year		
HKHC funds			
	2009		Annual total \$79,540.00
		\$2,070.00	Accrued
		\$7,231.00	Accrued
		\$64,895.00	Accrued
		\$1,491.00	Accrued
		\$300.00	Accrued
		\$1,274.00	Accrued
		\$2,279.00	Accrued
	2010		Annual total \$92,676.00
		\$928.00	Accrued
		\$2,332.00	Accrued
		\$2,796.00	Accrued
		\$936.00	Accrued
		\$2,351.00	Accrued
		\$8,425.00	Accrued
		\$74,908.00	Accrued
	2011		Annual total \$82,724.00
		\$3,181.00	Accrued
		\$619.00	Accrued
		\$7,520.00	Accrued
		\$484.00	Accrued
		\$70,920.00	Accrued
	2012		Annual total \$15,191.00
		\$1,010.00	Accrued
		\$878.00	Accrued
		\$4,429.00	Accrued
		\$2,856.00	Accrued
		\$6,018.00	Accrued
Matching funds			

APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED, cont.

Community Partnership	Charleston		
Resource source		Amount	Status
	2010		Annual total <input type="text" value="\$35,000.00"/>
		\$10,000.00	Accrued
		\$25,000.00	Accrued
	2011		Annual total <input type="text" value="\$10,000.00"/>
		\$10,000.00	Accrued
	2012		Annual total <input type="text" value="\$35,000.00"/>
		\$10,000.00	Accrued
		\$25,000.00	Approved
	2013		Annual total <input type="text" value="\$35,000.00"/>
		\$25,000.00	Accrued
		\$10,000.00	Accrued
	Other		
	2012		Annual total <input type="text" value="\$30,000.00"/>
		\$5,000.00	Accrued
		\$5,000.00	Accrued
		\$5,000.00	Accrued
		\$10,000.00	Accrued
		\$5,000.00	Accrued
	2013		Annual total <input type="text" value="\$65,000.00"/>
		\$20,000.00	Accrued
		\$45,000.00	Accrued
Sum of revenue generated by resource source		<input type="text" value="\$480,131.00"/>	
Non-profit organization	Year		
	Matching funds		
	2010		Annual total <input type="text" value="\$81,236.00"/>
		\$1,000.00	Accrued
		\$1,000.00	Accrued
		\$1,000.00	Accrued
		\$2,500.00	Accrued
		\$2,000.00	Accrued
		\$39,741.00	Accrued
		\$33,995.00	Accrued

APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED, cont.

Community Partnership	Charleston		
Resource source		Amount	Status
	2011		Annual total \$94,197.00
		\$42,628.00	Accrued
		\$49,569.00	Accrued
		\$1,000.00	Accrued
		\$1,000.00	Accrued
	2012		Annual total \$94,342.00
		\$49,569.00	Accrued
		\$42,773.00	Accrued
		\$1,000.00	Accrued
		\$1,000.00	Accrued
	2013		Annual total \$95,197.00
		\$43,628.00	Accrued
		\$1,000.00	Accrued
		\$49,569.00	Accrued
		\$1,000.00	Accrued
Other	2013		Annual total \$33,750.00
		\$2,500.00	Accrued
		\$1,000.00	Accrued
		\$2,000.00	Accrued
		\$8,250.00	Accrued
		\$20,000.00	Accrued
Sum of revenue generated by resource source		\$398,722.00	
School	Year		
Other	2013		Annual total \$41,045.00
		\$765.00	Accrued
		\$3,780.00	Accrued
		\$5,650.00	Accrued
		\$2,500.00	Accrued
		\$3,100.00	Accrued
		\$3,250.00	Accrued

APPENDIX D: SOURCES AND AMOUNTS OF FUNDING LEVERAGED, cont.

Community Partnership	Charleston		
Resource source		Amount	Status
		\$19,500.00	Approved
		\$2,500.00	Accrued
Sum of revenue generated by resource source	\$41,045.00		
Other	Year		
Other	2013		Annual total
		\$60,000.00	\$60,000.00
		\$60,000.00	Accrued
Sum of revenue generated by resource source	\$60,000.00		
Grand Total			\$1,622,141.30

**APPENDIX E: CHILD CARE NUTRITION AND PHYSICAL ACTIVITY STANDARDS ENHANCED
EVALUATION REPORT**

KEYS 4 HealthyKids

Physical Activity and Nutrition Standards

Summary Report

Prepared by Transtria LLC



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BACKGROUND

Healthy Kids, Healthy Communities (HKHC) is a national program of the Robert Wood Johnson Foundation (RWJF) whose primary goal is to implement healthy eating and active living policy, system, and environmental change initiatives that can support healthier communities for children and families across the United States. Healthy Kids, Healthy Communities places special emphasis on reaching children who are at highest risk for obesity on the basis of race/ethnicity, income, and/or geographic location.

Charleston, West Virginia was selected as one of 49 communities to participate in HKHC and the Charleston Area Medical Center Health Education and Research Institute (CAMC Institute) is the lead agency for their community partnership, KEYS 4 HealthyKids. Charleston has chosen to focus its work on child care nutrition and physical activity standards, parks and play spaces, community gardens, and city comprehensive planning. Transtria LLC, a public health evaluation and research consulting firm located in St. Louis, Missouri, is funded by the Robert Wood Johnson Foundation to lead the evaluation and dissemination activities from April 2010 to March 2014. For more information about the evaluation, please visit www.transtria.com.

In order to better understand the impact of their work on physical activity and nutrition standards, partnership representatives chose to participate in the enhanced evaluation data collection activities. This supplementary evaluation focuses on the six cross-site HKHC strategies, including: parks and play spaces, active transportation, farmers' markets, corner stores, physical activity standards in childcare settings, and nutrition standards in childcare settings. Communities use two main methods as part of the enhanced evaluation, direct observation and environmental audits. Charleston chose to collect data on physical activity and nutrition standards in childcare settings using environmental audits and direct observation.

METHODS

Direct Observations

Physical Activity Standards Direct Observation

The physical activity direct observation tool was adapted from the System for Observing Play and Leisure Activity (SOPLAY) and System for Observing Play and Recreation in Communities (SOPARC) tools, protocols, and operational definitions. Direct observation is a method used to assess individuals' behaviors in their natural setting. An Evaluation Officer from Transtria LLC trained representatives of Charleston's community partnership on proper data collection methods using the tool.

Data were collected between April 23, 2013 and September 11, 2013 at the following two sites: St. Agnes Child Development Center and Teays Valley Child Development Center.

The observations were conducted on eight days by five different observers. Each site conducted two pre-observations and two post-observations, respectively. Observers collected data for 18 to 31 minutes per play space per day. For the duration of each observation period, observers scanned the play space for one minute and recorded observations for one minute. Each observation represents a child's activity level in the area at the specified time. Because children may have exited and re-entered the area during observation periods, the children observed in each time period were not the same. This method allowed observers to capture overall changes

in activity level as time lapsed, but it did not allow observers to record individual behavior changes.

During the scan, the observer completed the observation tool by tallying children in the designated area by age group (i.e., preschool = 3-5 years; elementary school = 6-10 years; middle school = 11-14 years; high school = 15+ years) and activity level (i.e., sedentary, moderate, or very active behaviors).

- **Sedentary** behaviors are defined as activities in which children are not moving (e.g., standing, sitting, playing board games).
- **Moderate** intensity behaviors require more movement but no strenuous activity (e.g., walking, biking slowly).
- **Very active** behaviors show evidence of increased heart rate and inhalation rate (e.g., running, biking vigorously, playing basketball).

Observers also reported the activity codes for the children in the designated area, including:

No Identifiable Activity	Aerobics	Baseball/Softball	Basketball
Dance	Football	Gymnastics	Martial Arts
Racquet Sports	Soccer	Swimming	Weight Training
Playground Games	Walking	Jogging/Running	None of the Above
		Volleyball	Biking

The activity code “No Identifiable Activity” was used to indicate no movement. The activity code “None of the Above” was used when an individual was engaging in an activity not included in the other activity codes.

Teachers’ behaviors were observed during each period and classified as either “Active Instruction” or “Observation.” Active instruction indicated that the teacher was teaching the children or coordinating the activities. Observation indicated that the teacher was watching children as they engaged in activities.

In addition to recording children’s activity levels, observers created maps of the play spaces. The maps included a form for the facility type, service provided, days of service, setting, location, type of space (e.g., gym, field), condition of the area (e.g., usable, equipment), and surface (e.g., grass, gravel).

One Transtria staff member entered the data and a second Transtria staff member conducted validity checks on 10% of observations (i.e., every tenth observation) to ensure accuracy and validity of the data. Of the 10% checked, 11 errors were found among the 4346 observations (99.7% correct).

Nutrition Standards Direct Observation

The nutrition direct observation tool was adapted from the Environment and Policy Assessment and Observation (EPAO) tools, protocols, and operational definitions. Direct observation is a method used to assess individuals’ behaviors in their natural setting. An Evaluation Officer from Transtria LLC trained representatives of Charleston’s community partnership on proper data collection methods using the tool.

Data were collected between April 23, 2013 and September 11, 2013 at the following two sites: St. Agnes Child Development Center and Teays Valley Child Development Center. Each site conducted two pre-observations and two post-observations, respectively. One meal or snack period at each site was observed by five trained representatives. Teams captured the types and amount of food and beverages given to children at the beginning of the meal or snack period and disposal of food and beverages at the end of the meal or snack period. Within each site, the children received the same meal or snack; therefore, observers recorded the food and beverage type and amount for the meal or snack and multiplied it by the number of children served. Afterward, an individual photographic record was created for each child's meal or snack at disposal to determine how much food was consumed. Observers estimated the amount of beverages (e.g., milk, juice) consumed by picking them up and examining the remaining contents visually.

After pictures had been collected from all sites, the contents for each tray (before and after consumption) were entered in a database. A variety of sources, including the USDA National Nutrient Database for Standard Reference and nutritional information from Mott's (i.e., food product manufacturer), were referenced to calculate the nutritional value for each of the food items. The assessment included the caloric, fat, saturated fat, sodium, and sugar content of each food item. Serving sizes were estimated by comparing the photographic record collected by observers to the serving size suggestions from the USDA website. Fruits and vegetables that were processed, canned, and fresh were counted toward total servings (e.g., apple sauce, mixed fruits in syrup, coleslaw). In accordance with USDA nutritional guidelines, all forms of fried potato (e.g., hash browns, tater tots) and vegetable soups were also counted as vegetable servings. Consumption was calculated by taking the average food given and subtracting the average food thrown away among the number of individuals observed before consumption and after consumption. Those totals were averaged to calculate the amount of food consumed per child.

One Transtria staff member entered the data and a second Transtria staff member conducted validity checks on 10% of observations (i.e., every tenth observation) to ensure accuracy and validity of the data. Of the 10% checked, zero errors were found among the 156 observations (100.0% correct).

Environmental Audits

Physical Activity Environmental Audit

The physical activity environmental audit tool was used to collect data (see Appendix B). This tool and protocol were adapted from the Physical Activity Resource Assessment and the BTG-COMP Park Observation Form 2012. An Evaluation Officer from Transtria LLC trained members of Charleston's community partnership on proper data collection methods using the tool.

Environmental audits assess the presence or absence of different features as well as the quality or condition of the physical environment. This tool captures the setting, accessibility, playground features (swings/slides/monkey bars/sandboxes/ground games), sports and recreation features (fields/courts/pools/tracks/trails), aesthetic features and amenities, trash and vandalism.

In this case, the audit tools were completed for two sites in Charleston. The following sites were included in the assessment: St. Agnes Child Development Center and Teays Valley Child Development Center. Five auditors completed the assessments between April 23, 2013 and September 9, 2013. Each site conducted one pre-audit and one post-audit, respectively.

Transtria staff performed data entry and validation. One Transtria staff member entered the data and a second Transtria staff member conducted validity checks to ensure accuracy and validity of the data. A total of 1160 data points were checked and 2 errors were found (99.8% correct).

Nutrition Standards Environmental Audit

The nutrition environmental audit tool was adapted from the Community Healthy Living Index, a Vending Machine Tool from the Center for Science in Public Interest, and the Nutrition Environment Assessment Tool (NEAT). Environmental auditing is a method used to assess the physical environment. An Evaluation Officer from Transtria LLC trained representatives of Charleston's community partnership on proper data collection methods using the tool.

The audit was used to assess healthy eating in the following two sites: St. Agnes Child Development Center and Teays Valley Child Development Center. Two trained auditors collected the data between April 23, 2013 and September 9, 2013. Each site conducted one pre-audit and one post-audit, respectively. Auditors assessed the nutrition standards of each site in the following categories: facility characteristics, food preparation environment, meal or snack environment, beverages available, meal foods, snack foods, vending machines, and other competitive foods and beverages. One Transtria staff member entered the data and a second Transtria staff member conducted validity checks to ensure accuracy and validity of the data. A total of 872 data points were checked and 2 errors were found (99.8% correct).

RESULTS

Physical Activity Standards Direct Observation

Direct observations were conducted at two sites (St. Agnes Child Development Center and Teays Valley Child Development Center) between April and September 2013.

Children’s activity levels and counts were collected in one-minute observation periods. The activity counts reflect children’s activity levels at a particular moment in time as opposed to unique individuals observed. A person counted during the first minute of scanning is also counted during the fifth minute of scanning, if that person is still in the area. It is likely that the unique number of individuals observed in the area is a small fraction of the number of activity counts recorded for each site.

In order to better compare the data collected, the rate of activity (activity counts per hour) was calculated for total pre- and post-observations.

$$\frac{\text{Number of activity counts}}{\text{Total number of observation periods}} \times 60 \text{ (minutes per hour)}$$

Activity Rate by Site

St. Agnes

There were 26 one-minute observation periods for the pre-observation and 28 one-minute observation periods for the post-observation, for a total of 485 pre activity counts and 348 post activity counts. The rate of activity was 1,119 activity counts per hour for the pre-observation and 745 activity counts per hour for the post-observation. During the pre-observation, the majority of children’s activity levels were recorded as sedentary behavior (48%), followed by moderate (36%) and very active (16%). During the post-observation, the majority of children’s activity levels were recorded as moderate behavior (49%), followed by sedentary (41%) and very active (10%) (Table 1 and Figure 1).

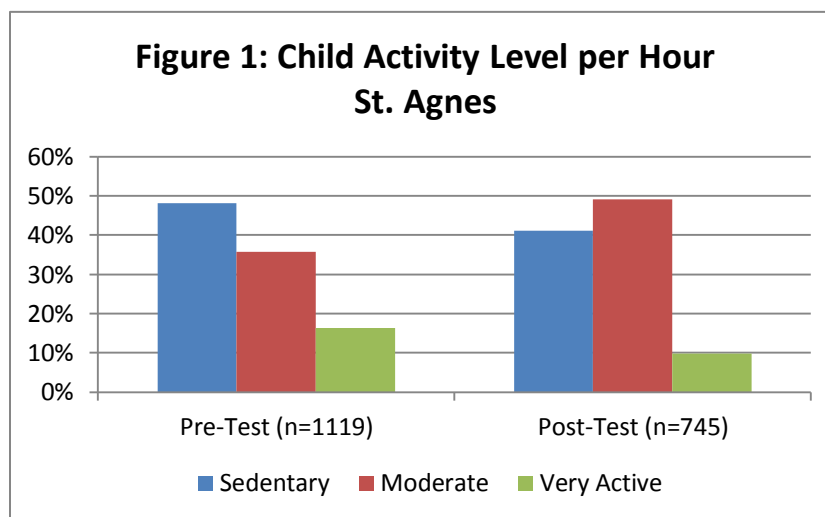


Table 1: St. Agnes Activity Counts per Hour

St. Agnes	Sedentary (%)	Moderate (%)	Very Active (%)	Total
Pre-observation	538 (48%)	399 (36%)	182 (16%)	1119
Post-observation	306 (41%)	366 (49%)	73 (10%)	745

Teays Valley

There were 51 one-minute observation periods in total at Teays Valley, 23 for the pre and 28 for the post, for a total of 1,486 counts, 615 for the pre and 871 for the post.

There were 1,604 activity counts per hour for the pre-observation and 1,866 activity counts per hour for the post-observation. During the pre-observation, the majority of children's activity levels were recorded as sedentary (44%), followed by moderate (36%)

and very active behavior (20%). During the post-observation, the majority of children's activity levels were recorded as sedentary behavior (60%), followed by moderate (29%) and very active (11%). (Table 2 and Figure 2)

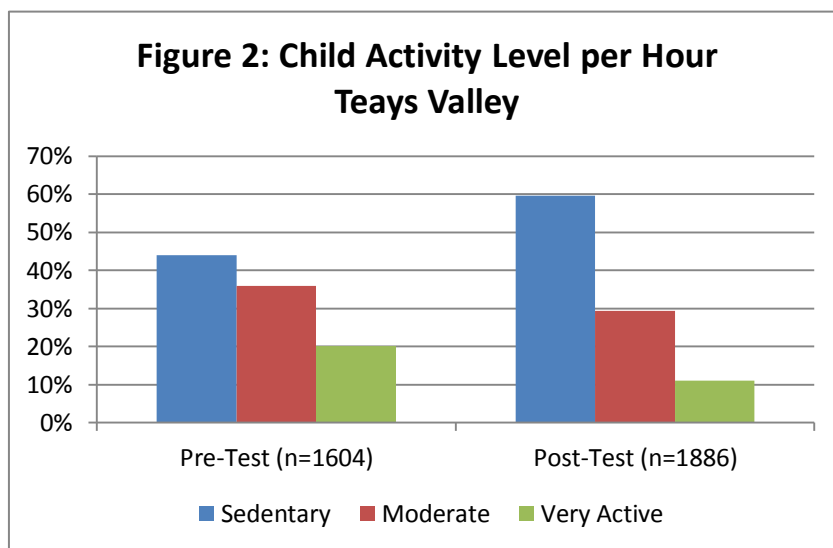


Table 2: Teays Valley Activity Counts per Hour

Teays Valley	Sedentary (%)	Moderate (%)	Very Active (%)	Total
Pre-observation	704 (44%)	577 (36%)	323 (20%)	1604
Post-observation	1112 (60%)	549 (29%)	206 (11%)	1866

Types of Activities by Site

St. Agnes

Children engaged in other playground games, walking, and jogging/running in both the pre- and post-observations. Children also engaged in basketball during the pre-observation. Other

playground games included children playing with hula hoops, a parachute, balls, scooters, and bean bags in the pre-observation and children pushing trucks playing with hula hoops in the post-observation (Table 3).

Table 3: Activity Codes Present for St. Agnes

Activity	Pre-Test	Post-Test
Basketball	X	
Soccer		
Other playground games	X	X
Walking	X	X
Jogging/Running	X	X

Teays Valley

Children engaged in soccer, other playground games, walking, and jogging/running in both the pre- and post-observations. Children also engaged in "none of the above" during the post-

observation. The observer did not note details about "other playground games" or "none of the above" (Table 4).

Table 4: Activity Codes Present for Teays Valley

Activity	Pre-Test	Post-Test
Soccer	X	X
Other playground games	X	X
Walking	X	X
Jogging/Running	X	X
None of the above		X

Nutrition Standards Direct Observation

Direct observations were conducted at two sites (St. Agnes Child Development Center and Teays Valley Child Development Center) between April and September 2013.

Nutrition direct observations focused on the food and beverages provided to and discarded by children. Consumption of meals or snacks was assessed through measures of serving sizes, calories, fat, saturated fat, sodium, and sugar. Cumulative consumption across all children in a meal or snack period for a site was calculated as the difference between the meal or snack provided and the food and beverage waste for disposal.

St. Agnes

Sites were observed for one full meal or snack period. A photograph of the meal or snack provided was taken at each site and a total of 63 meals provided (30 pre and 33 post) and 63 meals consumed (30 pre and 33 post) photographs were captured at St. Agnes.

Meals Provided

From pre-observation to post-observation, the average number of calories, fat, sodium, and sugar decreased for the meals provided. Average calories provided decreased by 117.7 calories, fat decreased by 4.8 grams, sodium decreased by 150.5 milligrams, and sugar decreased by 28 grams. The saturated fat average increased 0.7 grams in the meals provided from pre to post. (See Table 5)

- *Pre-Observation:* St. Agnes served a family-style, lunch at both pre-observations. The meal included a beverage. For the pre-observations, the meals provided contained an average of 693.0 calories and 24.2 grams of fat (i.e., 31.4% of total calories from fat). Average saturated fat served was 7.1 grams, average sodium was 1095.4 milligrams, and average sugar was 76.5 grams (i.e., 44.2% of total calories from sugar). Differences between the pre-observation meals can be found in Table 5. See Figure 3 for an example of a pre meal provided.
- *Post-Observation:* St. Agnes served a family-style, lunch at both post-observations. The meal included a beverage. For the post-observations, the meals provided contained an average of 575.3 calories and 19.4 grams of fat (i.e., 30.3% of total calories from fat). Average saturated fat served was 7.8 grams, average sodium was 944.3 milligrams, and average sugar was 48.5 grams (i.e., 33.7% of total calories from sugar). Differences between the pre-observation meals can be found in Table 5. See Figure 4 for an example of a post meal provided.

Figure 3, St. Agnes
Pre-Observation Meal Provided



Figure 4, St. Agnes
Post-Observation Meal Provided



Table 5: St. Agnes Meals Provided: Average Calories, Fat, Saturated Fat, Sodium, Sugar

St. Agnes	Calories (kcal)	Fat (g)	Saturated Fat (g)	Sodium (mg)	Sugar (g)
Pre-Observation					
April 23, 2013 (n=15)	727.1	27.1	8.2	1381.5	71.6
April 29, 2013 (n=15)	658.9	21.3	5.9	809.4	81.4
Average	693.0	24.2	7.1	1095.4	76.5
Post-Observation					
September 9, 2013 (n=16)	479.4	16.7	5.1	955.2	30.5
September 10, 2013 (n=17)	671.2	22.0	10.5	934.6	66.4
Average	575.3	19.4	7.8	944.9	48.5

Meals Consumed

From pre-observation to post-observation, the average number of calories, fat, sodium, and sugar decreased for the meals consumed. Average calories provided decreased by 155.1 calories, fat decreased by 4.4 grams, sodium decreased by 249.9 milligrams, and sugar decreased by 19.2 grams. The saturated fat average increased 0.1 grams in the meals consumed from pre to post. (See Table 6)

- *Pre-Observation:* St. Agnes served a family-style, lunch at both pre-observations. The meal included a beverage. For the pre-observations, the children consumed an average of 518.7 calories and 17.8 grams of fat (i.e., 30.8% of total calories from fat). Average saturated fat served was 5.4 grams, average sodium was 799.8 milligrams, and average sugar was 47.1 grams (i.e., 36.3% of total calories from sugar). Differences between the pre-observation meals consumed can be found in Table 6. See Figure 5 for an example of a pre meal consumed
- *Post-Observation:* St. Agnes served a family-style, lunch at both post-observations. The meal included a beverage. For the post-observations, the children consumed an average of 363.6 calories and 13.4 grams of fat (i.e., 33.1% of total calories from fat). Average saturated fat served was 5.5 grams, average sodium was 549.9 milligrams, and average sugar was 27.9 grams (i.e., 30.7% of total calories from sugar). Differences between the pre-observation meals consumed can be found in Table 6. See Figure 6 for an example of a post meal consumed.

Figure 5, St. Agnes Pre-Observation Meal Consumed



Figure 6, St. Agnes Post-Observation Meal Consumed



Table 6: St. Agnes Meals Consumed: Average Calories, Fat, Saturated Fat, Sodium, Sugar

St. Agnes	Calories (kcal)	Fat (g)	Saturated Fat (g)	Sodium (mg)	Sugar (g)
Pre-Observation					
April 23, 2013 (n=15)	521.0	20.2	6.3	958.6	27.2
April 29, 2013 (n=15)	516.4	15.4	4.4	641.1	67.0
Average	518.7	17.8	5.4	799.8	47.1
Post-Observation					
September 9, 2013 (n=16)	285.5	9.6	2.4	457.3	21.3
September 10, 2013 (n=17)	441.7	17.3	8.6	642.5	34.6
Average	363.6	13.4	5.5	549.9	27.9

Fruit and Vegetable Servings

A serving was defined as one half cup of fruit or three quarters of a cup of vegetables. The average fruit servings provided stayed the same between pre- and post-observation. The average fruit servings consumed decreased by between pre- and post-observation. The average vegetable servings provided increased between pre- and post-observation. The average vegetable servings consumed increased between pre- and post-observation (Table 7).

Table 7: St. Agnes Average Fruit and Vegetable Servings Provided and Consumed

St. Agnes	Fruit Servings Provided	Fruit Servings Consumed (% of Provided)	Vegetable Servings Provided	Vegetable Servings Consumed (% of Provided)
Pre-Observation				
April 23, 2013 (n=15)	1.00	.47 (47%)	1.19	.92 (77%)
April 29, 2013 (n=15)	1.00	.42 (42%)	0.00	.00 (0%)
Average	1.00	.46 (44%)	0.60	.46 (39%)
Post-Observation				
September 9, 2013 (n=16)	1.00	.46 (46%)	1.00	.71 (71%)
September 10, 2013 (n=17)	1.00	.34 (34%)	1.00	.75 (75%)
Average	1.00	.40 (40%)	1.00	.73 (73%)

Teays Valley

Sites were observed for one full meal or snack period. A photograph of the meal or snack provided was taken at each site and a total of 93 meals provided (66 pre and 27 post) and 93 meals consumed (66 pre and 27 post) photographs were captured at Teays Valley.

Meals Provided

From pre-observation to post-observation, the average amount of sugar decreased for the meals provided, it decreased by 1.3 grams. The average amount of calories, fat, saturated fat, and sodium increased for the meals provided. Average calories provided increased by 26.6 calories, fat increased by 1.4 grams, and sodium increased by 385.5 milligrams in the meals provided. (See Table 8)

- *Pre-Observation:* Teays Valley served a non-family style, hot lunch at both pre-observations. The meal included a beverage. For the pre-observations, the meals provided contained an average of 414.1 calories and 11.3 grams of fat (i.e., 24.5% of total calories from fat). Average saturated fat served was 3.7 grams, average sodium was 441.6 milligrams, and average sugar was 34.8 grams (i.e., 33.6% of total calories from sugar). Differences between the pre-observation meals can be found in Table 8. See Figure 7 for an example of a pre meal provided.
- *Post-Observation:* Teays Valley served a non-family style, lunch at both post-observations. The meal included a beverage. For the post-observations, the meals provided contained an average of 440.7 calories and 12.7 grams of fat (i.e., 25.9% of total calories from fat). Average saturated fat served was 4.8 grams, average sodium was 827.1 milligrams, and average sugar was 33.5 grams (i.e., 30.4% of total calories from sugar). Differences between the pre-observation meals can be found in Table 8. See Figure 8 for an example of a post meal provided.

**Figure 7, Teays Valley
Pre-Observation Meal Provided**



**Figure 8, Teays Valley
Post-Observation Meal Provided**



Table 8: Teays Valley Meals Provided: Average Calories, Fat, Saturated Fat, Sodium, Sugar

Teays Valley	Calories (kcal)	Fat (g)	Saturated Fat (g)	Sodium (mg)	Sugar (g)
Pre-Observation					
April 25, 2013 (n=29)	425.0	8.7	3.4	461.6	35.1
May 3, 2013 (n=37)	403.3	13.8	4.0	421.7	34.5
Average	414.1	11.3	3.7	441.6	34.8
Post-Observation					
September 9, 2013 (n=14)	353.0	14.3	5.3	508.0	28.7
September 11, 2013 (n=13)	528.4	11.1	4.3	1146.2	38.2
Average	440.7	12.7	4.8	827.1	33.5

Meals Consumed

From pre-observation to post-observation, the average number of calories and sugar decreased. Average calories provided decreased by 8.4 calories and sugar decreased by 1.8 grams. Average fat, saturated fat, and sodium increased for the meals consumed from pre- to post-observation. Fat increased by 0.6 grams, saturated fat increased by 0.4 grams, and sodium increased by 198.4 milligrams. (See Table 9)

- Pre-Observation:* Teays Valley served a non-family style, lunch at both pre-observations. The meal included a beverage. For the pre-observations, the children consumed an average of 267.3 calories and 7.6 grams of fat (i.e., 25.6% of total calories from fat). Average saturated fat served was 2.4 grams, average sodium was 307.9 milligrams, and average sugar was 22.6 grams (i.e., 33.8% of total calories from sugar). Differences between the pre-observation meals consumed can be found in Table 9. See Figure 9 for an example of a pre meal consumed
- Post-Observation:* Teays Valley served a non-family style, lunch at both post-observations. The meal included a beverage. For the post-observations, the children consumed an average of 258.9 calories and 8.2 grams of fat (i.e., 29.2% of total calories from fat). Average saturated fat served was 2.8 grams, average sodium was 506.3 milligrams, and average sugar was 20.8 grams (i.e., 32.1% of total calories from sugar). Differences between the pre-observation meals consumed can be found in Table 9. See Figure 10 for an example of a post meal consumed.

Figure 9, Teays Valley Pre-Observation Meal Consumed



Figure 10, Teays Valley Post-Observation Meal Consumed



Table 9: Teays Valley Meals Consumed: Average Calories, Fat, Saturated Fat, Sodium, Sugar

Teays Valley	Calories (kcal)	Fat (g)	Saturated Fat (g)	Sodium (mg)	Sugar (g)
Pre-Observation					
April 25, 2013 (n=29)	251.1	5.3	2.1	322.5	21.1
May 3, 2013 (n=37)	283.4	9.8	2.6	293.3	24.1
Average	267.3	7.6	2.4	307.9	22.6
Post-Observation					
September 9, 2013 (n=14)	213.4	9.3	3.0	315.7	19.9
September 11, 2013 (n=13)	304.4	7.1	2.7	696.9	21.7
Average	258.9	8.2	2.8	506.3	20.8

Fruit and Vegetable Servings

A serving was defined as one half cup of fruit or three quarters of a cup of vegetables. The average fruit servings provided increased the same between pre- and post-observation. The average fruit servings consumed increased by between pre- and post-observation. The average vegetable servings provided decreased between pre- and post-observation. The average vegetable servings consumed increased between pre- and post-observation (Table 10).

Table 10: Teays Valley Average Fruit and Vegetable Servings Provided and Consumed

Teays Valley	Fruit Servings Provided	Fruit Servings Consumed (% of Provided)	Vegetable Servings Provided	Vegetable Servings Consumed (% of Provided)
Pre-Observation				
April 25, 2013 (n=29)	1.00	.31 (31%)	1.00	0.05 (5%)
May 3, 2013 (n=37)	1.00	.32 (32%)	1.00	0.46 (46%)
Average	1.00	.32 (32%)	1.00	.26 (26%)
Post-Observation				
September 9, 2013 (n=14)	1.25	.49 (39%)	0.25	0.01 (4%)
September 11, 2013 (n=13)	1.25	.73 (58%)	1.25	0.79 (63%)
Average	1.25	.61 (49%)	0.75	.40 (34%)

Environmental Audit

St. Agnes

Physical Activity Standards

A physical activity pre-environmental audit was conducted April 23, 2013 and a post-environmental audit was conducted September 9, 2013. St. Agnes is a child care center that serves both early child care and after school care/education and summer care and education. The center is open Monday-Friday from 7:30am to 6:00pm. There were no differences between the pre and post audit for facility characteristics.

Recreational Courts

St. Agnes had a multi-use court present at both the pre- and post-audit. The auditor noted in the pre-audit that the court had faded permanent markings for four-square. Both the pre- and post-audit noted the presence of the following equipment, basketball post, basketball backboard, basketball hoop, and basketball court markings. The pre-audit noted the quantity of the equipment but the post-audit did not. Both audits noted the presence of benches. The quantity of benches reported increased in the post-audit. All of the features were rated to be in good condition (i.e., well-kept and clean) at both the pre- and post-audit. No lighting was present at either audit.

Differences observed post-audit (either real or error):

- Addition of two benches

Tracks/paths/trail

St. Agnes featured a path/trail during both the pre- and post-audit. The path had a smooth surface with a flat or gentle slope. The post-test auditor indicated that there were markings or arrows on the path. All of the features were rated to be in good condition (i.e., well-kept and clean) during both the pre- and post-audit. No lighting was present at either audit.

Differences observed post-audit (either real or error):

- Auditor noted that the path was marked with arrows.

Playground Features

St. Agnes had two playground areas, portions of which were available to students. The playgrounds in total featured one toddler swing, eleven slides, seven climbing features (i.e., rock climbing wall, ropes/nets), one spring rocker, three four-square courts, and two playhouses. There were also 16 youth swings not available to St. Agnes students. A geometric climbing dome was noted in the pre-audit, but the dome was not available to preschool students. The three marked four-square courts were freshly painted in the post-audit. All of the features were rated to be in good condition (i.e., well-kept and clean) during both the pre- and post-audit. No lighting was present at either audit. The auditor noted the presence of the following portable equipment in the pre-audit: two basketball hoops, three tricycles, and three ride-on cars. The auditor noted in the post-audit the addition of a tricycle and a ride-on car.

Differences observed post-audit (either real or error):

- Absence of geometric climbing dome (not available to preschool students in pre-audit)
- Addition of hopscotch lines
- Repainted four-square court lines (on basketball court)
- Addition of portable equipment: one new tricycle and one new ride-on car.

Other recreational spaces

St. Agnes had open green space present. The pre-audit indicated one open green space and the post-audit indicated two open green spaces. St. Agnes had designated indoor space for open play; the auditor noted that the space was a gymnasium. This space was used for all activities, including running. Equipment available at both audits included: balls and portable play. The pre-audit noted the availability of scooters. The post-audit indicated the presence of jump ropes, tricycles, and hula hoops. The auditor noted that the equipment was only available during play time.

Differences observed post-audit (either real or error):

- Addition of open green space.
- Absence of scooters.
- Addition of jump ropes, tricycles, and hula hoops.

Incivilities

There was no evidence of incivilities (i.e., garbage/litter, broken glass, graffiti/tagging, evidence of alcohol or other drug use, sex paraphernalia) present at both the pre- and post-audit.

Nutrition Standards

A nutrition activity pre-environmental audit was conducted April 23, 2013 and a post-environmental audit was conducted September 9, 2013. St. Agnes is a child care center that serves both early child care and after school care/education and summer care and education. The center is open Monday-Friday from 7:30am to 6:00pm. There were no differences between the pre- and post-audit for facility characteristics.

Food Preparation Environment

St. Agnes' food preparation environment had the following available at both the pre- and post-audit: refrigeration and/or cooling system; food preparation space, including a sink and counter area; sufficient cooking equipment; an oven; and a stovetop range. St. Agnes also had a garden available for educational purposes and to supplement food service.

Meal or Snack Environment

St. Agnes had a water fountain available in the hallway. There were no vending machines, competitive foods present, point of purchase prompts, or other food and beverage advertisements present. Meals were served in the classroom.

Beverages Available (Menu Review)

St. Agnes offered 1% milk and water during the meal/snack period. The center did not offer juice or sugar sweetened beverages

Meal Foods Available (Menu Review)

Breakfast and lunch/dinner were served at St. Agnes. Breakfast items available at the pre-audit included: frozen or canned fruits (no syrup), high-fat meats, and biscuits. Breakfast items available at the post-audit included: fresh fruit and multi-grain Cheerios. Lunch items available at the pre-audit included: fried or pre-fried meats, macaroni and cheese, and condiments such as ketchup and ranch dressing. Lunch items available at the post-audit included: fresh fruit and vegetables. Salad bar foods (i.e., green vegetables and red vegetables) were available at the pre-audit but were not indicated during the post-audit. Snack foods available at the pre-audit included: salty foods (e.g., potato chips, popcorn) and hummus. Snack foods available at the post-audit included: salsa and cheesy baked zucchini fries.

Differences observed post-audit (either real or error):

- Absence of frozen or canned fruits (no syrup), high-fat meats, and biscuits for breakfast
- Addition of fresh fruit and multi-grain Cheerios for breakfast
- Absence of fried or pre-fried meats, macaroni and cheese, and condiments such as ketchup and ranch dressing for lunch
- Addition of fresh fruit and vegetables for lunch
- Absence of salad bar foods (i.e., green vegetables and red vegetables)
- Absence of salty foods (e.g., potato chips, popcorn) and hummus for snack
- Addition of salsa and cheesy baked zucchini fries for snack

Teays Valley

Physical Activity Standards

A physical activity pre-environmental audit was conducted April 25, 2013 and a post-environmental audit was conducted September 9, 2013. Teays Valley is a faith-based center. The post-audit noted that the center was also a child care center, that the center served both early child care and after-school care/education and summer care and education and that center was open Monday-Friday from 6:00am to 6:00pm.

Recreational Courts

The pre-audit indicated the presence of a recreational court, the type was not indicated. The following equipment was available in the pre-audit: basketball post, basketball backboard, and basketball hoop. The auditor also noted the presence of a moveable/temporary basketball hoop. The post-audit had no indication of recreational courts, though the auditor noted the presence of basketball hoops on a parking lot covered in cars. All of the features noted in the pre-audit were rated to be in good condition (i.e., well-kept and clean) during. No lighting was present at either audit.

Differences observed post-audit (either real or error):

- No indication of recreational courts

- Absence of recreational equipment including: basketball post, basketball backboard, and basketball hoop.
- Absence of moveable/temporary basketball hoop.
- Basketball hoops present on a parking lot, but the lot was covered in cars

Playground Features

Teays Valley had a playground for their students. The playgrounds featured four youth swings, one slide, one climbing feature, one spring rocker, a music station, art table, and bike merry-go-rounds. The pre-audit noted the presence of a spring rocker, two bubble tables, and seven picnic tables. The pre-audit also noted the presence of footballs, basketballs, and soccer balls. The post-audit noted the presence of monkey bars/climbing bars, a ball catcher, and six picnic tables. All of the features were rated to be in good condition (i.e., well-kept and clean) during both the pre- and post-test at each site. No lighting was present during any of the audits.

Differences observed post-audit (either real or error):

- Addition of Monkey bars/climbing bars
- Addition of bubble tables
- Absence of spring rocker
- Absence of picnic table
- Absence of footballs, basketballs, and soccer balls.

Other recreational spaces

In the pre-audit, Teays Valley had an indoor play room with carpet on the floor. This room was not noted in the post-audit. Teays Valley had designated indoor space for open play. This space was used for all activities, including running. Equipment available at both audits included: balls, tunnels, climbing, balancing, jump ropes, portable play, tricycles, scooters, parachutes, hop balls, and hockey sticks.

The pre-audit noted the availability of mats, hula hoops, bean bag toss, ball pit balls, a basketball hoop, and obstacle cones. The post-audit indicated the presence of hopscotch, ribbons, bowling, tic-tac-toe, Frisbee, basketballs, a tent, balls, foam noodles and a limbo bar. The auditor noted that the equipment was only available during play time.

Differences observed post-audit (either real or error):

- Absence of indoor play room with carpet.
- Absence of mats, hula hoops, bean bag toss, ball pit balls, a basketball hoop, and obstacle cones.
- Addition of hopscotch, ribbons, bowling, tic-tac-toe, Frisbee, basketballs, a tent, balls, foam noodles and a limbo bar

Incivilities

There was no evidence of incivilities (i.e., garbage/litter, broken glass, graffiti/tagging, evidence of alcohol or other drug use, sex paraphernalia) present at both the pre- and post-audit.

Nutrition Standards

A nutrition activity pre-environmental audit was conducted April 25, 2013 and a post-environmental audit was conducted September 9, 2013. Teays Valley is a faith-based center that serves both early child care and after school care/education and summer care and education. The center is open Monday-Friday from 6:00am to 6:00pm. There were no differences between the pre and post audit for facility characteristics.

Food Preparation Environment

Teays Valley's food preparation environment had the following available at both the pre- and post-audit: refrigeration and/or cooling system; food preparation space, including a sink and counter area; sufficient cooking equipment; an oven; and a stovetop range.

Meal or Snack Environment

Teays Valley reported the presence of two water fountains in the hallway during the pre-audit, but indicated the fountains were not available for use; water was poured into cups for drinking. Water fountains were not reported in the post-audit. The pre-audit indicated that meals were served in the middle of the facility. A location for meals was not reported in the post-audit. There were no vending machines, competitive foods present, point of purchase prompts, or other food and beverage advertisements present.

Differences observed post-audit (either real or error):

- Absence water fountains
- Absence of meal location

Beverages Available (Menu Review)

Teays Valley offered 1% milk during the meal/snack period. The center did not offer juice or sugar sweetened beverages. Skim chocolate milk was available for snack during the pre-audit. Water was available for the meal/snack period during the post-audit.

Differences observed post-audit (either real or error):

- Absence of skim chocolate milk for snack
- Addition of water for meal/snack period.

Meal Foods Available (Menu Review)

Breakfast and lunch/dinner were served at Teays Valley. High-fiber, whole grain food was available for breakfast at both the pre- and post-audit. Fresh fruit was available for breakfast at the post-audit. Additionally, there was an early breakfast option at Teays Valley at the pre-audit that included: whole grain pop tarts, cereal bowls, fruit cups, and skim milk. Lunch food items available at both the pre- and post-audit included: fresh fruit or vegetables; lean meats; and high-fiber, whole grain foods. Frozen or canned fruit or vegetables with syrup or butter were available for lunch at the pre-audit. Frozen or canned fruit or vegetables without syrup or butter were available for lunch at the post-audit. High-fiber, whole grain foods were available for snack at the pre-audit. Snack foods available at the post-audit included: frozen or canned fruit without syrup, cottage cheese or yogurt, salty foods, string cheese. Salad bar foods were not available at either the pre- or post-audit.

Differences observed post-audit (either real or error):

- Addition of fresh fruit for breakfast.
- Absence of early breakfast option that included whole grain pop tarts, cereal bowls, fruit cups, and skim milk
- Absence of frozen or canned fruit or vegetables with syrup or butter for lunch
- Addition of frozen or canned fruit or vegetables without syrup or butter for lunch
- Absence of high-fiber, whole grain foods for snack
- Addition of frozen or canned fruit without syrup, cottage cheese or yogurt, salty foods, string cheese for snack

Appendix A

Table 1: Nutrition Information by Site Pre-Test

St. Agnes 4.23.13			
Nutrient	Amount Provided	Amount Discarded	Amount Consumed
Calories (kcal)	727.1	206.1	521.0
Fat (g)	27.1	6.9	20.2
Saturated Fat (g)	8.2	1.9	6.3
Sodium (mg)	1381.5	422.9	958.6
Sugar (g)	71.6	44.3	27.2

St. Agnes 4.29.13			
Nutrient	Amount Provided	Amount Discarded	Amount Consumed
Calories (kcal)	658.9	142.6	516.4
Fat (g)	21.3	5.9	15.4
Saturated Fat (g)	5.9	1.5	4.4
Sodium (mg)	809.4	168.3	641.1
Sugar (g)	81.4	14.4	67.0

Teays Valley 4.25.13			
Nutrient	Amount Provided	Amount Discarded	Amount Consumed
Calories (kcal)	425.0	173.8	251.1
Fat (g)	8.7	3.4	5.3
Saturated Fat (g)	3.4	1.3	2.1
Sodium (mg)	461.6	139.2	322.5
Sugar (g)	35.1	14.0	21.1

Teays Valley 5.3.13			
Nutrient	Amount Provided	Amount Discarded	Amount Consumed
Calories (kcal)	403.3	119.9	283.4
Fat (g)	13.8	4.0	9.8
Saturated Fat (g)	4.0	1.4	2.6
Sodium (mg)	421.7	128.3	293.3
Sugar (g)	34.5	10.4	24.1

Table 2: Nutrition Information by Site Post-Test

St. Agnes 9.9.13			
Nutrient	Amount Provided	Amount Discarded	Amount Consumed
Calories (kcal)	479.4	193.8	285.5
Fat (g)	16.7	7.1	9.6
Saturated Fat (g)	5.1	2.7	2.4
Sodium (mg)	955.2	497.9	457.3
Sugar (g)	30.5	9.2	21.3

St. Agnes 9.10.13			
Nutrient	Amount Provided	Amount Discarded	Amount Consumed
Calories (kcal)	671.2	229.6	441.7
Fat (g)	22.0	4.7	17.3
Saturated Fat (g)	10.5	1.9	8.6
Sodium (mg)	934.6	292.0	642.5
Sugar (g)	66.4	31.9	34.6

Teays Valley 9.9.13			
Nutrient	Amount Provided	Amount Discarded	Amount Consumed
Calories (kcal)	353.0	139.6	213.4
Fat (g)	14.3	5.0	9.3
Saturated Fat (g)	5.3	2.4	3.0
Sodium (mg)	508.0	192.3	315.7
Sugar (g)	28.7	8.7	19.9

Teays Valley 9.11.13			
Nutrient	Amount Provided	Amount Discarded	Amount Consumed
Calories (kcal)	528.4	224.0	304.4
Fat (g)	11.1	4.0	7.1
Saturated Fat (g)	4.3	1.6	2.7
Sodium (mg)	1146.2	449.3	696.9
Sugar (g)	38.2	16.5	21.7

Table 3: Physical Activity Environmental Audit

Facility Characteristics	St. Agnes		Teays Valley	
	Pre (4.23.13)	Post (9.9.13)	Pre (4.25.13)	(Post 9.9.13)
<i>Setting</i>				
Child care center	X	X		X
Faith-based center			X	X
<i>Types of Services</i>				
Early child care and education only				
After-school care and education only				
Both early child care and after-school care/education	X	X	*	X
Summer care and education (all ages)	X	X	*	X
Other, specify:				
<i>Hours of Operation</i>				
Monday through Friday: open	7:30 AM	7:30 AM	*	6:00 AM
Monday through Friday: close	6:00 PM	6:00 PM	*	6:00 PM
<i>Incivilities</i>				
No garbage/litter present	X	X	X	X
No broken glass present	X	X	X	X
No graffiti/tagging present	X	X	X	X
No evidence of alcohol or other drug use	X	X	X	X
No sex paraphernalia present	X	X	X	X

*Auditors did not indicate these characteristics

Table 3 (continued): Physical Activity Environmental Audit

Facility Characteristics	St. Ages		Teays Valley	
	Pre (4.23.13)	Post (9.9.13)	Pre (4.25.13)	Post (9.9.13)
<i>Recreational Courts</i>				
Courts, basketball				
Courts, multi-use	X	X		
Courts, other			X	
Equipment, basketball post	X (3)	X	X	*
Equipment, basketball backboard	X (3)	X	X	*
Equipment, basketball hoop	X (3)	X	X	*
Equipment, basketball court markings	X (2)	X		
Equipment, other, bench	X (1)	X (3)		
Equipment, other, movable basketball hoop			X	
<i>Tracks/paths/trails</i>				
Path/trail	X (1)	X (1)		
Surface, smooth	X	X		
Slope, flat or gentle	X	X		
Markings, arrows		X		
<i>Playground features</i>				
Swings, youth	X (16) ^{***}	X (16) ^{***}	X (4)	X (4)
Swings, toddler	X (1)	X (1)		
Slides	X (11)	X (11)	X (1)	X (1)
Monkey bars/climbing bars				X (1)
Climbing feature (rock climbing wall, ropes/nets)	X (7)	X (7)	X (1)	X (1)
Spring rockers	X (1)	X (1)	X (1)	
Marked four-square courts ^{**}	X (3) ^{**}	X (3) ^{**}		
Marked hopscotch areas		X (1)		
Other play areas: geometric climbing dome ^{***}	X (1)			
Other play areas: playhouses	X (2)	X (2)		

*Auditors did not indicate these characteristics but included a comment about basketball hoop on the parking lot

**Auditor indicated that the markings were fading at pre-test, but were freshly painted at post-test

***One playground had portions not available to students; this includes the youth swings and geometric climbing dome

Table 3 (continued): Physical Activity Environmental Audit

Facility Characteristic	St. Agnes		Teays Valley	
	Pre (4.23.13)	Post (9.9.13)	Pre (4.25.13)	Post (9.9.13)
<i>Playground features (continued)</i>				
Other play areas: xylophone/music chimes			X (1)	X (1)
Other play areas: art table/dry erase board			X (1)	X (1)
Other play areas: bubble tables			X (2)	
Other play areas: ball catcher				X (1)
Other play areas: picnic tables			X (7)	X (6)
Other play areas: bike merry-go-rounds			X (2)	X (2)
Surface, rubber tiles, synthetic surface	X	X		
Surface, hard			X	
Surface, loose fill				X
<i>Other recreational spaces</i>				
Open green space	X (1)	X (2)		
Other recreational spaces, other (specify): indoor play room			X	
Classroom or designated indoor space for open play	X	X	X	X
Activities, all, including running	X	X	X	X
Equipment, mats			X	
Equipment, balls	X	X	X	X
Equipment, tunnels			X	X
Equipment, climbing			X	X
Equipment, balancing			X	X
Equipment, jump ropes		X	X	X
Equipment, hop scotch				X
Equipment, portable play	X	X	X	X
Equipment, ribbons				X
Equipment, tricycles		X	X	X
Equipment, scooters	X		X	X

Table 3 (continued): Physical Activity Environmental Audit

Facility Characteristic	St. Agnes		Teays Valley	
	Pre (4.23.13)	Post (9.9.13)	Pre (4.25.13)	Post (9.9.13)
<i>Other recreational features (continued)</i>				
Equipment, other (specify): hula hoops		X	X	
Equipment, other (specify): parachutes			X	X
Equipment, other (specify): hop balls			X	X
Equipment, other (specify): hockey sticks			X	X
Equipment, other (specify): bean bag toss			X	
Equipment, other (specify): ball pit balls			X	
Equipment, other (specify): basketball hoop			X	
Equipment, other (specify): obstacle cones			X	
Equipment, other (specify): bowling				X
Equipment, other (specify): tic tac toe				X
Equipment, other (specify): frisbee				X
Equipment, other (specify): basketballs				X
Equipment, other (specify): tent				X
Equipment, other (specify): balls				X
Equipment, other (specify): foam noodles				X
Equipment, other (specify): limbo bar				X

Table 4a: Physical Activity Characteristics Not Present St. Agnes Post-Audit

<i>Hours of operation</i>	<i>Swimming pools</i>
Days of service: Sunday	
Days of service: Saturday	
<i>Recreational fields</i>	<i>Playground features</i>
Soccer	Swings, toddler
Football	monkey bars/climbing bars
Baseball	Sandboxes
Multi-use	Marked four-square courts
Equipment	
<i>Recreational courts</i>	<i>Other recreational spaces</i>
Basketball	
Tennis	
Volley ball	
	<i>Tracks/paths/trails</i>
	Track

Table 4b: Physical Activity Characteristics Not Present Teays Valley Post-Audit

<i>Hours of operation</i>	<i>Recreational courts</i>
Days of service: Sunday	Basketball
Days of service: Saturday	Tennis
<i>Recreational fields</i>	Volleyball
Soccer	Multi-use
Football	Equipment
Baseball	
Multi-use	<i>Playground features</i>
Equipment	Swings, toddler
<i>Tracks/paths/trails</i>	Spring rockers
	Marked four-square courts
	Marked hopscotch areas
<i>Swimming pools</i>	<i>Other recreational spaces</i>

Table 5: Nutrition Environmental Audit

Facility Characteristic	St. Agnes		Teays Valley	
	Pre (4.23.13)	Post (9.9.13)	Pre (4.25.13)	Post (9.9.13)
<i>Setting</i>				
Child care center	X	X		
Faith-based center			X	X
<i>Types of Services</i>				
Early child care and after-school care/education	X	X	X	X
Summer care and education	X	X	X	X
<i>Hours of Operation</i>				
Monday through Friday: open	7:30 AM	7:30 AM	6:00 AM	6:00 AM
Monday through Friday: close	6:00 PM	6:00 PM	6:00 PM	6:00 PM
<i>Food preparation environment</i>				
Refrigeration and/or cooling system	X	X	X	X
Food preparation space, including sink and counter	X	X	X	X
Oven	X	X	X	X
Cook top/stove/range	X	X	X	X
Sufficient equipment	X	X	X	X
Garden to supplement food service	X	X		
Garden for educational purposes	X	X		
<i>Meal or snack environment</i>				
Water fountain	Hallway	Hallway		
Hot meal located	Classroom	Classroom	Middle	
<i>Beverages available</i>				
1% milk	X	X	X	X
Skim chocolate milk			X	
Water	X	X		X
<i>Meal foods available (menu review)</i>				
Breakfast: fresh fruit		X		X

Breakfast: frozen or canned fruits (no syrup)	X			
Breakfast: high-fat meats	X			
Breakfast: high-fiber, whole grain foods			X	X
Breakfast: other	Biscuits	Multigrain Cheerios		
Lunch/dinner: fresh fruit or vegetables		X	X	X

Table 5 (continued): Nutrition Environmental Audit

Facility Characteristic	St. Agnes		Teays Valley	
	Pre (4.23.13)	Post (9.9.13)	Pre (4.25.13)	Post (9.9.13)
<i>Meal foods available (menu review continued)</i>				
Lunch/dinner: frozen or canned fruits or vegetables (no syrup or butter)	X			X
Lunch/dinner: frozen or canned fruit or vegetables (w/syrup or butter)			X	
Lunch/dinner: fried or pre-fried meats	X			
Lunch/dinner: lean meats			X	X
Lunch: high-fiber, whole grain foods			X	X
Lunch/dinner: other	Ketchup	Veggie lasagna		
Lunch/dinner: other	Ranch dressing			
Lunch/dinner: other	Macaroni & cheese			
Salad bar foods: green vegetables	X			
Salad bar: red vegetables	X			
Snack foods: frozen or canned fruit (no syrup)				X
Snack foods: cottage cheese or yogurt				X
Snack foods: high-fiber, whole grain foods			X	
Snack foods: salty foods	X			X
Snack foods: other	Hummus	Salsa	Sun butter	String cheese
Snack foods: other		Cheesy baked		

		zucchini fries		
Other competitive foods and beverages			Whole grain pop tart	
Other competitive foods and beverages			Cereal bowl	
Other competitive foods and beverages			Fruit cups	
Beverage available in other locations			Skim milk	

Table 6: Nutrition Characteristics *not* Present St. Agnes Post-Audit

<i>Facility characteristics</i>	<i>Lunch/dinner foods</i>
Days of service: Sunday	Frozen or canned fruit or vegetables (w/syrup or butter)
Days of service: Saturday	Vegetables cooked with fat
	Cottage cheese or low-fat yogurt
<i>Meal or snack environment</i>	Fried or pre-fried vegetables
Hot meal area	Fried or pre-fried meats
Salad bar	High fat meats
Competitive foods	Beans
Vending machines	Lean meats, fish, poultry
Water fountains	High-fiber, whole grain foods
Point of purchase prompts	Sweet foods
	Salty foods
<i>Beverages available</i>	<i>Salad bar foods</i>
Skim milk	Fresh fruit (1-5+ types)
2% milk	Green vegetables
Whole or Vitamin D milk	Orange vegetables
Flavored whole milk	Starchy vegetables
Rice milk	Cottage cheese or low-fat yogurt
Soy milk	Nuts, seeds, legumes
Lactaid	Bacon bits or croutons
100% juice	
Sugar sweetened beverages	
<i>Breakfast foods</i>	<i>Competitive foods</i>
Frozen or canned fruits (no syrup)	<i>Snack foods</i>
Frozen or canned fruits with syrup	<i>Vending machines</i>
Cottage cheese or low-fat yogurt	<i>Other competitive foods</i>
Fried or pre-fried vegetables	
High-fat meats	
Lean meats	
Sweet foods	

Table 7: Nutrition Characteristics *not* Present Teays Valley Post-Audit

<i>Facility characteristics</i>	<i>Lunch/dinner foods</i>
Days of service: Sunday	Frozen or canned fruit or vegetables (with syrup or butter)
Days of service: Saturday	Vegetables cooked with fat
	Cottage cheese or low-fat yogurt
<i>Meal or snack environment</i>	Fried or pre-fried meats
Hot meal area	High-fat meats
Salad bar	Beans
Competitive foods	Sweet foods
Vending machines	Salty foods
Water fountains	
Point of purchase prompts	<i>Salad bar foods</i>
<i>Beverages available</i>	<i>Competitive foods</i>
Skim milk	
2% milk	<i>Snack foods</i>
Whole or Vitamin D milk	Frozen or canned fruits or vegetables with syrup
Flavored whole milk	Frozen or canned vegetables
Rice milk	Sweet foods
Soy milk	
Lactaid	<i>Vending machines</i>
100% juice	
Sugar sweetened beverages	<i>Other competitive foods</i>
<i>Breakfast foods</i>	
Frozen or canned fruits (no syrup)	
Frozen or canned fruits with syrup	
Cottage cheese or low-fat yogurt	
Fried or pre-fried vegetables	
High-fat meats	
Lean meats	
Sweet foods	

Appendix B

**Appendix B
Child Care & After-School Physical Activity
Standards Direct Observation Tool**

Facility name: _____

Facility address: _____

Observer 1: _____

Observer 2: _____

Size of facility (number of youth): _____

Evaluation of Healthy Kids, Healthy Communities

Child care facility ID (*Transtria use only*): _____

Community partnership: _____

Date: _____

Weather: _____

Start Time: ___ : ___ ○ AM ○ PM

End Time: ___ : ___ ○ AM ○ PM

Facility characteristics

1. What is the type of facility? (*Circle one.*)

School	Community center	Child care center	Faith-based center	Other, specify:
--------	------------------	-------------------	--------------------	-----------------

2. What types of services does this facility provide?

2.a. Early child care and education only	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2.b. After-school care and education only	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2.c. Both early child care and after-school care/education	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2.d. Summer care and education (all ages)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2.e. Other, specify:	<input type="checkbox"/> No	<input type="checkbox"/> Yes

Days of service	Start time	End time	Not open
3.a. Sunday			
3.b. Monday			
3.c. Tuesday			
3.d. Wednesday			
3.e. Thursday			
3.f. Friday			
3.g. Saturday			

Comments:

Evaluation of Healthy Kids, Healthy Communities

Child Care & After-School Physical Activity Standards Play Spaces Mapping Table

Facility Name/Address: _____ Observer Name: _____

Community Partnership: _____ Weather Condition: _____ Date: _____

Play Space	Setting	Location	Type	Condition	Surface	Intervention
1	<input type="checkbox"/> Park <input type="checkbox"/> School <input type="checkbox"/> Community Center <input type="checkbox"/> Early childhood education center <input type="checkbox"/> Other playground <input type="checkbox"/> Other recreation facility <input type="checkbox"/> Other:	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Court <input type="checkbox"/> Field <input type="checkbox"/> Playground <input type="checkbox"/> Pool <input type="checkbox"/> Gym <input type="checkbox"/> Multi-purp. room <input type="checkbox"/> Multi-purp. field <input type="checkbox"/> Other:	<input type="checkbox"/> Usable <input type="checkbox"/> Equipment <input type="checkbox"/> Other:	<input type="checkbox"/> Sand/dirt <input type="checkbox"/> Grass <input type="checkbox"/> Gravel <input type="checkbox"/> Wood chips/ mulch <input type="checkbox"/> Foam/ rubber/ tile <input type="checkbox"/> Cement/ pavement <input type="checkbox"/> Hardwood <input type="checkbox"/> Carpet <input type="checkbox"/> Other:	
2	<input type="checkbox"/> Park <input type="checkbox"/> School <input type="checkbox"/> Community Center <input type="checkbox"/> Early childhood education center <input type="checkbox"/> Other playground <input type="checkbox"/> Other recreation facility <input type="checkbox"/> Other:	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Court <input type="checkbox"/> Field <input type="checkbox"/> Playground <input type="checkbox"/> Pool <input type="checkbox"/> Gym <input type="checkbox"/> Multi-purp. room <input type="checkbox"/> Multi-purp. field <input type="checkbox"/> Other:	<input type="checkbox"/> Usable <input type="checkbox"/> Equipment <input type="checkbox"/> Other:	<input type="checkbox"/> Sand/dirt <input type="checkbox"/> Grass <input type="checkbox"/> Gravel <input type="checkbox"/> Wood chips/ mulch <input type="checkbox"/> Foam/ rubber/ tile <input type="checkbox"/> Cement/ pavement <input type="checkbox"/> Hardwood <input type="checkbox"/> Carpet <input type="checkbox"/> Other:	
3	<input type="checkbox"/> Park <input type="checkbox"/> School <input type="checkbox"/> Community Center <input type="checkbox"/> Early childhood education center <input type="checkbox"/> Other playground <input type="checkbox"/> Other recreation facility <input type="checkbox"/> Other:	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Court <input type="checkbox"/> Field <input type="checkbox"/> Playground <input type="checkbox"/> Pool <input type="checkbox"/> Gym <input type="checkbox"/> Multi-purp. room <input type="checkbox"/> Multi-purp. field <input type="checkbox"/> Other:	<input type="checkbox"/> Usable <input type="checkbox"/> Equipment <input type="checkbox"/> Other:	<input type="checkbox"/> Sand/dirt <input type="checkbox"/> Grass <input type="checkbox"/> Gravel <input type="checkbox"/> Wood chips/ mulch <input type="checkbox"/> Foam/ rubber/ tile <input type="checkbox"/> Cement/ pavement <input type="checkbox"/> Hardwood <input type="checkbox"/> Carpet <input type="checkbox"/> Other:	

Evaluation of Healthy Kids, Healthy Communities

Play Space	Setting	Location	Type	Condition	Surface	Intervention
4	<input type="checkbox"/> Park <input type="checkbox"/> School <input type="checkbox"/> Community Center <input type="checkbox"/> Early childhood education center <input type="checkbox"/> Other playground <input type="checkbox"/> Other recreation facility <input type="checkbox"/> Other:	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Court <input type="checkbox"/> Field <input type="checkbox"/> Playground <input type="checkbox"/> Pool <input type="checkbox"/> Gym <input type="checkbox"/> Multi-purp. room <input type="checkbox"/> Multi-purp. field <input type="checkbox"/> Other:	<input type="checkbox"/> Usable <input type="checkbox"/> Equipment <input type="checkbox"/> Other:	<input type="checkbox"/> Sand/dirt <input type="checkbox"/> Grass <input type="checkbox"/> Gravel <input type="checkbox"/> Wood chips/ mulch <input type="checkbox"/> Foam/ rubber/ tile <input type="checkbox"/> Cement/ pavement <input type="checkbox"/> Hardwood <input type="checkbox"/> Carpet <input type="checkbox"/> Other:	
5	<input type="checkbox"/> Park <input type="checkbox"/> School <input type="checkbox"/> Community Center <input type="checkbox"/> Early childhood education center <input type="checkbox"/> Other playground <input type="checkbox"/> Other recreation facility <input type="checkbox"/> Other:	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Court <input type="checkbox"/> Field <input type="checkbox"/> Playground <input type="checkbox"/> Pool <input type="checkbox"/> Gym <input type="checkbox"/> Multi-purp. room <input type="checkbox"/> Multi-purp. field <input type="checkbox"/> Other:	<input type="checkbox"/> Usable <input type="checkbox"/> Equipment <input type="checkbox"/> Other:	<input type="checkbox"/> Sand/dirt <input type="checkbox"/> Grass <input type="checkbox"/> Gravel <input type="checkbox"/> Wood chips/ mulch <input type="checkbox"/> Foam/ rubber/ tile <input type="checkbox"/> Cement/ pavement <input type="checkbox"/> Hardwood <input type="checkbox"/> Carpet <input type="checkbox"/> Other:	
6	<input type="checkbox"/> Park <input type="checkbox"/> School <input type="checkbox"/> Community Center <input type="checkbox"/> Early childhood education center <input type="checkbox"/> Other playground <input type="checkbox"/> Other recreation facility <input type="checkbox"/> Other:	<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Court <input type="checkbox"/> Field <input type="checkbox"/> Playground <input type="checkbox"/> Pool <input type="checkbox"/> Gym <input type="checkbox"/> Multi-purp. room <input type="checkbox"/> Multi-purp. field <input type="checkbox"/> Other:	<input type="checkbox"/> Usable <input type="checkbox"/> Equipment <input type="checkbox"/> Other:	<input type="checkbox"/> Sand/dirt <input type="checkbox"/> Grass <input type="checkbox"/> Gravel <input type="checkbox"/> Wood chips/ mulch <input type="checkbox"/> Foam/ rubber/ tile <input type="checkbox"/> Cement/ pavement <input type="checkbox"/> Hardwood <input type="checkbox"/> Carpet <input type="checkbox"/> Other:	

**Child Care & After-School Nutrition Standards
Direct Observation Tool**

Evaluation of Healthy Kids, Healthy Communities

Facility name: _____

Child care facility ID (*Transtria use only*): _____

Facility address: _____

Size of facility (number of youth): _____

Photographer 1: _____

Community partnership: _____

Photographer 2: _____

Date: _____

Assistant 1: _____

Start Time: ___ : ___ ○ AM ○ PM

Assistant 2: _____

End Time: ___ : ___ ○ AM ○ PM

Section A: Facility characteristics

1. What is the type of facility? (*Circle one.*)

School	Community center	Child care center	Faith-based center	Other, specify:
--------	------------------	-------------------	--------------------	-----------------

2. What types of services does this facility provide?

2.a. Early child care and education only	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2.b. After-school care and education only	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2.c. Both early child care and after-school care/education	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2.d. Summer care and education (all ages)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
2.e. Other, specify:	<input type="checkbox"/> No	<input type="checkbox"/> Yes

Days of service	Start time	End time	Not open
3.a. Sunday			
3.b. Monday			
3.c. Tuesday			
3.d. Wednesday			
3.e. Thursday			
3.f. Friday			
3.g. Saturday			

Section B: Background nutrition information

1. What type of meal provided by the facility is being observed? (*Circle one.*)

Family style	Non-family style hot meal	A la carte	Snack	Other, specify:
--------------	---------------------------	------------	-------	-----------------

2. Which meal or snack is being observed? (*Circle one.*)

Breakfast	Morning snack	Lunch	Afternoon snack	Dinner
-----------	---------------	-------	-----------------	--------

3. Provide a description of the meal or snack.

3.a. Meal options (including a la carte):
3.b. Snack options:
3.c. Beverage options:

4. Staff present during meal or snack (number of unique staff):

5. Staff joining youth for snack or meal (number of unique staff):

6. Staff encouraging youth to try everything on their plate (number of unique staff):

Comments:

Evaluation of Healthy Kids, Healthy Communities

Physical Activity Environmental Audit Tool for Child Care Settings Child care facility ID (*Transtria use only*): _____

Facility name: _____ Community partnership: _____

Facility address: _____ Date: _____

Auditor 1: _____ Weather conditions: _____

Auditor 2: _____ Start Time: ____ : ____ ○ AM ○ PM

Size of facility (number of youth): _____ End Time: ____ : ____ ○ AM ○ PM

Section A: Facility characteristics			
1. What is the type of facility? (<i>Circle one.</i>)			
School	Community center	Child care center	Faith-based center Other, specify: _____
2. What types of services does this facility provide?			
2.a. Early child care and education only	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
2.b. After-school care and education only	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
2.c. Both early child care and after-school care/education	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
2.d. Summer care and education (all ages)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
2.e. Other, specify: _____	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
Days of service	Start time	End time	Not open
3.a. Sunday			
3.b. Monday			
3.c. Tuesday			
3.d. Wednesday			
3.e. Thursday			
3.f. Friday			
3.g. Saturday			

Section B: Recreational fields

For each recreational field below, document the number, condition, and lighting.	How many?				Condition of feature – How many in each?								Is lighting present in the feature?			
	Tally		Total		Poor				Average/Good				Could not rate	Tally		Total
	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor		Indoor	Outdoor	
4. Check if no recreational fields (5-9) are present. <input type="checkbox"/> No Recreational Fields (<i>Skip to Section C.</i>)																
5. Fields, soccer																
6. Fields, football																
7. Fields, baseball																
8. Fields, multi-use																
9a. Other fields Specify: _____																
9b. Other fields Specify: _____																

Comments:

Evaluation of Healthy Kids, Healthy Communities

Section B: Recreational fields (cont.)					
10. Is any equipment available? <i>(If no, skip to Question 11.)</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes	10.h. Uncovered bleachers or seating for audience	<input type="checkbox"/> No	<input type="checkbox"/> Yes
10.a. Soccer field goals	<input type="checkbox"/> No	<input type="checkbox"/> Yes	10.i. Stadium (covered seating or structure)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
10.b. Football field goalposts	<input type="checkbox"/> No	<input type="checkbox"/> Yes	10.j. Other, specify:	<input type="checkbox"/> No	<input type="checkbox"/> Yes
10.c. Softball/baseball field fence (by home plate)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	11. Can the field(s) be locked?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
10.d. Batting cage/Warm-up area	<input type="checkbox"/> No	<input type="checkbox"/> Yes	12. Are there signs specifying rules for use of the field(s)?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
10.e. Scoreboard	<input type="checkbox"/> No	<input type="checkbox"/> Yes	13. Are there signs specifying a fee to use the field(s)?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
10.f. Flood lights on field(s)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	14. Are there signs specifying hours of operation for the field(s)?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
10.g. Seating for players (dugouts, benches)	<input type="checkbox"/> No	<input type="checkbox"/> Yes			

Section C: Recreational courts

For each recreational court below, document the number, condition, and lighting.	How many?				Condition of feature – How many in each?								Is lighting present in the feature?			
	Tally		Total		Poor				Average/Good				Could not rate	Tally		Total
	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor		Indoor	Outdoor	
15. Check if no recreational courts (16-20) are present. <input type="checkbox"/> No Recreational Courts <i>(Skip to Section D.)</i>																
16. Courts, basketball																
17. Courts, tennis																
18. Courts, volleyball																
19. Courts, multi-use																
20. Other courts specify:																

Comments:

Evaluation of Healthy Kids, Healthy Communities

Section C: Recreational courts (cont.)					
21. Is any equipment available? <i>(If no, skip to Question 22.)</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes	21.k. Volleyball court markings (out of bounds lines)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.a. Basketball post	<input type="checkbox"/> No	<input type="checkbox"/> Yes	21.l. Scoreboard	<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.b. Basketball backboard	<input type="checkbox"/> No	<input type="checkbox"/> Yes	21.m. Seating for players (benches)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.c. Basketball hoop	<input type="checkbox"/> No	<input type="checkbox"/> Yes	21.n. Uncovered bleachers or seating for audience	<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.d. Basketball court markings (free-throw line)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	21.o. Stadium (covered seating or structure)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.e. Tennis posts for net	<input type="checkbox"/> No	<input type="checkbox"/> Yes	21.p. Other, specify:	<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.f. Tennis net	<input type="checkbox"/> No	<input type="checkbox"/> Yes	22. Can the court(s) be locked?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.g. Tennis court markings (out of bounds lines)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	23. Are there signs specifying rules for use of the court(s)?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.h. Tennis practice wall	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24. Are there signs specifying a fee to use the court(s)?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.i. Volleyball posts for net	<input type="checkbox"/> No	<input type="checkbox"/> Yes	25. Are there signs specifying hours of operation for the court(s)?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.j. Volleyball net	<input type="checkbox"/> No	<input type="checkbox"/> Yes			

Section D: Tracks/paths/trails

For each feature below, document the number, condition, and lighting.	Are there tracks/trails available?		Condition of feature?				Is lighting present in the feature?	
			Poor		Average/Good		Could not rate	Tally
	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor		Outdoor Only
26. Check if no tracks/paths/trails (27-28) are present. <input type="checkbox"/> No Tracks/Paths/Trails <i>(Skip to Section E.)</i>								
27. Track								
28. Path/Trail								

Section D: Tracks/paths/trails (cont.)

29. What type of surface is used for the track? <i>(Check one.) (If no track is present, skip to Question 30.)</i>		30.c. Particulate (e.g., gravel, mulch)	<input type="checkbox"/>
29.a. Unable to assess	<input type="checkbox"/>	30.d. Spongy (e.g., rubber, synthetic material)	<input type="checkbox"/>
29.b. Smooth (e.g., asphalt, concrete)	<input type="checkbox"/>	30.e. Dirt or Grass	<input type="checkbox"/>
29.c. Particulate (e.g., gravel, mulch)	<input type="checkbox"/>	30.f. Other, specify:	<input type="checkbox"/>
29.d. Spongy (e.g., rubber, synthetic material)	<input type="checkbox"/>	31. What is the slope of the track/trail? <i>(Check one.)</i>	
29.e. Dirt or Grass	<input type="checkbox"/>	31.a. Unable to assess	
29.f. Other, specify:	<input type="checkbox"/>	31.b. Flat or gentle (0%-10% incline)	
30. What type of surface is used for the path/trail? <i>(Check one.) (If no track is present, skip to Question 31.)</i>		31.c. Moderate (10%-25% incline)	
30.a. Unable to assess	<input type="checkbox"/>	31.d. Steep (25%+ incline)	
30.b. Smooth (e.g., asphalt, concrete)	<input type="checkbox"/>	32. Does vehicular traffic cross or intersect the path/trail?	<input type="checkbox"/> Unable to assess
			<input type="checkbox"/> No <input type="checkbox"/> Yes

Comments:

Evaluation of Healthy Kids, Healthy Communities

Section E: Swimming pools

For each pool below, document the number, condition, and lighting.	How many?				Condition of feature – How many in each?								Is lighting present in the feature?		
	Tally		Total		Poor				Average/Good				Could not rate	Tally	Total
					Tally		Total		Tally		Total				
	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Outdoor Only
33. Check if no swimming pools (34-35) are present. <input type="checkbox"/> No Swimming Facilities (Skip to Section F.)															
34. Pool (> 3ft deep)															
35. Kiddie/Wading Pool (≤ 3 ft.)															

Section E: Swimming pools (cont.)

36. Is any equipment available? (If no, skip to Question 37.)	<input type="checkbox"/>	<input type="checkbox"/>	36.f. Locker rooms/changing area	<input type="checkbox"/>	<input type="checkbox"/>
	No	Yes		No	Yes
36.a. Slide	<input type="checkbox"/>	<input type="checkbox"/>	36.g. Other, specify:	<input type="checkbox"/>	<input type="checkbox"/>
	No	Yes		No	Yes
36.b. Diving board(s)	<input type="checkbox"/>	<input type="checkbox"/>	37. Can the pool(s) be locked?	<input type="checkbox"/>	<input type="checkbox"/>
	No	Yes		No	Yes
36.c. Permanent lane markings at bottom of pool	<input type="checkbox"/>	<input type="checkbox"/>	38. Are there signs specifying rules for use of the pool(s)?	<input type="checkbox"/>	<input type="checkbox"/>
	No	Yes		No	Yes
36.d. Floating lane markings	<input type="checkbox"/>	<input type="checkbox"/>	39. Are there signs specifying a fee to use the pool(s)?	<input type="checkbox"/>	<input type="checkbox"/>
	No	Yes		No	Yes
36.e. Lounge chairs	<input type="checkbox"/>	<input type="checkbox"/>	40. Are there signs specifying hours of operation for the pool(s)?	<input type="checkbox"/>	<input type="checkbox"/>
	No	Yes		No	Yes

Section F: Playgrounds

For each playground feature below, document the number, condition, and lighting.	How many?				Condition of feature – How many in each?								Is lighting present in the feature?		
	Tally		Total		Poor				Average/Good				Could not rate	Tally	Total
					Tally		Total		Tally		Total				
	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Outdoor Only
41. Check if there are no playground features (42-53) present. <input type="checkbox"/> No Playground Features (Skip to Section G.)															
42. Swings, toddler															
43. Swings, youth															
44. Swings, other (tire, rope)															
45. Slides															
46. Monkey bars/climbing bars															
47. Climbing feature (rock climbing wall, ropes/nets)															
48. See-saw/teeter-totter															
49. Spring rockers															
50. Sandboxes															
51. Marked four-square courts															
52. Marked hopscotch areas															
53. Other play area Specify:															

Comments:

Evaluation of Healthy Kids, Healthy Communities

Section F: Playgrounds (cont.)

54. What type of surface is under the play area? <i>(Check one.)</i>		54.e. Loose fill (e.g., mulch or gravel)	<input type="checkbox"/>	
54.a. Unable to assess	<input type="checkbox"/>	54.f. Rubber tiles/Synthetic surface	<input type="checkbox"/>	
54.b. Hard (e.g., concrete, asphalt)	<input type="checkbox"/>	54.g. Other, specify:	<input type="checkbox"/>	
54.c. Grass or Soil	<input type="checkbox"/>	55. Is there a fence around the playground area that can be locked?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
54.d. Turf	<input type="checkbox"/>	56. Are there signs specifying hours of operation for the playground?	<input type="checkbox"/> No	<input type="checkbox"/> Yes

Section G: Other recreational spaces

For each option below, document the number, condition, and lighting.	How many?				Condition of feature – How many in each?					Is lighting present in the feature?	
	Tally		Total		Poor		Average/ Good		Could not rate	Tally	Total
	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor	Indoor	Outdoor		Outdoor Only	
57. Check if there are no other recreational spaces (58-61) present. <input type="checkbox"/> No Playground Features <i>(Skip to Section H.)</i>											
58. Dance studio											
59. Weight room											
60. Open green space											
61. Other Specify:											

Section G: Other recreational spaces (cont.)

62. Is there a classroom or designated indoor space for open play (play space)? <i>(If no, skip to Question 65.)</i>		<input type="checkbox"/> No	<input type="checkbox"/> Yes	64.e. Balancing equipment		<input type="checkbox"/> No	<input type="checkbox"/> Yes
63. How can this indoor space be used?				64.f. Overhead ladders		<input type="checkbox"/> No	<input type="checkbox"/> Yes
63.a. Unknown <i>(If yes, skip to Question 64.)</i>		<input type="checkbox"/> No	<input type="checkbox"/> Yes	64.g. Jump ropes		<input type="checkbox"/> No	<input type="checkbox"/> Yes
63.a. For quiet play only		<input type="checkbox"/> No	<input type="checkbox"/> Yes	64.h. Hopscotch		<input type="checkbox"/> No	<input type="checkbox"/> Yes
63.b. For very limited movement (jumping and rolling)		<input type="checkbox"/> No	<input type="checkbox"/> Yes	64.i. Portable play equipment		<input type="checkbox"/> No	<input type="checkbox"/> Yes
63.c. For some active play (jumping, rolling, and skipping)		<input type="checkbox"/> No	<input type="checkbox"/> Yes	64.j. Blocks		<input type="checkbox"/> No	<input type="checkbox"/> Yes
63.d. For all activities, including running		<input type="checkbox"/> No	<input type="checkbox"/> Yes	64.k. Ribbons		<input type="checkbox"/> No	<input type="checkbox"/> Yes
64. Is any equipment available? <i>(If no, skip to Question 65.)</i>		<input type="checkbox"/> No	<input type="checkbox"/> Yes	64.l. Tricycles		<input type="checkbox"/> No	<input type="checkbox"/> Yes
64.a. Mats		<input type="checkbox"/> No	<input type="checkbox"/> Yes	64.m. Scooters		<input type="checkbox"/> No	<input type="checkbox"/> Yes
64.b. Balls		<input type="checkbox"/> No	<input type="checkbox"/> Yes	64.n. Other, specify:		<input type="checkbox"/> No	<input type="checkbox"/> Yes
64.c. Tunnels		<input type="checkbox"/> No	<input type="checkbox"/> Yes	64.o. Other, specify:		<input type="checkbox"/> No	<input type="checkbox"/> Yes
64.d. Climbing equipment		<input type="checkbox"/> No	<input type="checkbox"/> Yes				

Comments:

Section H: Incivilities

How much of ... is on the facility property?	None	A Little/Some	A Lot	Location (specify)
65. Garbage/litter				
66. Broken glass				
67. Graffiti/tagging				
68. Evidence of alcohol/other drug use				
69. Sex paraphernalia				

Comments:

Please be sure to complete the end time for the data collection at the top of this form.

Evaluation of Healthy Kids, Healthy Communities

Section C: Meal or snack environment (cont.)			Section E: Meal foods available (menu review) (cont.)			
21. Do the signs highlight specific foods or beverages? (cont.)			23.f. High fat meats (e.g., bacon, sausage)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
20.f. 100% juices	<input type="checkbox"/> No	<input type="checkbox"/> Yes	23.g. Lean meats (e.g., turkey bacon)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
20.g. High-fiber, whole grains	<input type="checkbox"/> No	<input type="checkbox"/> Yes	23.h. High-fiber, whole grain foods (e.g., whole wheat bread, oatmeal)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
20.h. Low-fat foods	<input type="checkbox"/> No	<input type="checkbox"/> Yes	23.i. Sweet foods (muffins, donuts)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
20.i. Beverages with fat or sugar	<input type="checkbox"/> No	<input type="checkbox"/> Yes	23.j. Other, specify:		<input type="checkbox"/> No	<input type="checkbox"/> Yes
20.j. High-fat foods	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24. Are lunch or dinner foods offered at the facility? (If no, skip to Question 25)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
20.k. Sweet foods	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.a. Fresh fruit or vegetables (e.g., apples, bananas, carrots, beans)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
20.l. Salty foods	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.b. Frozen or canned fruit or vegetables (no syrup or butter)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
Section D: Beverages available (menu review)			24.c. Frozen or canned fruit or vegetables (with syrup or butter)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
21. Is milk offered? (If no, skip to Question 22)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.d. Vegetables cooked with fat (e.g., butter)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.a. Skim milk	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.e. Cottage cheese or low-fat yogurt		<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.b. 1% milk	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.f. Fried or pre-fried vegetables (e.g., French fries, tater tots, hash browns)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.c. 2% milk	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.g. Fried or pre-fried meats (e.g., chicken nuggets, fish sticks)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.d. Whole or Vitamin D milk	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.h. High fat meats (e.g., hot dogs, bologna, ground beef, ham)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.e. Flavored whole milk	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.i. Beans		<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.f. Flavored skim, 1%, or 2% milk	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.j. Lean meats, fish, poultry (e.g., baked/broiled chicken, turkey)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.g. Rice milk	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.k. High-fiber, whole grain foods (e.g., whole wheat bread or pasta, brown rice)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.h. Soy milk	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.l. Sweet foods (e.g., cookies, cakes)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
21.i. Lactaid	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.m. Salty foods (e.g., potato chips, popcorn)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
22. Are other beverages available? (If no, skip to Question 23)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	24.n. Other, specify:		<input type="checkbox"/> No	<input type="checkbox"/> Yes
22.a. Water	<input type="checkbox"/> No	<input type="checkbox"/> Yes	25. Are salad bar foods offered at the facility? (If no, skip to Question 26)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
22.b. 100% juice	<input type="checkbox"/> No	<input type="checkbox"/> Yes	25.a. Fresh fruit (1-2 types)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
22.c. Sugar sweetened beverages (e.g., soda, tea, sports drink)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	25.b. Fresh fruit (3-4 types)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
22.d. Other, specify:	<input type="checkbox"/> No	<input type="checkbox"/> Yes	25.c. Fresh fruit (5+ types)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
Section E: Meal foods available (menu review)			25.d. Green vegetables (spinach, broccoli, collards, turnip greens, kale, lettuce, cabbage)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
23. Are breakfast foods offered at the facility? (If no, skip to Question 24)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	25.e. Orange vegetables (carrots, sweet potatoes, pumpkin)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
23.a. Fresh fruit (e.g., apples, bananas)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	25.f. Red vegetables (tomatoes, red sweet pepper, beets)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
23.b. Frozen or canned fruit (no syrup)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	25.g. Starchy vegetables (potatoes, corn, peas, squash)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
23.c. Frozen or canned fruit with syrup	<input type="checkbox"/> No	<input type="checkbox"/> Yes	25.h. Cottage cheese or low-fat yogurt		<input type="checkbox"/> No	<input type="checkbox"/> Yes
23.d. Cottage cheese or low-fat yogurt	<input type="checkbox"/> No	<input type="checkbox"/> Yes	25.i. Nuts, seeds, legumes (dry beans)		<input type="checkbox"/> No	<input type="checkbox"/> Yes
23.e. Fried or pre-fried vegetables (e.g., French fries, tater tots, hash browns)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	25.j. Bacon bits or croutons		<input type="checkbox"/> No	<input type="checkbox"/> Yes

Comments?

Evaluation of Healthy Kids, Healthy Communities

Section G: Vending machines (cont.)			Section H. Other competitive foods & beverages		
40. Are beverages available in the vending machine(s)? (cont.)			43. Does the facility have a store that sells foods and beverages?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
40.c.. Skim milk	<input type="checkbox"/> No	<input type="checkbox"/> Yes	44. Does the facility have another place that sells foods and beverages? <i>(If no to Questions 43-44, audit is complete)</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
40.d. Sports or energy drinks	<input type="checkbox"/> No	<input type="checkbox"/> Yes	44.a. Specify:		
40.e. Diet soda	<input type="checkbox"/> No	<input type="checkbox"/> Yes	45. Are food items available in these other locations? <i>(If no, skip to Question 46)</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
40.f. Sugar sweetened beverages (e.g., soda, tea)	<input type="checkbox"/> No	<input type="checkbox"/> Yes	45.a. Chips/crackers/pretzels (baked, low-fat)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
41. Are advertisements present on the vending machine (point of purchase prompts)? <i>(If no, skip to Question 43)</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes	45.b. Granola bars/cereal bars	<input type="checkbox"/> No	<input type="checkbox"/> Yes
42. Do the advertisements highlight specific foods or beverages? <i>(If no, skip to Question 43)</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes	45.c. Nuts/trail mix	<input type="checkbox"/> No	<input type="checkbox"/> Yes
42.a. 100% juice	<input type="checkbox"/> No	<input type="checkbox"/> Yes	45.d. Reduced fat cookies or baked goods	<input type="checkbox"/> No	<input type="checkbox"/> Yes
42.b. Skim milk	<input type="checkbox"/> No	<input type="checkbox"/> Yes	45.e. Candy, chips, cookies, snack cakes (sugar, salt, or fat)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
42.c. High-fiber, whole grains	<input type="checkbox"/> No	<input type="checkbox"/> Yes	45.f. Other, specify:	<input type="checkbox"/> No	<input type="checkbox"/> Yes
42.d. Low-fat foods	<input type="checkbox"/> No	<input type="checkbox"/> Yes	46. Are beverages available in these other locations? <i>(If no, audit is complete)</i>	<input type="checkbox"/> No	<input type="checkbox"/> Yes
42.e. Beverages with fat or sugar	<input type="checkbox"/> No	<input type="checkbox"/> Yes	46.a. Water (no additives)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
42.f. High-fat foods	<input type="checkbox"/> No	<input type="checkbox"/> Yes	46.b. 100% juice	<input type="checkbox"/> No	<input type="checkbox"/> Yes
42.g. Sweet foods	<input type="checkbox"/> No	<input type="checkbox"/> Yes	46.c. Skim milk	<input type="checkbox"/> No	<input type="checkbox"/> Yes
42.h. Salty foods	<input type="checkbox"/> No	<input type="checkbox"/> Yes	46.d. Sports or energy drinks	<input type="checkbox"/> No	<input type="checkbox"/> Yes
42.i. Other, specify:	<input type="checkbox"/> No	<input type="checkbox"/> Yes	46.e. Diet soda	<input type="checkbox"/> No	<input type="checkbox"/> Yes
			46.f. Sugar sweetened beverages (e.g., soda, tea)	<input type="checkbox"/> No	<input type="checkbox"/> Yes

Comments?