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Introduction

The *Place Matters in Public Health Toolkit* (the *Toolkit*) is intended to assist in the development of projects that represent shared public health goals and values of communities in a comprehensive and equitable way. The *Toolkit* is a product of Nebraska’s Place Matters Learning Collaborative (PMLC), which met from fall 2015 through spring 2017 to explore the effect of place on public health. This toolkit was piloted in 2018-2019 with Panhandle Public Health District in Nebraska and was revised in spring 2019 based on feedback from the pilot site.

The health and well-being of communities is influenced by place, which is made up of conditions in four connected environments in which people live, work, and play. The California Endowment defines the four environments of place as the physical, social, economic, and service environments. These four environments directly and indirectly influence health outcomes.¹ The physical features of a place (like the presence of paved roads, sidewalks, public green space, and clean air) reflect broader patterns of urban and regional development. Social relationships are the support and connection provided by families, friends, coworkers, and community. Economic conditions consist of the assets and resources available to support and promote health and well-being. Examples of the economic environment include employment opportunities, the socioeconomic status of an individual, the presence of businesses in the community, and the types of businesses in a community. Finally, community services (such as hospitals and clinics, police and fire protection, and schools and childcare centers) make up the service environment and have a very important role to play in ensuring the health of a community.
The Toolkit builds a foundation for place-based work with a focus on physical, social, economic, and service environments as modeled in Figure 1. These four environmental components relate to the social determinants of health, which affect opportunities to achieve and maintain health and well-being, and are often root causes of poor health.²

Examples of the social determinants of health include:

- Race/ethnicity
- Access to healthy and affordable food
- Employment
- Socioeconomic status/income
- Educational opportunity
- Geographical isolation
- Incarceration rates
- Access to healthcare
- Quality of affordable housing

Figure 1 draws from the social-ecological model. The social-ecological model emphasizes social relationships and environmental factors, which combine to influence health. An individual can affect the larger environment, society, and community they live within. Conversely, an individual’s opportunities for health are affected by the environment, society, and community the individual exists within. To understand a public health issue, it is essential to understand the needs of individuals within a place.

All environments of place are connected and impact the health of individuals and communities. The environments of place should be viewed through a health equity lens to ensure relevant and meaningful opportunities for health improvement in historically underserved communities are major components of project development.
The four environments of place interact and have influence on individuals and communities. General descriptions of the four environments are as follows:

**Physical**  Where people live and the surrounding environment

**Social**  Culture, perceptions, and connections

**Economic**  Local economy and its impact on quality of life and opportunity for some or all

**Service**  Access to healthcare, education, and public services
Structure of the Toolkit

The Toolkit outlines different phases of project development based on evidence-based best practices for organizations and agencies who support projects that will improve the lives of people in the community. The Toolkit utilizes health literature from The California Endowment’s “Why Place Matters: Building a Movement for Healthy Communities,” which guided the way the PMLC thought about place, provided examples of successful place-based work in different communities, and helped the PMLC connect place to the social determinants of health. Further, the California Endowment details the connection between the four environments of place and their relationship to health. The collaborative used the Healthy People 2020 overview of the social determinants of health to ensure a broad list of the drivers of health was used to discuss place at a community level. The framework of the Toolkit is also guided by the evidence based public health framework. Each stage of the evidence based public health process is built into the framework of the Toolkit, though not explicitly.

The overarching vision of the Toolkit is to promote collaborative place-based work driven by actors within a community who have come together with momentum around a specific public health issue. Because public health issues do not exist in a vacuum, collaborative effort should involve people from a variety of industries, such as the education system, transportation, local businesses, and local government. Long-term change requires an impact on multiple systems over a period of years. This Toolkit is designed for use by a group of community members who are passionate about an issue and ready to work for change.

The Toolkit has been designed to outline the process by which a project can be developed and implemented to address an identified public health issue. Throughout the Toolkit, facilitator notes (like the one on the next page) are included to help provide another level of support for the project. These notes draw from the Technology of Participation (ToP) facilitation methods. ToP provides structured facilitation methods to help groups think, talk, and work together. More information about ToP is available at https://icausa.memberclicks.net/. Photos from the Panhandle Public Health Department’s pilot work using the Toolkit are included to provide suggestions for how to carry out the process.
Conversations and stakeholder discussions throughout the process can follow the ToP Focused Conversation Method, which is based on a structure known as “ORID” and stands for objective, reflective, interpretive, and decisional parts of conversation. When we process information, our brains move through different levels of reasoning. ORID is based on the way our brains take in information, make sense of it, and ultimately moves to action. It is designed to help groups move from the surface level (dealing with facts), to an in-depth understanding that results in shared awareness. The ORID structure is as follows:

![ORID Diagram]

Throughout the Toolkit questions are organized using the ORID method. These questions are designed to be asked in the order they are shown. As not all questions are appropriate for all projects, a facilitator can help select or design relevant questions.

The *Toolkit* is intended to provide public health professionals and community members a framework and tools for addressing a community need or issue in the context of the specific place they live or work.

Examples of issues well-suited for this toolkit include:

- **Community-defined needs** like more jobs, higher quality early childhood and school settings, safe parks, healthier food options, and access to comprehensive healthcare; and
- **Community-defined issues** like health disparities, historic under-representation, poverty, obesity, housing, and natural resource management.

**The issue of focus should be identified before using the Toolkit.** If your community has not identified priorities or issues, please consider utilizing the Community Toolbox\(^5\) or other resources to assist in recognizing community-based priorities.

<table>
<thead>
<tr>
<th>Facilitation Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use results from a formal community needs assessment to inform the prioritized health issue before using the Toolkit. A skilled facilitator can assist in this review process. Health departments and hospitals are required to conduct community health needs assessments. Consider partnering with them to conduct and/or utilize existing assessments.</td>
</tr>
</tbody>
</table>
Figure 2 (on page 4) provides an organizational framework for the phases of project development, while the *Toolkit* provides more detail for each phase. When possible, potential sources of technical assistance should be identified for different aspects of the project. Suggested sources of assistance include local health departments, local hospitals, the Nebraska Department of Health and Human Services, and local colleges and universities. Local community members should be included in this process, including members who are representative of the target population as their perspectives will add great value, and assist in gaining widespread community buy-in.

Appendix A provides a checklist for place-based action planning. Review the checklist prior to getting started and throughout the process as needed. Appendix B presents a case study of a place-based project in action in Nebraska. The Thayer County Walking Coalition developed an initiative to improve walkability and overall health in its community. The Coalition brought stakeholders together for project development, identified needs in the community, and developed a plan with specific, measurable goals for short and long-term success. The framework proposed in the *Toolkit* can be adapted as necessary to fit community dynamics across Nebraska. Appendix C includes a suggested action plan template to document project plans as a result of conversation during the project development phase.
Phases of Place-Based Project Development

1. Getting Started

- Assess & Build Readiness
- Brainstorm Vision, Goals, & Evaluation
- Engage Partners in Development
- Assess Historical & Present Context

2. Project Development

- Set SMART Objectives
- Research & Incorporate EB Approaches
- Assess Technical Assistance Needs
- Seek Partnerships & Overcome Resistance
- Ensure Sustainability

3. Ongoing Action, Evaluation, & Quality Improvement

Figure 2 – Place Matters in Public Health Framework
1. Getting Started

To get started, convene a core circle of community partners to discuss the scope of the proposed project. With the help of a facilitator, the core circle can assess and build readiness and brainstorm the vision and goals for the proposed project. At this meeting, long-term evaluation needs can be assessed and supportive community partners identified. Once a core circle of partners has set general parameters for the project’s scope supportive community partners should be invited to participate.

It will be vital to the success of your project to incorporate community partners early in the project. These partners will be the key to change in the community, and omitting this step will jeopardize the effect of your work. Once partners have been engaged, a meeting to connect the community partners can create momentum for the project. This process is discussed in more detail below.
Assess & Build Readiness

With a priority issue and a place identified it is necessary to spend some time assessing community readiness. This work begins with the core circle and will be revisited once community partners are engaged. Strong agreement is not required in all areas to be ready, but awareness and candid community discussion of the current situation can be helpful to move forward.

Place-based work is best done with a variety of partners who are affected by the identified issue in different ways. Important discussions should be had about who needs to be included in the project, and how involved they are in its development. The *Circles of Involvement* activity (detailed below) is helpful to use when identifying relevant partners and discussing community and project involvement.

Take time to discuss the following questions...

- What about the issue catches your attention?
- Who is affected by the issue and who is involved in efforts to address the issue?
- What is the importance of this issue? What about this work inspires action?
- What are the root causes of the issue?
- What can the group commit to working on while moving forward?
- What is the desired result?
Facilitators can lead a group through the Circles of Involvement activity, developed by the Institute of Cultural Affairs. This activity is used to identify, organize and develop key relationships that will allow for successful project implementation. The key aim of this activity is to build group capacity and support. This exercise may require adaptation based on the group’s needs.

For a complete explanation and step-by-step guidance of the Circles of Involvement exercise visit

http://www.naccho.org/uploads/downloadable-resources/

Brainstorm Vision, Goals, & Evaluation

When conceptualizing a new project, it is necessary to define the project’s vision and goals. The core circle can begin this work and revisit it with engaged community partners. The vision provides an overview of the change the group is interested in. A concise vision conveys a clear message of the intended change, and the anticipated result of your work. An example of a vision statement might be, “We want to ensure healthy food access for all members of the community.” Project goals will help achieve the shared vision.

Consideration of how the project will impact the physical, social, service, and economic environments will help to identify next steps in planning and predict the effect of the project. To this end, the group can brainstorm the vision and goals for each environment, or alternatively, brainstorm an overarching vision with goals that support each environment. Defining the vision of the project across the four environments can clarify intentions, connections, potential issues, and a necessary project timeline.

How to brainstorm a vision:

1) Dream big! Think beyond a program’s impact or specific time period.
2) Imagine an ideal community. Consider and discuss what you would like to see in the community in the next few years.
3) Clarify intentions. Choose general statements/powerful phrases that reflect the project best. Refine the vision down to a few powerful phrases or a sentence.
4) Share the vision with others and solicit their feedback.
5) Review the vision the next time the group meets. Discuss how realistic the vision is and if the group is united in its interest in creating the vision.

As the project develops, the goals and specific project objectives should weave together needs determined through the four environments. When and how the project’s vision is achieved will vary based upon the time frame in which the project is to take place, the approach that will be taken, and collaborative involvement. Some projects will benefit from describing a vision that will exist as the project is in progress, while others will benefit from describing a vision that can only exist after the project’s success.
In early project development, a brief evaluation brainstorming session can plant seeds for future work. The initial vision and goals of the group can provide clues to what will be affected that can inform evaluation efforts. To embed evaluation in the project from the onset, the group must consider key questions that the group wants to be able to answer over time and key data to provide the answers. Measuring the impact of a project is vital to determine whether a public health effort is successful, in need of revision, or is causing negative unintended consequences.

**Facilitation Note**

A facilitator can assist in the development of an evaluation plan. Evaluation is best done when it can be fully incorporated into a project from the beginning, driven by the project’s vision and SMART objectives. When designing evaluation, it is helpful to consider how the group plans to use the evaluation results. For instance, evaluation could be used to help a group make a case to their local politicians about the effectiveness of their project, or evaluation could be used for the purpose of measuring and ensuring improvement within the project.

Supportive community partners should be involved after the core circle meets to assess and build readiness, brainstorm the project’s vision, goals, and evaluation plans. These community partners will be essential for enacting change around the selected issue and are integral to the developing project. Together the core circle and supportive community partners can complete the remainder of the Toolkit.
Engage Partners in Development

Relationships between the core circle and many potential community partners will need to be cultivated. Partner engagement may require phone calls, emails, 1:1 meetings, or town hall meetings.

When engaging partners, providing a “why” will be essential. Be prepared to tell partners why you are doing this work and why this project is important. Data can quantify the need for the proposed project, but it is unlikely to convince a partner that your solution will be the best way to address that need. Sharing the back story of how the core circle came together to work on this issue will provide partners with insight into why you are doing this work, and may motivate them to join you. A handout with key data and plans may support partner engagement. The handout can provide all core circle members with the basics of the project and may increase their confidence in recruiting others to join your efforts.

Engaging partners may take a significant amount of time prior to project development but the ability of the project to make change will depend on the support of community partners. Take caution in advancing on with project development without key partners.

Facilitation Note

Involve and engage partners, who have had previous success in related work, and are sensitive to the history of the place. Local champions should provide a realistic outlook on a developing place-based project. Local leadership can encourage participation from additional stakeholders during the project development phase.
Once community partners have been engaged, a meeting to connect all partners can create momentum for the project. At this meeting the topics discussed by the core circle can be reviewed and revisited. The community partners will have new insights into the prioritized health issue and related up and downstream effects. In this meeting the picture of community readiness may shift, proposed vision and goals may change, and a facilitator can help create a shared vision and goals for the project. The Victory Exercise from ToP (described below) is a useful tool to engage partners around the vision and goals discussion. In this meeting the group should assess the historical and present context of their community.

**Facilitation Note**

While brainstorming a vision for the project, consider the ToP Victory Exercise. This victory exercise is designed to generate a detailed image of a final outcome and encourage a group to think creatively about what success would look like. This activity can help build momentum for your vision but will not produce a vision that can guide your work. It is ideal for jump starting the conversation to develop and define your vision. Additionally, this exercise can be used to create excitement about project potential and increase the group’s energy about the project and its possibilities.

**Steps:**

1. Before the exercise begins, draw a large circle on an easel sheet and title it “Victory”.
2. Convene the group and ask them to step into the future and imagine success in addressing the selected health issue.
3. Use a different marker to record response related to each of the four environments of place.
4. Ask the focus questions as they relate to what participants imagine success be:
   - What do you see, feel, and hear?
   - What is going on in the community and in each of the four environments of place?
5. Responses should be words or short phrases. Capture all responses and write them on a large sheet of paper, in several colors. Go around the room and have each participant share, then ask for any additional responses.

* You may also complete this exercise using four separate circles for each environment.

The results of this exercise can be used to develop your project vision and goals.
Panhandle Lead Project - Victory Circles
Assess Historical & Present Context

Communities and neighborhoods have a rich history of growth and development that contribute to the realities of towns and cities. The historical context of a place contributes to the current experiences in communities today. As technology advances and industry adapts, places in America experience ebbs and flows of activity. Shifts in trends of residential settlement, factory growth or shrinkage, farming and agriculture needs, etc. impact populations in complex and diverse ways and contribute to health inequities. In order to bring about meaningful change, attention must be given to the way that the environment has shaped activity within a place over time – considering different populations and industries affected. The composition of the group doing the assessment of the historical context should be diverse and multigenerational to ensure community representation.

A discussion of the historical and present context of a place should include information about how a place has developed historically and exists currently with regards to the physical, social, service, and economic environments. It may be helpful to diagram the historical development of the identified issues for each of the four environments. These questions can help prompt consideration of different parts of history:

1) How was the land used in the past? What is the primary use of the land now? What services are available/not available? How closely does historical use of the land mirror current use? What do we know about the history of this issue?

2) How does the history of this issue concern you? How will this impact our work as we move forward to change/improve it? What historical issues are you confident about addressing? What historical issues will require the most work?

3) What businesses have shaped the community over time? What insights are beginning to emerge as we look at the history? What is the importance of this historical context?

4) What does it mean to have experienced this history as a community? What can be done differently in the future, knowing the historical context? What have we learned as a group through this exercise?
A SOAR analysis, comparable to SWOT analysis, session is recommended to assess the present context of a community’s prioritized health issue.

SOAR analysis can be utilized by a community to develop focus. The SOAR analysis requires a brainstorming/list development session and an analysis session followed by project development. Key project members and community partners should be present for the SOAR analysis. This analysis is best completed by a large group to help identify as many strengths, opportunities, aspirations, and expected results as possible.

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Current resources, what the community or group does well, and major accomplishments related to the identified issue</th>
</tr>
</thead>
<tbody>
<tr>
<td>Opportunities</td>
<td>Circumstances that could be used to promote change, enhance your work, or give you a competitive edge</td>
</tr>
<tr>
<td>Aspirations</td>
<td>What the project could be; what the group wants the project to be known for</td>
</tr>
<tr>
<td>Results</td>
<td>Tangible outcomes and measures</td>
</tr>
</tbody>
</table>

The brainstorming part of the SOAR analysis is free flowing without judgment, wordsmith or discussion. A facilitator can be utilized here to chart the results (see note below for additional suggestions). Through group discussion connections may be made between the ideas. The group should try and identify the most important community strengths, opportunities, aspirations, and results. Based on this conversation, strategic goal statements can be drafted that will clarify how the group will leverage strengths, capitalize opportunities, build concrete steps to achieve aspirations, and produce results.

Additionally, discussion will bring up gaps in data, connections, or strategy. These gaps should be noted and addressed in the next phase, project planning. Before the group meets to begin project planning, some key partners should research relevant evidence-based approaches.
Conducting a SOAR analysis allows a group to detail and acknowledge the realities of their current situation. This activity also helps in establishing a realistic understanding of the context in which the group is working. The SOAR analysis can be completed in one meeting. Before the workshop begins, place four sheets of paper on walls around the room and label them: strengths, opportunities, aspirations, and results. Break the group into four smaller groups and have each group work around the room, writing down answers to each prompt at each station.

Encourage the group to consider both internal and external factors that may or may not be within the project’s control. For aspirations and results it may be helpful to start with the group’s vision. The overall vision can spur conversation and innovation for strategic planning to begin building a plan for how to achieve the aspirations and results.

After all ideas have been captured, ask the group to make one last move back to their original station. Ask them to highlight or star key themes or important statements. Have each group share the key themes and statements. Take a moment to reflect on the lists within each quadrant as a large group. The facilitator may want to close the session by asking the group a few questions such as:

- What stands out to you?
- What concerns you?
- What are you most doubtful about?
- What questions did this exercise raise for you?
- What are these themes really about?
- What does this mean for our future and work moving forward?
Panhandle Lead Project – SWOT Analysis Activity

**Internal Strengths**
- Hands-on, Bottom-up
- Willing partners
- Pieces of transportation in place
- Volunteers
- Several plans
- Chamber spot people seek info from
- Willingness to talk
- Considering expanding three-ton routes
- Marketing/waste resources
- Hospital, college

**Internal Weaknesses**
- Not aware of current options
- Capacity/staffing
- Willingness to prioritize
- Silos
- Data
- More needs awareness
- Need to promote transportation for Senior Life Solutions
- Barrier to accessing care

**External Opportunities**
- Willing partners
- Collaborative attitude
- Partnerships
- Revenue
- Local buy-in
- Potential partnerships with hotels/models
- Media, to spread awareness
- Ride-sharing (Uber/Lyft)
- Delivery services
- Expansion:
- Partnership w/ visual or hearing impaired people
- Other disabilities
- Technology

**External Threats**
- County roads: difficult for vehicles to access
- Weather
- Distance
- Space on transportation for med devices
- Regulatory requirements
- Hiring
- Mobile workforce
- Community regulations for ride-sharing
- State Regulations
- Public Service Regulations
- Technology pull service
# 2. Project Development

After identifying a prioritized health issue, a strategic project plan can be created to catalyze action. This will require time spent designing the process to achieve change in the community. This should include the development of SMART objectives, incorporation of evidence-based approaches, assessment of technical assistance needs, potential partnerships and resistance, and a plan to ensure sustainability. Consideration of these five components can better inform project action.

Appendix C includes an action plan template to document the work the project will execute as a result of conversation during the project development phase.
Set SMART Objectives

Stated objectives help quantify incremental steps towards desired outcomes for a planned program and can help guide the action plan and evaluation process. For best results, objectives should be written in the SMART format:

<table>
<thead>
<tr>
<th>Specific</th>
<th>Describe who or what. Use one action word. Avoid vague words or actions.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measurable</td>
<td>Note how much change should happen. Include a reference point for change. Avoid words that cannot be measured like “understand” Instead, use words like “describe” or “list.”</td>
</tr>
<tr>
<td>Achievable</td>
<td>Ensure the objective is attainable within the given time frame using available resources. Evidence-based sources provide guidance for this.</td>
</tr>
<tr>
<td>Realistic</td>
<td>Relate to the overarching goal and can realistically address the problem.</td>
</tr>
<tr>
<td>Time sensitive</td>
<td>Include a time frame describing when objectives should be met.</td>
</tr>
</tbody>
</table>

Objectives are smaller steps that are directed toward desired changes. Objectives may reflect changes in behavior, knowledge, attitudes, or beliefs. Examples of well written SMART objectives include:

- Increase the percent of convenience stores selling fruit and vegetables from a baseline of 35% to 50% by the end of 2018.
- By year two of the project, this group will have supported 5 additional safe play spaces in Lincoln’s 27th North neighborhood.

**Facilitation Note**

SMART objectives can take time to develop. A facilitator can help ensure that all five components of SMART objectives are represented in the final objectives. This process should include multiple stakeholders to draft and edit the objectives according to what is important to the community. Tip: To prevent painful “wordsmithing” sessions, it is advisable to gather your core circle and a skilled facilitator to finalize the SMART objective. Final SMART goal statements should then be presented to the larger group of project stakeholders.

**Additional Resources:**
- Minnesota Department of Health – SMART Objectives
- PHQIX Developing and Using SMART Goals
- CDC Evaluation Briefs- Writing SMART Objectives
How will the work of the project be done? What intervention will impact the issue at hand? These questions are the main focuses of this component of project development.

The need for an evidence-based approach may depend on the issue identified and the partners involved in the project. Complex issues will benefit from complex interventions, supported by evidence-based strategies. Other issues may not require an evidence-based approach, instead requiring community momentum and collaboration to affect change. Community problem solving and development can be approached many ways. Groups can benefit from others by researching approaches that have been proven to work in other communities. Past or related unsuccessful efforts can also be informative, if failed attempts are made into lessons and adaptations.

The search into appropriate evidence-based interventions for a specific issue may be explored by a core partner or group of partners, with a partnership or contract with a local university or organization, or with a local/regional expert. This research should begin after the group solidifies its vision, goals, and understanding of the historical and present context of the issue.

Peer-reviewed journals, public health agencies, the Community Guide\(^6\), and intervention guides\(^7,8\) are all reliable sources to begin investigation and innovation of relevant approaches that can be tailored to address the public health issue in a specific place. Researching local resources and community tools already in existence is advisable.

After gathering information about relevant or related evidence-based approaches, the information should be shared with the full group tasked with developing what intervention the group will use to impact the identified issue and how the work will be implemented. This may be done through a verbal presentation, PowerPoint or written report - or any means that fits with the literacy needs of the group. The key here is to communicate the possible interventions to address the issue and work together to develop a plan to affect change. Project development benefits from population characteristics, needs, values, and preference and expert input.
Facilitation Note

A facilitator can help a group come to consensus on what their collective standards are around the evidence that informs best practice.

The strength of evidence can vary.

- **Strong evidence** - Good idea, expert opinion, innovative, emerging
- **Stronger evidence** - Effective practice, some evidence indicating success
- **Strongest evidence** - Evidence-based, best practice, scientifically supported, recommended

The following resources can be used to search best practices for implementation:

- The Community Guide (CDC)
- The Cochrane Collaboration (Cochrane)
- Evidence-Based Resources (Healthy People 2020)
- NACCHO Model Practice Search (NACCHO)
- The Canadian Best Practices Portal (Public Health Agency of Canada)

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Panhandle Lead Project – Evidence-Based Approach Presentation
Assess Technical Assistance Needs

Technical assistance needs can be determined by troubleshooting the issue and identifying opportunities for growth. Technical assistance involves the provision of advice, support, and training necessary for successful planning and implementation. The following components are important for project success and may require support:

- Establishing and maintaining commitment to the project’s goals
- Encouraging communication and breaking down barriers between partners to plan for action *
- Collecting, sharing, analyzing, and presenting data
- Engaging the community through effective facilitation and community organizing *
- Adapting action based on community feedback *
- Learning more about a selected topic area and potential evidence-based practices
- Developing necessary skills and expertise for project management and staff operations
- Seeking legal guidance and understanding the relevant politics

Facilitation Note

While a facilitator can aid in assessing needs for technical assistance within any of the above components, the asterisk (*) indicates the areas within project development where a facilitator may be particularly helpful.

To troubleshoot the case and identify opportunities for growth, consider asking the questions listed below. The answers to these questions may help identify tools to address technical assistance needs:

- In what area/s (listed above) is additional support needed?
- What areas are you most confident/excited/critical about?
- In what form should support be given? (e.g., trainings, strategic planning, consultation, skill development)
- How frequently will assistance be needed?
- How can technical assistance increase the project’s sustainability?
- Which experts can be identified within the community to support efforts?
- What resources can be used to ensure technical assistance needs are met?
Seek Partnerships & Overcome Resistance

When doing place-based work, supportive community partners may be involved in the initiation of the project, project development, or may come on after the project has taken action. During project development the group needs to consider broad potential partners who are likely to support the project and collaborate with the intended audience. A review of possible project resistance would also benefit the group.

Facilitation Note

This is a great time to revisit the Circles of Involvement activity mentioned on page 8. As a reminder, the key aim of an activity like this is for the group to realize that they are not alone in this work and broader support may exist, if only they are able to tap into it and/or cultivate it.

Successful partnerships are often developed with a specific project in mind. The following questions may help determine the need for partnerships.

- How can a partnership help overcome barriers to achieving success? (e.g., extending the reach of the project’s message, reaching priority populations, providing additional funds, providing access to specific skill sets)
- What specific resources could partners contribute to the project’s success?
- Which non-traditional partners could be included in the project? (e.g., organizations serving priority populations, diverse groups, seniors, and faith-based organizations)
- What types of partners could make your project more successful? How can you engage them?

The project may need to overcome resistance within the community. Tools to overcome resistance include using community assessments and other data to engage partners, clearly communicating expected outcomes of the collaboration, and being flexible and open to change as the partnership develops. Further, development of a feedback plan to assess how the partnership is working for all participants will allow the partnership to build on successes, address problems, and explore ways to enhance the collaboration. When working with new partners, an open mind builds mutual respect.
Ensure Sustainability

Improving the health and well-being of a community requires united effort around the resolution of a public health issue. A project needs to be sustainable until it has accomplished its vision and goals. The vision and goals developed by the group will set the stage for the kind of change the group works towards. Change takes time, and how much time depends on the type of project. For example, a project to create a safe play environment may need to be sustainable for less time than a project attempting to lower rates of homelessness.

Sustainability is a community’s ongoing capacity and resolve to work together to establish, advance, and maintain effective strategies that continuously improve health and quality of life for all.

Development of a comprehensive plan to ensure sustainability can help manage seen and unseen challenges. Each step of the project’s project development should be impactful, readily implementable, and measurable. Momentum and funding to create change over time can help a project become sustainable. Momentum can be built by organizing and maximizing community assets and resources. Emphasizing the development of a network of community members or a committee that can lead the project’s vision and goals can help build momentum. Considering different ways to ensure availability of required resources, which often include funding, can aid in the project’s sustainability. Local communities can consider questions like “How are resources currently used in my community?” and “What are local community policy makers working on? How might our work overlap?”

The sustainability of a project also depends on the scale of work the project takes on. The Health Impact Pyramid (see Figure 3) diagrams the trade-off between required individual effort and population-level impact. The pyramid can be used to determine the number and quality of resources a project will need to have a desired population-level impact.

The Centers for Disease Control and Prevention’s Healthy Communities Program has developed a Sustainability Planning Guide, which has ten steps that can be used to develop a sustainability plan, summaries of different approaches to sustainability, and modules for different sustainability approaches. The utility of these approaches depends on the size and scope of the project.
To sustain commitment, participation and engagement among members of the group it is vital that the group establishes rules of engagement, or a set of guidelines and driving principles that the group creates and commits to. Consider who the rules are for and who should help create them. Should all project members and/or community members be involved? A facilitator can help lead a group through a brainstorm to establish rules of engagement. Some examples of potential rules of engagement include:

- Meeting rules and frequency
- Membership/involvement expectations, including level of time commitment
- How conflicts/disagreements are handled
- Communication expectations between meetings
- How group decisions are made/consensus is built

A facilitator can also help guide the group in a conversation about sustainability. This kind of conversation should include a realistic discussion about how big of an impact the group can make with the resources (money, time, etc.) they have and expect to have over the implementation period (and beyond).
3. Ongoing Action & Evaluation & Quality Improvement

Ongoing Action

The result of the project development will catalyze action. Project development laid the ground work for the action that will be ongoing as the group works on the prioritized health issue. The timeline for this work would draw directly from SMART goals created. Ongoing action will require group investment and periodic check-in meetings. The check-in meetings will be separate from the action of the group and can be used to evaluate the work and focus on quality improvement.

Additionally, the group will need to consider key actions that will bring the project’s plans to life and a timeline of when work should be done. Figure 4 below provides an example of a timeline for a place-based project. As you develop a work plan with action items, you might want to consider the use of a project management software to keep members engaged and on track, aligning with SMART goals created.

Figure 4 - Project Timeline
Evaluation & Quality Improvement

Despite the best intentions and careful planning, implementation of public health activities does not always result in the projected goals. Even if a project appears to roll out with ease and success, the context and environments in which the activities originally operate are constantly evolving. For these reasons, evaluation is essential to describe program success, identify areas for improvement, and make the case for the importance of a particular program.

**Program evaluation** is a process of measurement and comparison to a program’s vision and objectives. Evaluation should be ongoing and include questions that allow the project to document and determine progress, demonstrate accountability to stakeholders, and/or identify areas for improvements. It is important to consider and select questions that are most relevant to the project’s needs and keep them in mind throughout the planning and implementation of the project. Evaluation questions should align with the project’s vision and SMART objectives. The group should consider the intended outcomes (objectives) for the project and consider how to measure those as they relate to evaluation. When selecting questions to evaluate the project, the methods for measurement (e.g., data sources) must be considered to ensure that the project has the right data to answer evaluation questions. Ultimately, findings from evaluation efforts should be used to improve the project and to demonstrate the impact of the project on the intended audience. Evaluation may require a large time commitment, so it is vital for a group to reach consensus on the extent to which they can/will participate in evaluation-related activities.

**Facilitation Note**

Some of the recommendations for evaluation in this section are most appropriate for a research-based project, organization, or academic institution/group. Advanced evaluation with an outside evaluator with experience is often done via contract, and can bring credibility and objectivity to your work as you measure success, demonstrate value, and consider ways in which the project could be replicated.
According to the CDC, evaluation questions tend to fall into five categories:\textsuperscript{14}

1. **Implementation**: Were the project’s activities executed as originally intended?

2. **Effectiveness**: Is the project achieving the goals and objectives (hopefully SMART ones) it intended to accomplish?

3. **Efficiency**: Are the project’s activities being completed with appropriate use of resources such as budget and participants’ time?

4. **Cost-Effectiveness**: Does the value or benefit of achieving the project’s goals and objectives exceed the cost of implementing them?

5. **Attribution**: Can progress on goals and objectives be shown to be directly related to the initiative, as opposed to other similar initiatives?

Quality improvement tools, such as the Plan-Do-Study-Act (PDSA) cycle, process mapping, and/or cause and effect diagrams, can be incorporated into evaluation efforts to encourage continuous assessment, innovation and program enhancement. Resources for evaluation planning may be found through CDC’s Program Performance and Evaluation Office\textsuperscript{15} and the W.K. Kellogg Foundation\textsuperscript{16}. The World Health Organization has a list of recommendations for programs carrying out evaluation activities.\textsuperscript{17}

**Facilitation Note**

During project implementation it may be helpful to revisit activities or sections of the Toolkit using data and lived experience. With a facilitator, the group can revisit specific topics as needed and then reflect on the current assets of the group and brainstorm additional partners to strengthen the project.

Evaluation results should be shared with the core circle, supportive community members, and general public as a way to show respect to key stakeholders and community partners that contribute time to place-based work, as well as to the community impacted by the work. This may be done through one-pagers/infographics, reports, or public meetings. Results of efforts completed through the Toolkit may demonstrate successes, challenges, overall changes made in the four environments of health, and changes in health outcomes experienced across place over time.
Conclusion

Place-based work acknowledges the social, physical, economic, and service environments that affect individual and community health. A focus on the environments of place is a natural avenue for addressing the social determinants of health as they affect the opportunities that individuals and communities have related to achieving and maintaining health. The interconnectedness of communities is leveraged by the activities described in the toolkit with the intention of aligning partners in progress towards a common outcome. Engaging in this process with a health equity lens will allow a community to construct and strengthen meaningful opportunities for health improvement in historically underserved communities and for growing populations.

Community driven projects are ideal for addressing place-based issues, as one organization or actor alone cannot resolve complex issues. Projects addressing place-based issues benefit from a focused approach to project development as detailed in this Toolkit. This Toolkit outlined the three main stages of place-based project development and provided description and support for exploring these stages with a community group. Communities are dynamic, ever-evolving ecosystems and project implementation will need to reflect that dynamic nature. The processes described in the Toolkit are designed to be used in a general 1-2-3 flow but can also be cherry-picked and used as needed. It is our hope that this work provides a general, evidence-based framework for developing a place-based initiative and leads to improved health for all community members.
## Place-Based Action Planning Checklist

<table>
<thead>
<tr>
<th>Description</th>
<th>Involvement</th>
<th>Suggested Timeline</th>
<th>Done</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1st Phase: Getting Started</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>1a. Identify core community partners &amp; facilitator</td>
<td>Core Circle</td>
<td>Before Meeting #1</td>
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<tr>
<td>1b. Conduct <em>Circles of Involvement</em> activity to identify supportive community partners and then reach out to involve them in the project</td>
<td>Supportive Community Partners + Core Circle</td>
<td>Meeting #1</td>
<td>Meeting #1</td>
</tr>
<tr>
<td>1c. Draft vision/goals</td>
<td></td>
<td>Meeting #1</td>
<td></td>
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<tr>
<td>1d. Brainstorm an evaluation plan</td>
<td></td>
<td>Meeting #1</td>
<td></td>
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<tr>
<td>1e. Core Circle presents preliminary vision/goals of the project to supportive community partners for their review and approval; Complete victory exercise to help refine vision and goals</td>
<td>Supportive Community Partners + Core Circle</td>
<td>Meeting #2</td>
<td></td>
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<tr>
<td>1f. Define historical context</td>
<td></td>
<td>Meeting #2</td>
<td></td>
</tr>
<tr>
<td>1g. Complete SOAR/SWOT analysis of present context</td>
<td></td>
<td>Meeting #2</td>
<td></td>
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<tr>
<td><strong>Before 2nd phase: research evidence-based approaches</strong></td>
<td></td>
<td>Post-Meeting</td>
<td></td>
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<tr>
<td><strong>2nd Phase: Project Development</strong></td>
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<tr>
<td>2a. Develop SMART Objectives</td>
<td>Supportive Community Partners + Core Circle</td>
<td>Meeting #3</td>
<td></td>
</tr>
<tr>
<td>2b. Present evidence-based approaches</td>
<td></td>
<td>Meeting #3</td>
<td></td>
</tr>
<tr>
<td>2c. Assess technical assistance needs and available resources</td>
<td></td>
<td>Meeting #3</td>
<td></td>
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<tr>
<td>2d. Review <em>Circles of Involvement</em> activity to identify additional community allies</td>
<td></td>
<td>Meeting #3</td>
<td></td>
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<tr>
<td>2e. Discuss contributing factors to sustainability (i.e. funding, time, skills/knowledge, momentum)</td>
<td></td>
<td>Meeting #3</td>
<td></td>
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<tr>
<td>2f. Develop action timeline (including evaluation-related activities and important deadlines)</td>
<td></td>
<td>Meeting #3</td>
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<tr>
<td><strong>Reflect on evaluation questions and consider quality improvement opportunities</strong></td>
<td></td>
<td>Post-Meeting</td>
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<tr>
<td><strong>3rd Phase: Ongoing Action &amp; Evaluation &amp; Quality Improvement</strong></td>
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<tr>
<td>3a. Carry out project activities/action</td>
<td>Community Allies + Supportive Community Partners + Core Circle</td>
<td>Ongoing after Meeting #3</td>
<td></td>
</tr>
<tr>
<td>3b. Continuously assess project implementation, effectiveness, efficiency, cost-effectiveness, and attribution</td>
<td></td>
<td>Ongoing after Meeting #3</td>
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<tr>
<td>3c. Consider use of quality improvement tools (i.e. PDSA cycle, process mapping, cause/effect diagrams)</td>
<td></td>
<td>Ongoing after Meeting #3</td>
<td></td>
</tr>
<tr>
<td>3d. Share your progress and outcomes with partners and key decision makers</td>
<td>All</td>
<td>Ongoing after Meeting #3</td>
<td></td>
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</table>
Thayer County Walking Coalition: A Case Study of the Nebraska Walkable Communities Project

In 2015, walkability champions in Hebron, NE brought community partners and public officials together to design a project to improve the walkability and overall health of its community.

**Getting Started:** An initial group of stakeholders (“the design team”) organized a one-day community summit with a nationally renowned facilitator with the goal of creating a community-driven, sustainable action plan to be carried out by local residents at the community level. The summit and the project received ongoing support from the Nebraska Department of Health and Human Services. Local neighbors, coworkers, friends, and family of the design team were invited to attend the summit. The major goal of the summit was to build momentum and consensus behind a plan for community development.

**Project Development:** At the summit, attendees broke into small groups to brainstorm about the project and then had a large group discussion about grouping topics that came up during small group discussions. The group dreamed of accessing key community locations by active transportation such as walking and biking. To reach this goal, they focused on the extension of their trail system to include key community locations, such as their schools, downtown area, hospital and wellness center, city parks and pool, and community center. Finally, the community created action items for each part of their plan with specific measurable goals for short and long-term success.

At the one day summit, community members took immediate action by creating a local coalition and setting their first monthly meeting. Coalition members have been meeting on a monthly basis for 2 years and continue to implement the items dreamed up at the summit.

**Ongoing Action:** To date the coalition has formed the Thayer County Walking Coalition (with 501c3 status), received combined funding and in-kind donations of over $240,000, updated master trail plans, and completed two phases of updated master trail plans. Master trail plans existed prior to the coalition’s formation but sat, unused, due to lack of momentum around them. The coalition has received funding from Nebraska Roads Department-$100,000, Hebron Community Foundation-$19,000,
and the American Association of Retired Persons—$7,500. The coalition has extended existing trails with a mile of new concrete and has plans to complete three additional phases by end of 2018.

Some early wins for the coalition came because of the people involved in the project. One of the community members invited to the one-day summit owned a concrete company and donated the material and labor for pouring community trails. If the community member hadn’t attended the summit the coalition may have had a much harder time getting some early work done. The momentum built with that early win helped spur on the updates to the city’s master trails plan. Community involvement can make or break a project!

The coalition’s project will impact each of the four environments.

- Built trails will change the physical environment.
- Additional opportunities for neighborhood contact on the trails and connections to places like schools, hospitals, and stores will improve the social environment.
- The ease of walking and biking between businesses will benefit consumers and support the economic environment.
- The community will have additional ways to access key services offered by the community, thus making the service environment more utilized.

The work of the coalition is connected to the City of Hebron, thus sustainability of the coalition is supported by processes of the local government. The momentum and work of the coalition is driven within the community by local residents and will exist as long as local champions stay invested. The Thayer County Walking Coalition work continues! The coalition has a long-term goal of extending trails beyond Hebron’s trail system to provide connectivity to other communities in Thayer County and beyond.
Appendix C

Action Plan Template

Specific Vision: _________________________________________________________________

Timeline: ______________________________________________________________________

<table>
<thead>
<tr>
<th>Goal</th>
<th>Evidence of Support</th>
<th>SMART Objective</th>
<th>Technical Assistance Need</th>
<th>Involved Partners</th>
<th>Plan for Goal Sustainability</th>
<th>Plan to Track Progress</th>
<th>Evaluation Plan</th>
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33
References


7 Make it Your Own (MIYO). Health Communication Research Laboratory. Retrieved from http://miyoworks.org/login/auth;jsessionid=23323005D1D95FFD33AE156D5FF31EC2


