HEALTHY COMMUNITIES
STRATEGIC PLAN
& Policy Process Playbook

· · ·

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San Bernardino County Healthy Communities

STRATEGIC PLAN FRAMEWORK

ChangeLab Solutions

Law & policy innovation for the common good.

CONTENTS

INTRODUCTION

The goal of the Healthy Communities Initiative (HCI) is to create environments that promote healthy lifestyle choices through policy, systems, and environmental (PSE) change. PSE change refers to interventions that affect the upstream causes of health, such as access to nutritious, affordable food and opportunities for physical activity. PSE change is vital to creating healthy communities.

- **Policy change** involves the creation or alteration of a formal written statement of a government, business, or nonprofit that results in a new organizational position, decision, action, or mandatory rule or regulation.
- **System change** involves informal and ongoing change in organizational practices and procedures that results in a new, voluntary way of doing business.
- **Environmental change** directly alters the physical, economic, social, or messaging environment that results in a new level of access or opportunity for the target population.[1]

To achieve this goal, the San Bernardino County Department of Public Health (SBCDPH) and HCI partners across the county are collaborating to prioritize, draft, and implement policy strategies that create healthy food systems and safe, accessible, quality places for daily physical activity. As is highlighted in the Public Health Core Functions and 10 Essential Services, policy development is a central component of public health practice. The purpose of the Healthy Communities Strategic Plan is to serve as a resource and a set of action steps for the SBCDPH to use when engaging and collaborating with communities during the policy development process.

HEALTHY COMMUNITIES GUIDING DOCUMENTS

The Healthy Communities Initiative supports individual cities and localities across San Bernardino County to pursue a broad range of PSE strategies with the goals of improving health and well-being for county residents, promoting collaboration, and fostering collective action among government agencies. The initiative supports county-wide adoption and implementation of the county's Community Transformation Plan through local and county-wide upstream efforts. This strategic plan is also informed by input from Healthy Communities partner stakeholders. This strategic plan outlines how SBCDPH will manage the initiative, and serves as backbone support for partner communities.

The Community Transformation Plan identified short-term goals and policy recommendations that pursue PSE change as strategies to achieve collective goals including: increasing active transportation; promoting health elements in general plans; and supporting policy solutions such as Complete Streets, zoning for increased equitable food access and limits on tobacco and alcohol outlets, and creation of active transportation plans.

SBCDPH's strategic plan identified 5 strategic priority areas to organize the department's goals and objectives. Priority area 1 (community and environment) and 3 (healthy equity) identify PSE strategies to support healthy communities and collaborative work among government agencies. Goals for the community and environment priority area include supporting sustainable healthy communities and promoting healthy eating, active living, and safe environments. By engaging in the HCI, SBCDPH is better able to achieve its goal of fostering healthy, safe, and equitable communities through PSE change.

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[1] Definitions adapted from California Department of Public Health, Nutrition Education and Obesity Prevention Branch. (2015). Policy, Systems, and Environmental Change Resource Guide: Strategies for Increased Access to Healthy Foods, Beverages, and Physical Activity. Available at:
www.cdph.ca.gov/programs/NEOPB/Pages/Policy,SystemsandEnvironmentalChangeResourceGuide.aspx

As shown in an evaluation of the HCI conducted by JSI,[2] many communities are working to improve healthy eating and active living through a variety of measures. However, communities across San Bernardino County may be at varying levels of readiness and willingness to adopt policy strategies as an approach to achieving improved community health and well-being. Additionally, reframing the conversation within city governments to focus on creating environments that support health through PSE strategies may be challenging.

SBCDPH's involvement is critical to the success of the HCI. The health department can serve as a key strategic partner and cheerleader to communities as they begin to focus their efforts on upstream determinants of health. Additionally, by serving as backbone staff of the initiative, SBCDPH will provide the needed structure and staffing to ensure that communities have the resources and support to perform the work successfully.

USE OF POLICY TO GUIDE HEALTHY COMMUNITY TRANSFORMATION

Why focus on policy? As described in *The Policy Process Playbook*, policy is an effective and efficient way to shape the environment, which affects people's decisions and behaviors. Policies can help accomplish outcomes that cannot be achieved by any one person, agency, or department. As policies are applied across the community, they can help ensure that people have what they need in their environments to make healthy behaviors the easiest choice. For example, a Complete Streets policy can help ensure safe access to the roadway for all users, making it easier for cyclists and pedestrians to get to their destinations around the city.

Policies can also address and prevent health inequities. Through a policy's intent and the strategies outlined within its text, a policy can articulate ways to address the problem that take into account historic inequities and disproportionate impacts. Strategies can be shaped to prioritize the needs of impacted population groups or neighborhoods. Language within the policy can also be developed to prevent or mitigate potential negative impacts or unintended consequences.

Lastly, policy change is sustainable. Policy can more efficiently and effectively achieve collective action and coordinate resources among local governments to support improved community health. More importantly, strong policy can survive changes in leadership, funding, and political will. For example, incorporating a health element into a city's general plan embeds health-based objectives and strategies into local government operations and guides the actions of agencies and departments well into the future.

THE HEALTHY COMMUNITIES STRATEGIC PLAN

The aim of the Healthy Communities Strategic Plan is to serve as a resource and a set of action steps for the SBCDPH to use when engaging and collaborating with communities during the policy development and implementation process. The plan provides an overview of potential policy strategies and action steps for SBCDPH to partner with local governments and create healthy environments. The policy strategies chosen will depend on local readiness, political and financial feasibility, and policy effectiveness.

SBCDPH, with the aid of JSI consulting firm, is also developing an evaluation plan to track progress and outcomes of the strategic plan. In the section below, Defining Success and Tracking Progress, expected outcomes of the policy strategies and approaches are provided to help SBCDPH track progress toward intended goals. Different data sources and methods are also outlined that can be used to monitor and measure changes.

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[2] John Snow, Inc. (March 2017). An Evaluation of the San Bernardino County Healthy Communities Program. San Bernardino Public Health Department.

GOAL OF THE HEALTHY COMMUNITIES INITIATIVE

The goal of the Healthy Communities Initiative is to create healthy environments and promote healthy choices through PSE change. Based on feedback from SBCDPH and partner communities across the county, the two main objectives for achieving this goal are to 1) create healthy food systems and 2) create safe, accessible, and quality places for daily physical activity.

CREATE HEALTHY FOOD SYSTEMS

Land use and built environment policy decisions impact the availability and proximity of healthy food options within communities. Public health research has highlighted that improving access to healthy foods and promoting their consumption is associated with people making healthier food choices, which has implications on the prevalence of chronic diseases, such as diabetes and heart disease. Policy strategies to promote access to healthy foods could encompass changes to a city's zoning codes to allow community gardens and urban agriculture as permitted uses. Zoning can also restrict the concentration of unhealthy food outlets within neighborhoods or near schools and playgrounds. Other policies could support healthy food retail, which can increase access to retail outlets that sell nutritious, affordable foods.

As shown in JSI's evaluation of the Healthy Communities Initiative, partner communities are engaging in efforts to promote and facilitate healthy eating. Although many communities are working in the healthy food arena, the majority of communities have a strong focus on programs rather than policies. Most communities have implemented or are developing farmers markets and community gardens, and healthy retail or dining programs. Fewer communities have included policy goals or strategies for increasing access to healthy food and nutrition in their general plans or have pursued policy as a way to improve access to healthy foods generally.

CREATE SAFE, ACCESSIBLE, QUALITY PLACES FOR DAILY PHYSICAL ACTIVITY

Daily physical activity is influenced by multiple environmental factors. Access to safe, high-quality open space, parks, recreational facilities, and trails are important for exercising. Access to sidewalks and bicycling infrastructure within proximity to a variety of amenities and destinations encourages walking and bicycling for everyday commuting. On the other hand, environments that are unsafe due to crime and violence or environmental pollution discourage people from walking to work, or going outside to exercise or play. As shown in a range of research, people are more likely to obtain the recommended daily physical activity levels when they live in walkable, safe neighborhoods with access to quality parks and green spaces.

Partner cities and localities have a strong focus on active living, defined as a way of life that integrates physical activities into daily routines, as discussed in the evaluation of the HCI. Many programs exist that aim to increase physical activity, such as community safety programs and walking or other recreation programs. Several communities are also working on upstream policies to encourage active living, such as Complete Streets and joint uses. Other communities are including requirements for new developments to incorporate smart growth and transit-oriented development principles. Communities are working to enhance street infrastructure and to update zoning regulations to support mixed-use development. Most communities' general plans include goals or strategies related to increasing opportunities for physical activity and environmental changes to support active transportation.

There are several policy strategies communities can implement that will create an environment conducive to healthy eating and active living.

OPPORTUNITIES TO INTEGRATE HEALTH INTO LOCAL PLANNING AND POLICIES

The policy and planning opportunity areas discussed in this section highlight various mechanisms that local governments possess to manage their resources, generate revenue, set and enforce regulations, and provide guidance on how they plan to grow and develop into the future. Opportunities exist for SBCDPH to work with cities and localities to catalyze PSE change for healthy communities. This section is not exhaustive of all possible opportunities for the health department and is meant to be illustrative only.

PLANNING

Long-range planning is the technical process of planning for growth and development within a community. The development of plans—such as general plans, master plans, active transportation plans, or specific area plans—can serve as a road map for where the city will invest in infrastructure; how it will prioritize allocation of resources; and steps the city agencies and departments will take to create wonderful places to live, work, and play. These plans can also serve as a long-range blueprint for how a city will achieve community health goals by managing the built and natural environments. Health-based policy goals and strategies can also be explicitly incorporated into plans. The Healthy Planning Guide provides a broad overview of development strategies for healthier communities.[3]

Land use regulations control how land is used within a community and determine the physical and performance characteristics of development. These regulations allow a community to plan for growth and development as well as to mitigate potential conflicts and harms. For example, the original intent of zoning codes within communities was to segregate incompatible land uses, such as polluting industries near residential areas. Land use planning is a critical way for cities and localities to shape the built environment and influence healthy behavioral choices. Residents living in neighborhoods close to grocery stores, community gardens, and healthy corner stores have greater opportunities to consume healthier foods. Children who live in areas with safe access to sidewalks close to their neighborhood school are more likely to walk to school routinely. Decisions on where infrastructure and buildings are located and which uses are permitted on parcels of land are all impacted by land use regulations.

Transportation planning, by supporting the ability to get around efficiently, safely, and affordably, touches on every aspect of people's lives. Transportation is critical for whether people can get to school or work, buy essential items like groceries, or get to their doctor's appointments. Transportation planning is the process of defining future goals, policies, and investments to move people and goods around safely and efficiently. This encompasses everything from building and maintaining roadways, managing the public transit system, setting policies for how transportation investments will be prioritized, traffic safety, and conducting analysis of transportation demand into the future. As personal automobiles are a huge source of health problems—leading to greenhouse gases and other air pollution, noise, and traffic collisions—and are expensive to maintain, many transportation planning efforts have focused on increasing access to and use of alternative modes of transportation, such as biking, walking, public transit, and ride- and car-share programs. Human-powered forms of transportation (biking, walking, and rolling), also called active transportation, are important for public health by incorporating opportunities for physical activity into the everyday routine. Other efforts, such as Vision Zero campaigns, have focused on increasing traffic safety. In the state, the Sustainable Communities and Climate Protection Act (SB 375) implementation efforts are

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[3] BARHII and ChangeLab Solutions. Healthy Planning Guide. Available at www.changelabsolutions.org/sites/default/files/BARHII_Healthy_Planning_Guide_FINAL_web_090821-rebrand.pdf

attempting to integrate regional transportation planning with land use and housing to reduce greenhouse gas emissions from the transportation sector.

Examples of long-range planning include:
- Health elements in general plans
- Master plans: open space master plans, food systems plan, sustainability action plans
- Neighborhood-specific plans
- Commercial corridor plans

Examples of land use regulations:
- Updates to zoning code regulation building and site design
- Zoning updates to allow for urban agriculture, community gardens, and farmers markets as permitted uses
- Limiting fast food and alcohol outlets within a certain distance of schools
- Open space zoning requirements
- Parking requirements
- Shared use agreements allowing access to school playgrounds
- Proximity of housing to parks, jobs, schools, retail
- Proximity of businesses to parks, trails, retail, public transit

Examples of transportation planning:
- Complete Streets policies
- Incorporating Safe Routes to School into local school wellness policies
- Non-motorized or active transportation plan
- Transportation demand management
- Vision Zero
- Long-range transit plan

LICENSING AND PERMITTING

Local governments license and permit a variety of services that have implications for healthy communities by ensuring that businesses and other entities meet minimum standards for safety. For example, food and alcohol licenses regulate restaurants, bars, and other venues. Building permits authorize the construction or renovation of a building and enforce building codes to ensure that buildings meet minimum safety and structural standards. Food service permits are needed for the operation of food establishments and restaurants. The fees from the licensing and permitting process is also a major source of revenue for local governments.

Examples of licensing and permitting:
- Food service permits
- Healthy food retail certification programs
- Alcohol licenses
- Building permits
- Food service permits

FOOD-SPECIFIC REGULATIONS

Many regulations exist to ensure access to safe, healthy, affordable, and nutritious foods. Food-specific regulations include nutrition information on menu items, nutrition standards for food served or sold in municipal buildings or worksites[4], food handling and safety requirements, and whether the zoning codes allow for community gardens and urban agriculture and livestock. Other regulations may also curb food marketing to children. These food-related regulations can facilitate safe access to nutritious, affordable foods. Nutrition standards can be an effective way to increase the availability and purchase of healthier foods while decreasing the consumption of less healthy foods. Nutrition information on menu items at restaurants make calorie information more available. Greater access to this information may help people make healthier choices by empowering them with more information. Zoning codes can enable the production of locally available, nutritious foods by allowing community gardens and urban farming in residential and commercial areas. Food handling requirements ensure that food prepared for public consumption is safe to eat or drink.

Examples of food-specific regulations:
- Nutrition information on menu items
- Nutrition standards
- Limiting food marketing to children
- Food handling and safety requirements
- Zoning codes

INFRASTRUCTURE IMPROVEMENTS

Infrastructure is the basic physical components, facilities, and structures needed for society to operate. It consists of roadways, the electrical grid, storm-water drainage systems, green spaces (parks and open spaces), etc. Infrastructure is important for health as its location, quality, and availability can facilitate or hinder good health. For example, access to parks and green spaces is associated with greater use by nearby residents, which can facilitate increased physical activity and social interactions. On the other hand, the lack of adequate infrastructure can deter good health. An antiquated and inadequate storm-water management system can lead to greater flooding during heavy rainstorms, which can result in downstream health impacts, such as increased mental and behavior health issues of local residents stemming from stress and financial burden.

Examples of infrastructure improvement issues:
- Street connectivity to open spaces and parks
- Complete parks improvements
- Complete Streets
- Storm-water management
- Green infrastructure
- Electrical grid

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[4] Onufrak SJ, Zaganjor H, Moore LV, et al. (2016). Nutrition Standards for Food Service Guidelines for Food Served or Sold in Municipal Government Buildings or Worksites, United States, 2014. *Prev Chronic Dis.* 13:160364.

ENVIRONMENTAL REGULATIONS

Environmental quality is important to public health. Exposure to environmental pollution can have detrimental impacts on people. For example, elevated concentrations of particulate matter air pollution is associated with increased respiratory-related hospitalization rates and other negative health impacts. Children who live near busy roads have greater asthma risk. Exposure to environmental tobacco smoke is associated with heart disease and lung cancer. Additionally, greenhouse gases are considered an environmental pollutant that can have far-reaching impacts on public health and safety, such as increased sea-level rise, food insecurity, and extreme heat events. Environmental regulations are rules and requirements that control the emissions from a range of sources, such as factories and other businesses, power plants, vehicles, or government operations. These regulations also control hazardous waste management and cleanup of brownfields and Superfund sites.

Examples of environmental regulations:
- Waste management regulations
- Regulations concerning greenhouse gas emissions
- Air, soil, and drinking water quality regulations
- Management of brownfields and Superfund sites

PUBLIC SAFETY

Public safety is a critical aspect of a healthy community. Only when people feel safe will they be able to venture outside to exercise, walk or bike to school, or engage with their neighbors. Public safety includes safety from crime and violence, as well as safety from injuries and collisions. Both are important aspects of PSE change to support healthier environments. Many policy and planning strategies can support increased safety within communities. For example, building facades that face the street increase the ability of pedestrians on the sidewalk to see and be seen by others, which can increase safety. Vision Zero strategies, such as reducing vehicle speeds, can result in fewer and less severe vehicle collisions with pedestrians and bicyclists.

Strategies to increase public safety:
- Adequate street lighting
- Crime prevention through environmental design strategies
- Open stairways in public buildings
- Coordinated violence prevention programs
- Vision Zero

EQUITY

Health equity is often defined as the attainment of the highest level of health for all people. This is based on an understanding that everyone deserves a fair chance to lead a healthy life and that different people—based on social, environmental, and economic circumstances—may need different resources and support to achieve their maximal health. Equity is a cross-cutting topic that touches on all aspects of local planning and policy topics discussed in this section. Low-income populations and communities of color have often dealt with historic disinvestment and experience uneven developmental patterns that have led to disproportionate impacts and disparities in life and health outcomes. Many upstream strategies address these inequities. It is also important to understand how well-intended policies and plans can inadvertently create, sustain, or exacerbate social and health inequities. SBCDPH can highlight and address these unintended consequences.

Examples of equity strategies:

- Neighborhood stabilization measures, such as rent control and just cause eviction policies
- Community benefits agreements
- Local hire requirements
- Workforce development
- Living wages and benefits
- Ensuring that policies benefit all people and do not further disadvantage impacted groups

OPPORTUNITIES FOR SBCDPH TO SUPPORT LOCAL HEALTHY PLANNING AND POLICIES

The role of the SBCDPH will vary from policy to policy and from locality to locality. The 5 policy process steps below mirror the steps outlined in *The Policy Process Playbook*. Each of the 5 steps described below highlight actions SBCDPH can take in the policy development process to advance the goals of the HCI.

Community engagement, outreach, and public participation are important aspects of policy development. As with anything in the strategic plan, community outreach and engagement activities should be calibrated to the capacity of partner communities. Community engagement and outreach activities may also vary for different neighborhoods and even in each phase of the policy process.

For each step described in this section, an introduction is provided that spells out the role that SBCDPH can play, along with action steps describing immediate, intermediate, and sustaining activities.

- **Immediate activities** are initial actions that SBCDPH can take in each stage of the policy process. In the early stages of developing relationships and working with partner communities, the immediate activities serve as a "start here" set of actions that will help guide SBCDPH's work while developing relationships with communities. As relationships with communities mature and policy development partnerships are better understood, SBCDPH may be able to start with "intermediate activities" or transition to "intermediate activities" more quickly.
- **Intermediate activities** are steps that can be taken after initial actions to move policy development forward. These actions often highlight actions SBCDPH can take to make direct contributions to each phase of policy development.
- **Sustaining activities** are actions that SBCDPH can undertake to maintain the Healthy Communities work over the longer term. These activities center on developing best practices and maintaining structure on particular key aspects, such as data management, that are central to the initiative.

THE POLICY PROCESS

The 5 steps of the policy process are shown below.
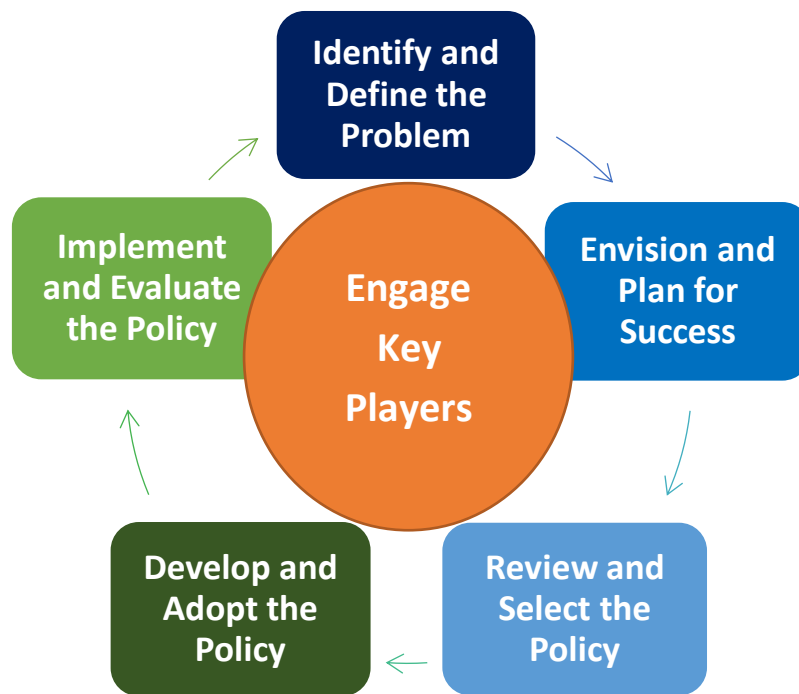
- **Identify and define the problem:** gather information about what's happening in your community and determine the scope and cause of the problem
- **Envision and plan for success:** imagine a healthy, thriving community and create a plan to make that vision a reality
- **Review and select a policy solution:** identify different policy solutions to address the problem and choose the most effective, efficient, and feasible option for your community
- **Develop and adopt the policy:** write, edit, and/or review the policy and adopt or assist with adoption.
- **Implement and evaluate the policy:** put the policy into action and assess what works and what doesn't work
- **Engage key players:** gather input and share information with government partners, community members, and decisionmakers at each stage of the policy process

HOW SBCDPH CAN SUPPORT POLICY, SYSTEM, AND ENVIRONMENTAL CHANGE

SBCDPH is a valuable partner in efforts to spur PSE changes for healthier communities. The health department has public health expertise, experience with community engagement and outreach, and is a respected member of the community. As such, SBCDPH can play many roles with varying levels of involvement throughout the policy process.

Role		Level of involvement	
Connector	Identifies other partners in the community to augment	Low	A one-time role that requires a limited time commitment and is not central to the

	support for a policy or environmental design		implementation or sustainability of the intervention (e.g. testifying at a public meeting)
Advocate	Advocates for a specific policy, decision, or change	Low	
Amplifier	Writes, speaks, blogs, or is interviewed about an issue	Medium	An ad-hoc role that requires a moderate time commitment and is not central to the implementation or sustainability of the intervention (e.g. attending three task force meetings to help design a policy)
Team Expert	Joins an existing collaboration or partnership or provides subject matter expertise	Medium	
Leader	Identifies or produces resources, convenes stakeholders, conducts assessments, or establishes multi-sectoral partnerships	High	An ongoing role that requires a significant time commitment and is central to the implementation or sustainability of the intervention (e.g. securing funding for and helping to manage implementation of policy)

STEP 1: IDENTIFY AND DEFINE THE PROBLEM

The first step in the policy process is to define the health problem, driven by the built and natural environment, in order to better understand its severity and extent. Only by identifying, defining, and adequately communicating the problem can policy leaders understand ways to address it.

SBCDPH can play a key role in investigating the problem by understanding existing health conditions and highlighting which population groups or neighborhoods may be disproportionately impacted. Findings should be broken out by relevant demographic indicators and geographic areas within the city where feasible in order to highlight health inequities. Public health practitioners within the SBCDPH also have the ability to gather new health data where needed through the use of surveys or interviews. The local health department not only has access to health data and the ability to gather new data, but has the capacity to analyze and interpret the findings. SBCDPH staff can also play a role in communicating the findings to a variety of audiences, including community residents, community groups, local businesses, policymakers, and elected officials.

SBCDPH can also support this step by examining best practices and developing guidance for assessing the health conditions within communities, identifying data sources of health behaviors and outcomes, and sharing available health data with city agencies and departments. SBCDPH can also work with HCI partners to develop data sharing agreements between the health department and relevant city agencies. By doing so, the SBCDPH can act as the hub for data on the county's health outcomes and built environment determinants.

Immediate activities:
- Host a kick-off meeting to establish regular contact and communication with the policy lead.
- Work with the partner city to create a list of events and activities that are relevant to healthy communities work, including planning and capital improvement meetings, city council meetings, planning commission meetings, community events, and community workshops.
- Inventory available data of health outcomes and health behavioral data that SBCDPH collects or houses. Work with HCI partners to identify additional data on built environment determinants collected by other city agencies.

Intermediate activities:

- After identifying a list of events and activities, establish a prioritization list to begin regular attendance.
- Conduct an analysis of existing health conditions and distribution of health impacts to define and describe the problem. Work with HCI partners and stakeholders through established communication channels to identify which health indicators are relevant to analyze. Products of these analyses could include maps, fact sheets, summaries, full technical reports, memos, or presentation slides.
- Work with HCI partners to gather additional health data, if needed, and/or interpret findings.
- Share findings from the analysis with policy leads and community stakeholders.
- Help shape discussions on defining the problem and serve as a key health advisor to the policy lead.

Sustaining activities:

- Develop data sharing agreements between SBCDPH and HCI partners.
- Investigate the creation of a county-wide data portal of health and built environment determinants data.
- Develop guidance and standards on conducting existing health condition analysis for HCI partners.
- Continue regular contact with HCI partners by attending identified events and activities or through regularly scheduled check-in meetings. Provide backbone support to the HCI.
- Convene periodic meetings for HCI partners to identify common problems being addressed, best practices for data sharing and analysis, and lessons learned.
- Working with HCI partners and stakeholders, identify a relevant set of common healthy community indicators to track progress toward goals. Produce an annual report or a dashboard on the status of healthy community indicators for the county and communities.

STEP 2: ENVISION AND PLAN FOR SUCCESS

The second step in the policy process is to envision and plan for success. After understanding the depth and range of the problem intended to be addressed through the policy intervention, this next step involves imagining what a healthy, thriving, and equitable community would look like, then creating a plan for turning that vision into a reality.

SBCDPH can play an integral role in serving as a thought partner with policy leads in shaping what success means and the steps to achieve that goal. By relying on the relationships and conversations with HCI partners initiated in Step 1: Identify and Define the Problem, SBCDPH can help engage community stakeholders about health issues and align policy goals with identified community needs. SBCDPH can also serve as an intermediary between policy leads and community stakeholders by helping to translate and amplify community voices.

Immediate activities:

- Leverage relationships with HCI partners to engage with policy leads on providing input and feedback on the visioning process.
- Attend community events and meetings to maintain understanding of context and priorities within each city.

Intermediate activities:

- Engage community stakeholders in collaboration with HCI partners. Outreach and engagement activities could include pop-up workshops at community events, community meetings at anchor institutions, youth engagement, etc. SBCDPH can also be integral in collecting community input through mixed methods such as surveys, focus groups, and key informant interviews, if needed to inform envisioning success discussions.

- Lift up community voices, experiences, and insights of a vision for a healthy, equitable community to policy leads.

Sustaining activities:
- Maintain regular contact with HCI partners by attending identified events and activities or through scheduled check-in meetings.
- Work with HCI partners to develop best practices for community engagement and outreach activities. As different communities will have varying orientation to community outreach and engagement, SBCDPH will need to individually calibrate levels of engagement given partner city capacity.
- Continue to serve as a voice for community stakeholders in the policy development process.
- Serve as a mediating role between community stakeholders and policy leads if conflict or tension arises during the policy development process.

STEP 3: REVIEW AND SELECT THE POLICY

The third step of the policy process is to review and select the policy. After defining the problem and determining what success looks like, this stage involves identifying and reviewing policy options and selecting a policy solution. On the outset, there may be a number of possible avenues. This step involves analyzing options and selecting a policy that will work within the local political context, achieves the intended goal, and is responsive to identified community needs. It is important to note that not all policy solutions will work in every city, and the same policy solution may be implemented differently in partner communities.

SBCDPH can play an important role by assisting with identifying policy solutions and researching best practices. The health department can also assess and provide input on the potential health implications of policy options under consideration. SBCDPH should be especially attuned to unintended consequences of policy options. Through its relationships with HCI partners, the health department can also advise policy leads on policy selection. By working with community stakeholders, SBCDPH can also help to translate the implications of policy options to community members, as well as communicate input and feedback from community stakeholders on the policy selection process back to policy leads. In this way, SBCDPH can ensure that the policy solution selected aligns with the desires of community stakeholders and attempts to mitigate any potential negative outcomes. As the review and selection of the policy may take some time, SBCDPH should remain engaged in the process over the long term.

Immediate activities:
- Through established communication channels, remain in contact with policy leads regarding the policy identification and selection process. Finds ways to provide feedback and input on the health implications of policies under consideration in constructive ways, leveraging the relationships built over time.

Intermediate activities:
- Host community workshops, meetings, and other outreach events to share information with community stakeholders and gather community input on the policy selection process.
- If time allows and if there is interest, conduct a health assessment of policy options, especially of preferred policy options, using data on health outcomes and determinants (rapid health impact assessment). Collect additional health data through focus groups, surveys, or interviews to inform assessment, if needed.

Sustaining activities:
- Establish best practices and standards among HCI partners for conducting analysis of potential policy options.
- Develop frameworks and tools to organize and coordinate programs toward collective policy goals.
- Continue regular contact with community stakeholders and HCI partners.

STEP 4: DRAFT AND ADOPT THE POLICY

The fourth step in the policy development process is drafting and adopting the policy. After identifying the problem, envisioning success, and selecting the policy option, this step is about creating the policy language and ensuring its adoption.

SBCDPH can help support the policy lead in drafting policy language that aims to improve community health and mitigate potential negative outcomes. The health department can also help ensure that the policy is accurately informed by existing health conditions, paying particular attention to health inequities and community priorities. SBCDPH can also engage with community stakeholders to ensure that strategies do not inadvertently create or exacerbate other problems.

In the policy adoption process, SBCDPH can provide elected officials with the health basis of the policy and an understanding of how the policy will address the problem. Ultimately, elected officials are responsible for representing their constituents and are more likely to vote in favor of the policy if they hear significant support. SBCDPH can assist with policy adoption through multiple ways, such as submitting letters of support, presenting at policy adoption hearings, and/or hosting community events and meetings to communicate the policy to community stakeholders. As with any policy development and adoption process, timelines can vary widely. SBCDPH should commit to staying engaged in the process.

Immediate activities:
- Research model policy language to share with policy leads. ChangeLab Solutions has a wide array of model policy language that can be found on its website: www.changelabsolutions.org.

Intermediate activities:
- If time and interest allow, conduct a health assessment of potential strategies using existing data on health outcomes, health behaviors, and built environment determinants, with careful attention toward whether and how potential strategies may generate, sustain, or exacerbate existing health inequities (rapid health impact assessment). If needed, collect additional health data through focus groups, surveys, or interviews.
- Work with policy leads on developing policy language and selection of strategies that aim to improve community health and mitigate potential negative outcomes.
- Submit letters of support to elected officials and/or present health data to assist elected officials during policy adoption hearings.
- Host community events or meetings to present health data and the policy to community stakeholders. Present health data and translate policy language and strategies into understandable concepts for the lay audience.

Sustaining activities:
- Develop an informational packet on a range of common policy strategies to share with HCI partner communities and localities. These packets can serve as a starting point, or a menu of options, for future discussion related to potential policy solutions and strategies.
- Develop a protocol for regular participation of SBCDPH in local policy development processes and share this with HCI partners. This could include a menu of services the health department can provide to partner communities, such as responding to data requests, reviewing and responding to assistance needs, and supporting policy development and adoption.
- Work with HCI partners to use health data to support policy development and adoption.
- Support city staff in introducing policy ideas and actions to higher-level policymakers.

STEP 5: IMPLEMENT AND EVALUATE THE POLICY

The fifth and final step of the policy development process is to implement and evaluate the policy. After identifying and defining the problem, envisioning success and setting goals, selecting the policy option, and developing and adopting the policy, this step ensures the policy is implemented successfully and accomplishes the intended goals and outcomes.

SBCDPH can play an important role in this step by serving as a resource during implementation. For instance, the health department could provide existing health data on communities within the city for prioritization purposes. Data can help identify areas of the city that need assistance the most. SBCDPH can also play a part in promoting the policy by sharing information on the health department's website and providing information at community events and meetings. There may also be opportunities to coordinate with policy leads on grant proposals. For example, a healthy food retail policy could benefit from additional funding to support healthy corner store conversions in key locations that lack healthy food options.

SBCDPH will also be critical to evaluating policy implementation. The health department can use existing access to health data to track and measure changes in health determinants or outcomes. SBCDPH could also work with other city agencies to collect data on policy implementation and outcomes generated. For example, the use of healthy indicators or a dashboard can identify key metrics that can measure changes, such as chronic disease rates, self-reported physical activity levels, parkland level of service, etc. Please note that changes may take time to achieve; this important point will need to be communicated to all audiences during the evaluation phase. In addition to tracking and measuring change, SBCDPH can also help with communicating the outcomes of the evaluation to various audiences. Most importantly, the health department can help identify concerns highlighted in the evaluation, raise them to the attention of the policy leads, and help identify strategies to resolve any issues regarding policy implementation.

Immediate activities:
- Assist with communication about the policy through SBCDPH's website, community events or meetings, and other communication channels.
- Coordinate on grant proposals to support policy implementation.

Intermediate activities:
- Gather and track health data to evaluate policy implementation and changes in health determinants and outcomes. New data may need to be gathered through the use of surveys, interviews, and focus groups.

Sustaining activities:
- Track the use of healthy eating and active living policy strategies across the county.
- Convene periodic meetings with Healthy Communities partners to discuss use of policy strategies across the county; ways to share information, ideas, and lessons learned; and use of health data to inform their efforts.

DEFINE SUCCESS AND MEASURE PROGRESS

This section identifies expected outcomes of policy strategies and approaches included in the strategic plan. The identification of outcomes and additional considerations can be used to help SBCDPH track progress and outcomes. The important consideration here is that determining which outcomes are important to monitor and the identification of health indicators to track will require conversations with the partner cities and localities.

EXPECTED OUTCOMES

SBCDPH can play an integral role in understanding and measuring expected outcomes from policy development, adoption, and implementation. These outcomes also encompass internal processes that SBCDPH should track, such as the number of interactions with policy leads and other stakeholders. Direct and indirect outcomes associated with the policy development process include measureable improvements in the built environment or changes in how local government agencies collaborate with each other. Both of these types of measures—internal process and outcome of the policy process—can be monitored to provide greater understanding on the resources required to support the Healthy Communities Initiative as well as whether healthy policies and plans produce the intended outcomes.

The internal processes that SBCDPH tracks could help inform work planning and resource allocation, and could guide the health department on where additional assistance with the HCI may be warranted.

Outcomes	Description	Timeline for measureable changes
Internal SBCDPH processes		
Changes in the level and degree of SBCDPH's involvement in the policy process across the county	These could involve an array of activities SBCDPH has engaged in with the policy leads and other stakeholders during the policy process, such as the number and degree of interactions with local government, the level and degree of assistance provided throughout the policy process—such as supporting health data analysis, communication of findings, or engaging with community stakeholders—and activities to support drafting of policy language and its adoption.	N/A
Outcomes associated with the policy process		
Changes in government processes and operations	Through policy development, changes in government processes can include changes in how decisions are made, how government agencies collaborate to create policy change, how strategies are prioritized and funded, and who is involved in the decisionmaking process.	1–3 years (shorter term)
Policy change	Adoption of policies can be tracked over time. Changes can include identification of policy options and development of strategies.	3–5 years (mid-term)
Environmental change	Policy change can contribute to environmental change. These changes can include changes to the built environment, environmental quality, or neighborhood livability. This could also include changes in opportunities, access to resources, and affordability of resources.	5–10 years (mid- term)
Behavioral change	Environmental change can contribute to behavioral change. Behavioral changes could involve increases in walking and biking subsequent to investments in road infrastructure or increased consumption of fruits and vegetables as a result of a healthy foods retail policy.	5–10 years (mid-term)
Health outcomes	Behavioral changes stemming from environmental changes can contribute to changes in health outcomes. Health outcomes could include changes in rates of chronic conditions such as diabetes and heart disease. Other health outcomes may be improved mental and behavioral health.	10+ years (longer term)

TRACKING AND MONITORING CHANGES

Conversations with communities will illuminate which of the above expected outcomes and related measurements would be important to track. SBCDPH can assist with monitoring these changes through an array of data sources and methods.

- **Quantitative data:** Using existing health data (such behavioral data, health outcomes, and social and environmental determinants) can highlight changes in environmental, behavioral, and health outcomes. Data should be broken out by demographics, such as race or ethnicity and income levels, where feasible.

    Potential sources of quantitative health data include:
    - Behavioral Risk Factor Surveillance System (BRFSS)—State-level data about health-related risk behaviors, chronic health conditions, and use of preventive services among adults
    - Youth Risk Behavior Surveillance System (YRBSS)—State-level data about health-risk behaviors that contribute to death and disability among youth and adults.
    - CDC's 500 Cities project—City- and census tract–level data for chronic disease risk factors, health outcomes, and use of preventive services for the largest 500 cities in the United States, including several San Bernardino County cities
    - Community Commons—Mapping tool for communities
    - California Health Interview Survey—State health survey on a wide range of health topics
    - CalEnviroScreen 3.0—Screening methodology and data source on disproportionate burden by multiple sources of pollution and socioeconomic vulnerabilities

- **Mapping:** Mapping of quantitative data can help visually highlight changes where resources and infrastructure exist across the county as well as differences in geographic distribution of health outcomes and determinants.
- **Qualitative data:** Qualitative data, such as key informant interviews, focus groups, and surveys, can play an important part in understanding changes in neighborhood quality, perception, and access to resources and opportunities.
- **Healthy indicators and dashboard:** The identification and use of healthy indicators and the creation of a dashboard of a set of relevant indicators can help convey the health status of community residents and track changes.

TOOLS TO ACT

The Healthy Communities Strategic Plan and *The Policy Process Playbook* are two resources that provide support to the Healthy Communities Initiative. They will help guide cities and localities in San Bernardino County through the policy process and provide resources and step-by-step actions for how the health department can be a strategic partner in creating healthier communities through PSE change. *The Policy Process Playbook* can also serve as a reference for SBCDPH to learn more about the policy process along with available resources and references. It also highlights other key players in the policy process. Both of these resources can be used in tandem by SBCDPH to support cities and localities through the Healthy Communities Initiative.

The Policy Process Playbook

People across San Bernardino County want to live, work, play, and learn in environments that promote healthy lifestyles; they also want families and community members to be healthy and to thrive. But what does it really take to make that vision a reality?

From identifying and defining the problem, to reviewing and selecting a policy strategy, this Playbook guides Healthy Communities partners through each step of the policy process and provides information on how and why policy can be a useful tool for creating healthy communities.

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Introduction

Health is one of our most precious resources. People across San Bernardino County want to live, work, play, and learn in environments that promote healthy lifestyles; they also want families and community members to be healthy and to thrive. But what does it really take to make that vision a reality?

We all need healthy food, safe parks, and green spaces for recreation and play, along with clean water and air. We need access to affordable, healthy, culturally appropriate food in our schools, workplaces, and stores. We need to be able to get around safely on foot and bicycle. We need the places where we live, study, work, and play to be tobacco free. We need homes that are safe, well maintained, affordable, and located in neighborhoods that provide access to daily needs. We need communities that are free of violence, where there are good jobs and opportunities to start and grow our own businesses. We need healthy schools where our kids can learn, grow, and succeed. We need to feel connected to our neighbors and our communities.

As a Healthy Communities partner, you have experience developing and implementing health programs, initiatives, and activities to create healthy environments for all people in your community. *The Policy Process Playbook* supports your work by guiding you through each step of the policy process—from identifying and defining the problem to reviewing and selecting a policy strategy. By the end of this Playbook, you will have a clear understanding of what policy is, how policy can support and strengthen existing health initiatives and programs, and how to work on policy.

How Can This Playbook Support Your Work?

Goals and Objectives of the Healthy Communities Initiative

The goal of the San Bernardino County Department of Public Health (SBCDPH) Healthy Communities Initiative is to create healthy environments and promote healthy lifestyles through policy, systems, and environmental change.

Based on feedback from SBCDPH and cities across the county, there are two main objectives for achieving this goal:
- Create healthy food systems
- Create active environments

Several policy approaches for accomplishing these objectives are mentioned throughout the Playbook. We've highlighted these policy approaches with callout boxes that provide a brief description of the policy. In addition, there are policy-specific resources included in the second section of this Playbook.

Take a second to think about how you typically start a new health initiative or program. Maybe you start by learning more about community needs through talking to community members. From there, you may convene a team of experts with various strengths and resources to identify how to address community needs. Then, you put together a plan, implement a solution, track and evaluate how well the solution works, ask community members how they think it worked, and start again from the beginning.

Through collaboration with San Bernardino County Department of Public Health (SBCDPH) and discussions with Healthy Communities partners, we know that many partners have experience using a sequence of steps similar to the ones above. Partners have conducted needs assessments, collaborated with community members through education programs and services, and implemented health programs to improve behaviors such as eating healthy foods and participating in physical activity. The good news: These activities lay the groundwork for successful policy development and implementation. The hard part is understanding how these activities can lead to policy change. That's where this Playbook comes in.

The purpose of this Playbook is to help Healthy Communities partners understand the basics of policy, how their current health programs and initiatives can be supported and strengthened by policy, and how to create policy change. The Playbook is broken into two sections. The first section defines policy and describes why partners should work on policy. The next section describes the steps of the policy process and includes real-life examples of how policy has helped create healthy communities.

What Do We Mean by Policy?

Policy is a tool used to change physical environments, community norms, and the way organizations and systems operate. Policies have three defining characteristics:

- They are written statements that reflect the values and decisions of a public body or private organization.
- They are binding and enforceable.
- They apply broadly to a geographic area, type of institution, physical space, and/or group of people.

Policies can be adopted within an organization or by local, state, or federal governments. *This Playbook specifically focuses on local and state policies*. Below are examples are what we mean by local, state, and organizational policy.

Local or community-level policies include ordinances, resolutions, budgets, specific plans, master plans, or general plans adopted by a county or city council. They also include executive orders adopted by the mayor. Examples of local policies that create healthy communities include the following:
- A general plan update requiring bicycle parking in all new developments as a condition of approval
- A master plan coordinating public and private investment in prioritized infrastructure improvements supporting active transportation
- A licensing ordinance requiring all food retailers to offer and/or sell healthy foods and beverages

State policies include laws, resolutions, statutes, and budget appropriations adopted by state legislatures. They also include executive orders adopted by the governor. Examples of state policies that create healthy communities include the following:
- The California Complete Streets Act which requires cities and counties to include complete streets policies as part of their general plans
- Governor's executive order establishing the California Health in All Policies Task Force to identify policies, programs, and strategies to improve the health of Californians

Organizational policies include policies adopted by *individual* businesses, nonprofits, faith-based institutions, schools, or government agencies. For example, if the San Bernardino County Department of Public Health adopts a policy allowing its employees to use paid time to participate in physical activity, this is an organizational policy because it does not apply to employees in all county agencies.

General plans, which cities or counties are required by state law to adopt, lay out plans for the physical development of the city or county. Many cities and counties incorporate language to address health problems in their general plans.

Specific or master plans establish policies, programs, priorities, design criteria, and/or capital projects to guide change in defined areas or improve elements of cities such as bike and pedestrian infrastructure.

A licensing ordinance for healthy food retail requires all stores with a grocery permit to sell a minimum variety and type of healthy foods and beverages.

Health in all policies is a collaborative approach to improving the health of all people by incorporating health considerations into decisionmaking for different sectors and policy areas.[3]

Complete streets policies change how streets are designed and built so that community members of all ages and abilities can travel easily and safely along community streets, whether they are walking, biking, or riding the bus.

Why Should You Work on Policy?

Policy Applies Broadly Across the Community

Policy has the potential to affect the decisions and behaviors of entire populations. For example, public awareness and education campaigns or programs may influence a few people to bike or walk to work or school. However, a state or local complete streets policy can ensure safe bike and pedestrian routes across the community, making it easier for more people to bike or walk to work or school. Policies can also coordinate funding for and implementation of programs that address different populations but share common desired outcomes.

Policy Can Address and Prevent Health Inequities

Chronic diseases such as heart disease, cancer, and diabetes are the leading causes of death in San Bernardino County.[1] In many San Bernardino County communities, people of color, people in low-income neighborhoods or rural communities, people with disabilities, older adults, and many others experience higher rates of chronic diseases and worse health outcomes. Policy has the potential to address and prevent health inequities so that all members of the community have opportunities to attain optimal health—regardless of race, level of education, gender identity, mental or physical ability, location, job status, or sexual orientation.[2]

For example, policies such as zoning ordinances make it possible for communities to have farmers markets and community gardens. This can improve access to healthy foods for community members living, working, playing, and learning in areas without grocery stores or other healthy food retail.

> **Zoning** is used to regulate the use of land in a community. Zoning laws may govern both the physical nature of buildings (size, height, or location on a lot) and the way buildings may be used in a particular area.

Policy Change Is Sustainable

Although policy is just one tool used to improve health outcomes, it often achieves lasting, significant results more efficiently and at a lower cost than other tools or interventions. Strong policy can survive changes in leadership, funding, political will, and much more. For example, if your community has a pop-up farm stand on an unused lot but does not formally have permission to use the lot, what happens if the city decides it would like to build or reclaim that space? There is no guarantee that the farmers market would continue. But, zoning codes can be changed to protect the farmers market.

The Social Determinants of Health: Policy as a Tool for Prevention, Not Perpetuation

Policy can affect health outcomes by shaping our environments as well as changing the social and economic systems that surround us.

As powerful as policy can be in shaping healthy communities, it is important to be aware that, layered upon one another, policies for housing, transportation, and development have also been a significant force in creating and perpetuating health disparities through intentional discrimination (eg, Jim Crow laws); through discriminatory implementation of fair policies (eg, housing mortgage redlining); and through unintended impacts to minority or vulnerable populations (eg, school discipline practices such as zero tolerance, highway construction through poor and minority neighborhoods, or local nuisance laws that are inequitably enforced).

All of these policies are interrelated. There are many ways that these policies continue to unintentionally create social and economic systems that yield health disparities. And the groups that historically benefited the most from these policies continue to do so, widening wealth and health gaps.

However, in the same way that policies have led to health disparities, policies can transform those same existing unjust structures and systems, turning them into equitable ones. Where some policies have enabled injustice, policy can now be used to help communities thrive.

While policy has fueled these health disparities, it may also be the most effective tool for addressing and preventing future health disparities. To learn more about the social determinants of health, and how to address them, check out this chapter from the Community Toolbox: Addressing Social Determinants of Health and Development.

The Policy Process
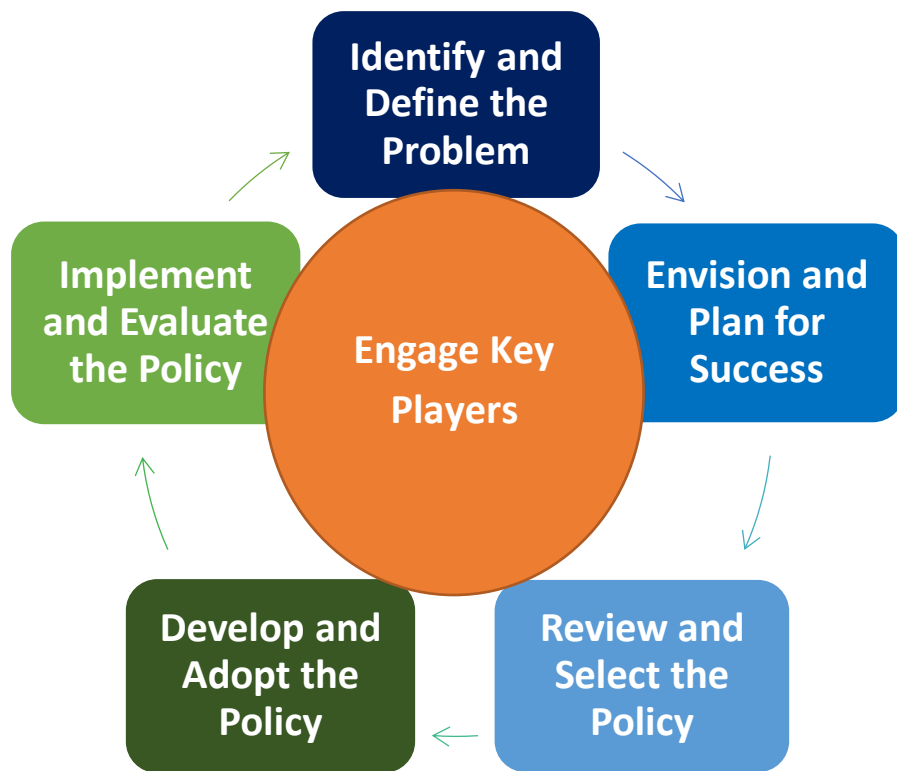
- **Identify and define the problem:** gather information about what's happening in your community and determine the scope and cause of the problem

- **Envision and plan for success:** imagine a healthy, thriving community and create a plan to make that vision a reality

- **Review and select the policy:** identify different policy solutions to address the problem and choose the most effective, efficient, and feasible option for your community

- **Develop and adopt the policy:** write, edit, and/or review the policy and adopt or assist with adoption

- **Implement and evaluate the policy:** put the policy into action and assess what works and what doesn't work

- **Engage key players:** gather input and share information with government partners, community members, and decisionmakers at each stage of the policy process

Key Players in the Policy Process

Several key players—government agencies and departments; community members; community-based organizations; and anchor institutions like hospitals and universities, faith-based organizations, businesses, and policymakers—have roles to play in building healthier communities. The table below lists potential key players, including the Healthy Communities partners, and their responsibilities in the policy process.

Policy lead The person, agency, or organization responsible for guiding the work	**HEALTHY COMMUNITIES PARTNERS** Responsibilities: • Guide the policy process • Engage government partners, community stakeholders, and decisionmakers • Organize in-person meetings or workshops with government partners, community stakeholders, and decisionmakers • Conduct a needs assessment to identify and define the problem • Guide the vision and plan for creating a healthy community • Identify and secure funding • Build public will for policy changes and healthy communities • Draft and/or review the policy • Implement health programs, initiatives, or activities that align with and support the policy • Establish shared measurement practices for evaluating the policy change
Government partners Entities or agencies that can contribute resources, expertise, or information to the policy process	**SAN BERNARDINO COUNTY DEPARTMENT OF PUBLIC HEALTH** Responsibilities: • Assist the policy lead in community stakeholder and decisionmaker engagement • Provide the policy lead with county-level health data • Review the policy and provide recommendations related to health behaviors and health outcomes • Lead the implementation of programs or other health initiatives to support the policy **PLANNING DEPARTMENT** Responsibilities: • Assist the policy lead in decisionmaker engagement • Review the policy and provide recommendations related to general plans, zoning, development guidelines, and other planning issues • Lead the implementation of programs or other health initiatives to support the policy **PUBLIC WORKS/TRANSPORTATION DEPARTMENT** Responsibilities: • Assist the policy lead in community stakeholder and decisionmaker engagement

	• Review the policy and provide recommendations related to infrastructure projects such as streets; open space; water; and sewer design, construction, and maintenance • Lead the implementation of programs or other health initiatives to support the policy
	## POLICE/FIRE Responsibilities: • Assist the policy lead in community stakeholder and decisionmaker engagement • Review the proposed policies and provide recommendations on implementation and enforcement related to safety and emergency response • Lead the implementation of programs or other health initiatives to support the policy
	## PARKS AND RECREATION Responsibilities: • Assist the policy lead in community stakeholder and decisionmaker engagement • Review the policy and provide recommendations related community open space and facilities administration, maintenance, and programming • Lead the implementation of programs or other health initiatives to support the policy
	## SCHOOLS/SCHOOL BOARD Responsibilities: • Assist the policy lead in community stakeholder and decisionmaker engagement • Review the policy and provide recommendations related to school curriculum, programming, administration, improvement, and maintenance as well as student and family needs and experiences • Lead the implementation of programs or other health initiatives to support the policy

Decisionmaker(s) The persons, entity, agency, or organization that has the authority to pass or adopt the policy	**ELECTED OFFICIALS** Responsibilities: - Direct the policy lead to complete a needs assessment and submit recommendations for addressing the problem - Collaborate with the policy lead to guide the work - Champion healthy community policies among other elected officials and city leaders - Pass and adopt the policy
Community stakeholders Any person or group of people that benefit from, or are affected by, the problem and, ultimately, the policy change	**COMMUNITY MEMBERS** Responsibilities: - Participate in needs assessment surveys, in-person meetings, and workshops to identify and define the problem - Participate in the development of the vision for the community - Assist the policy lead in engaging other community stakeholders and mobilizing community support for policy change - Review the policy and provide input on whether this policy addresses community needs - Provide feedback on how the policy is working after adoption and implementation
	BUSINESSES Responsibilities: - Participate in needs assessment surveys, in-person meetings, and workshops to identify and define the problem - Participate in the development of the vision for the community - Assist the policy lead in engaging other community stakeholders and decisionmakers - Review the policy and provide input on whether the policy addresses community needs - Provide feedback on how the policy is working after adoption and implementation - Champion healthy community policies among business leaders
	COMMUNITY ORGANIZATONS Responsibilities: - Participate in needs assessment surveys, in-person meetings, and workshops to identify and define the problem - Participate in the development of the vision for the community - Assist the policy lead in engaging other community stakeholders and decisionmakers and mobilizing community support for policy change - Review the policy and provide input on whether the policy addresses community needs - Provide feedback on how the policy is working after adoption and implementation

Step 1: Identify and Define the Problem

The first step in the policy process is to identify and define the problem. We all have assumptions about the problems that exist in our communities, but collecting and analyzing data can create a clearer understanding of community needs.

Identify the Problem

Review and Analyze Existing Data

Health disparities, issues, opportunities, and trends in health outcomes can be identified by gathering and analyzing data. There are many existing national data sources, such as the Behavioral Risk Factor Surveillance System, U.S. Census, and County Health Rankings & Roadmaps, that Healthy Communities partners can use to help identify and define the problem. In addition, there are many local data sources in San Bernardino County that partners can access. These local data sources include the Community Vital Signs Initiative, a county-wide health assessment.

> ### THE KEY PLAYERS OF STEP 1
>
> **Healthy Communities partner city:** Gather data from government partners and community stakeholders
>
> **San Bernardino County Department of Public Health:** Share existing data and support the gathering of new health data
>
> **Appropriate government partners based on the problem:** Share existing data and support the gathering of new health data
>
> **Community members, businesses, organizations:** Participate in needs assessments and in-person meetings or workshops and assist in further community stakeholder engagement
>
> **Decisionmakers:** Direct the partner city to conduct a needs assessment; review data findings

Gather New Data

Gathering and analyzing existing data is just one piece of identifying and defining the problem. It is also important to gather new data about the environment and from the community stakeholders who are most affected by the problem. Needs assessments, such as surveys (in-person, telephone, or mailed), informal community meetings, and seminars or workshops, are good ways to gather new data from community stakeholders. Existing conditions studies and maps are also important ways to understand where there are assets and barriers to healthy eating and active living. There are several sample needs assessment surveys, including this Community Needs Assessment Survey Guide with a sample survey, which Healthy Communities partners can use to help identify and define the problem.

Define the Problem

What's Happening and Why?

Now that you have gathered existing and new data to help identify the problem, you can begin to define the problem. Defining the problem can lead partners and other key players to potential policy strategies to address the problem. The problem can be defined in terms of what's happening (how many people are not getting the recommended amount of physical activity) and what's causing it (a lack of safe places to play).

Problem: Certain neighborhoods do not have access to healthy food options.	Problem: People are not getting the recommended amount of physical activity.
Data gathering: • Map ½ mile and 1 mile market areas for all grocery stores, corner stores, and restaurants in the focus area • Conduct a community needs assessment survey to find out where community members currently buy healthy foods	Data gathering: • Map existing sidewalk and bike lane networks • Map neighborhoods within ¼ mile and ½ mile walking distance of all publicly accessible open spaces in the focus area • Conduct a community needs assessment survey to determine other barriers to physical activity in the community

Using Data to Support Policy

Using data to back the case. When the owner of a convenience store in San Francisco's low-income Tenderloin neighborhood approached the planning commission for a liquor license, he hoped the commissioners would agree that the small selection of groceries he planned to offer would help satisfy the local demand for healthy foods. However, community residents felt differently, and gathering data helped support their case.

Using a mapping tool such as Community Commons, the community was able to study food access in the neighborhood and demonstrate that the neighborhood was already oversaturated with liquor stores. Armed with the data, dozens of residents joined forces with Chris Schulman, senior policy analyst with the Mayor's Office of Economic and Workforce Development, to argue against granting the liquor license.

Documenting the impact. At a hearing before the planning commission, one resident after another stood up and described the negative impact that readily available alcohol had on neighborhood safety. When the planning commission wanted evidence that a small store could survive without selling alcohol, Schulman turned to the data to demonstrate that more than half of the corner stores in the neighborhood did not sell alcohol and that their businesses were doing well.

> "Whether we were looking for focus group data or a map of food availability in the neighborhood, the research had what we needed," Schulman says. "We turned to it at every step of the process."

A different business model. As far as community residents were concerned, the story had a happy ending: The planning commissioners voted 6 to 1 to deny the store owner the liquor license. Meanwhile, Schulman's agency helped the store owner develop a business plan for offering produce and other healthy choices. The business is building momentum without selling alcohol, Schulman reports. Thanks to the data, he says, "We were able to make a case for a different model."

RESOURCES

General tips and guidance for gathering data
- Ten Steps in Information Collection—Steps for collecting information and learning about the problem
- Pedestrian and Bicycle Information Center—Resources on conducting walk and bike audits in your communities
- Neighborhoods by Numbers—An introduction to finding and using small-area data to help make better community-level decisions

Existing data sources
- Behavioral Risk Factor Surveillance System (BRFSS)—State-level data about health-related risk behaviors, chronic health conditions, and use of preventive services among adults
- Youth Risk Behavior Surveillance System (YRBSS)—State-level data about health-related risk behaviors that contribute to death and disability among youth and adults
- Centers for Disease Control and Prevention's 500 Cities project—City- and census tract-level data for chronic disease risk factors, health outcomes, and use of preventive services for the largest 500 cities in the United States, including several San Bernardino County cities
- Community Commons Mapping tool for communities

Engaging partners and stakeholders through workshops and participatory planning
- The Changemaker's Guide: A Community Planning Curriculum—Introductory curriculum for workshops including activities, icebreakers, and accompanying materials (offered in Spanish and English)

Learning from partners and stakeholders through surveys and focus groups
- Community Description Worksheet—Sample worksheets for recording community information such as demographics and community issues and goals
- Guidelines for Individual Interviews—Tips for conducting individual interviews with stakeholders.
- Community Needs Assessment Survey Guide with sample survey—Guide on developing and conducting a community needs assessment
- Comprehensive Needs Assessment with group worksheets—A workbook, complete with worksheets, that walks users through the basics and development of needs assessments

Step 2: Envision and Plan for Success

Let's say the problem in your community, identified through gathering existing and new data, is that only 20% of community members consume the recommended amounts of fruits and vegetables every day. As you defined this problem, you also determined that the main cause was the lack of access to affordable fruits and vegetables. In step 2 of the policy process, Healthy Communities partners use their understanding of the problem to develop a vision for the community and a plan to get there.

Envision Success

Define Your Healthy Community

What will success look like at the end of this process? Perhaps the vision for your healthy community includes all community members having access to fresh fruits and vegetables within 1 mile of their homes or creating a network of bike lanes connecting neighborhoods to schools, workplace districts, and activity centers across the city.

No matter what success looks like, establishing a vision helps clearly define your endpoint and facilitate the policy prioritization process in the future. In addition, partners must ensure that the vision reflects the needs of government partners, community stakeholders, and decisionmakers.

Plan for Success

What Needs to Happen and When?

The vision for the community may be broad, but the plan for reaching the vision needs to include specific objectives. Using the visions above as examples, here are ideas for specific objectives for each:

THE KEY PLAYERS OF STEP 2
Healthy Communities partner city: Guide the vision and plan for creating a healthy community; engage government partners, community stakeholders, and decisionmakers; organize in-person meetings or workshops to envision and plan for success
San Bernardino County Department of Public Health: Engage stakeholders about health issues and opportunities relevant to the project as well as the vision where appropriate
Appropriate government partners based on the problem and vision: Participate in the envisioning and planning process
Community members, businesses, organizations: Participate in the envisioning and planning process
Decisionmakers: Monitor and participate in the envisioning and planning process

Vision: All community members will have access to fresh fruits and vegetables within 1 mile of their homes.	**Vision: A network of bike lanes will connect neighborhoods to schools, workplace districts, and activity centers across the city.**
Objectives: • By December 2017, the partner city will work with 3 existing food retailers in an underserved area of the community to help them offer more fresh fruits and vegetables. • By March 2018, the partner city will work with the planning department to establish a farmers market in an underserved area of the community.	Objectives: • By December 2018, the partner city will work with the planning and transportation departments to adopt a Complete Streets resolution. • By December 2020, the partner city will create a planned bicycle lane network as part of an adopted active transportation master plan. • By December 2022, the partner city will work with the transportation department to ensure primary bike routes and high-need areas are prioritized when adding bike lanes.

Planning for Health

Creating a vision. Santa Clara County, California, is one of the most affluent communities in the country. Yet health inequities persist among the county's 2 million residents. The percentage of adults who are overweight or obese increased between 2000 and 2009, and African Americans, Latinos, and adults with household incomes of less than $50,000 face higher rates of diabetes than wealthier whites in the county.

By the late 2000s, elected officials had recognized that decisions about where to build community assets like housing and grocery stores disproportionately affected the health of the county's poorer populations and residents of color. In 2010, Liz Kniss, then a supervisor on the county's board of supervisors, began calling for planning policies that promoted health. Kniss had a background in health and nursing, expertise that helped her see how planning and development policies could help people be healthier or make their health problems worse.

The board of supervisors agreed with Kniss. They recommended adding a health element to Santa Clara's general plan, a policy road map that guides how the county grows and develops. The board called for a health element that would be "inclusive, innovative, and inspirational" to show how health-focused planning policies could create a more vibrant, more equitable community. By pushing for a stand-alone health element, the board of supervisors provided a pathway to greater agency collaboration at the county level.

Building a team. Starting in 2008, Santa Clara County began building a team. First, it enlisted ChangeLab Solutions' staff to lead a training on what can happen when government agencies work together to develop policies. It also worked with Raimi + Associates, an urban planning firm, to help it draft the health element. Raimi enlisted the help of other leaders in the field: Brian Fulfrost & Associates, Nelson/Nygaard, and ChangeLab Solutions. With county staff, these experts engaged in a robust dialogue about the needs of the community and goals of the document.

The team agreed that the health element should acknowledge and address the health inequities facing Santa Clara residents. It would serve as a model for other cities, organizations, and communities and focus on preventive, holistic approaches to creating healthier places and people.

During the planning process, the county asked community members what they wanted to see in a health element. "We explained what a general plan is and asked residents, 'What's important to you?'" said Bonnie Broderick, senior health care program manager at the county's public health department.

Using the feedback they received and the initial mandate to create a forward-looking policy, the group selected key topics. The health element would address many issues, such as nutrition, transportation, and climate change, and offer strategies for using health to guide decisionmaking. It would also articulate a core mission of the county: to protect and improve the lives of the county's most under-resourced communities and individuals.

Residents, community coalitions, and staff from government agencies reviewed the document and provided feedback. "Many people engaged in the process. They understood that this document underpins future policy," said Susan Stuart, a health planner. "It was completely collaborative."

Making health a priority. In early 2015, after a multiyear process, the Santa Clara County Planning Commission voted unanimously to send the health element to the board of supervisors. Later that year, the board adopted the health element, making it an official part of the general plan. The element received

an award of merit in 2017 from the American Planning Association California Chapter Northern Section for its pioneering approach to integrating planning and health.

"Many who first heard about the concept of a comprehensive health element in a county general plan were skeptical," said Bill Shoe, project supervisor and principal planner. "Now that staff have been down this road together, the convergence of planning and public health is burgeoning. After all, urban planning has its roots in public health, and good urban and regional planning comes down to doing what is in the overall best interest of the public's health, safety, and welfare."

Since the board adopted the health element, the Santa Clara partnership has been pushing the goals and strategies outlined in the health element. "We're talking to different departments, sectors, and jurisdictions in the county to see what policies we can put in place," said Broderick.

County agencies now have information connecting the dots between social and emotional health, active transportation, healthy housing, air quality, climate change, violence prevention, and safety. The county hopes this work can provide a blueprint to other local governments striving to improve health, including cities in Santa Clara County.

Ultimately, the health element is the result of successful interagency collaboration and community engagement. "The general plan is the constitution of a community," said Stuart. "Within that, the health element is a living document that can support work to create healthier, safer environments."

RESOURCES

Developing a vision
- Defining Your Vision, Mission, Objectives, Strategies, and Action Plan—Various resources on developing a vision including examples and guides

Writing objectives
- Creating Objectives—Basics of objectives including how to write them and why

Engaging stakeholders through workshops and participatory planning
- The Changemaker's Guide: A Community Planning Curriculum—Introductory curriculum for workshops including activities, icebreakers, and accompanying materials (offered in Spanish and English)

Learning from stakeholders through surveys and focus groups
- Community Description Worksheet—Sample worksheets for recording community information such as demographics and community issues and goals
- Guidelines for Individual Interviews—Tips for conducting individual interviews with stakeholders

Step 3: Review and Select the Policy

Now that Healthy Communities partners have defined the problem and envisioned what success looks like, it's time to review and select a policy solution. There may be several potential policy solutions to address community needs and create a healthy environment. However, not all policy solutions will work in every partner city, and partners may implement the same policy solution differently.

Review the Policy Solutions

Identify and Analyze Policy Solutions

Identifying potential policy solutions may seem overwhelming. To make it a little easier, the Centers for Disease Control and Prevention (CDC) created a state policy tracking system that contains more than 6,000 policies related to chronic disease prevention and health promotion.[2] Partners can use this database or work with government partners and decisionmakers to identify potential policy solutions.

After identifying potential policy solutions, partners can research to learn more about how each policy will influence health outcomes, the costs to implement the policy, the political and operational factors associated with adoption, and the feasibility of implementation. This information will help partners prioritize and select a policy solution. Again, the CDC has a useful tool for analyzing policy solutions which can be found here.

> **THE KEY PLAYERS OF STEP 3**
>
> **Healthy Communities partner city:** Lead the process of researching and prioritizing policy solutions; educate and receive input from government partners, community stakeholders, and decisionmakers when selecting a policy solution
>
> **San Bernardino County Department of Public Health:** Review and provide input on the relative health performance of policy options under consideration
>
> **Appropriate government partners based on the problem, vision, and potential policy solutions:** Participate in meetings to prioritize and select a policy solution
>
> **Community members, businesses, organizations:** Participate in surveys, workshops, or in-person meetings to identify and select the policy solution that best meets the needs of the community and addresses the problem
>
> **Decisionmakers:** Identify existing policies or practices meant to address the problem; guide or support the selection of a policy solution

Select the Policy

What Is the Priority Policy Solution?

Using the information gathered when identifying and analyzing policy solutions, partners can now begin prioritizing policy solutions. Partners, government partners, community stakeholders, and decisionmakers all need to be involved in the prioritization of policy solutions. The CDC's tool for analyzing policy solutions also includes a sample table for rating policies. Partners might find this tool useful when prioritizing policy solutions.

Problem: Certain neighborhoods do not have access to healthy food options.	**Problem: People are not getting the recommended amount of physical activity.**
Vision: All community members will have access to fresh fruits and vegetables within 1 mile of their homes.	**Vision: A network of bike lanes will connect neighborhoods to schools, workplace districts, and activity centers across the city.**

Potential policy solutions:
- Licensing ordinance for healthy retail
- Zoning for farmers markets
- General plan
- Master plan

Potential policy solutions:
- Complete Streets
- Safe Routes to School
- General plan
- Master plan

Policy change takes time
You may be noticing that the policy process takes time. At the end of step 3, Healthy Communities partners have already spent time conducting needs assessments, hosting community workshops, gathering and analyzing data, communicating with decisionmakers, researching policy solutions, and prioritizing policy solutions. It's important to note that while the process is long, and slow at times, it can lead to healthier communities in the future.

An Unlikely Policy to Increase Physical Activity

Getting creative. Creating opportunities for physical activity does not always mean building new parks, trails, or open space. Sometimes it means making existing spaces healthier.

One way to make existing parks and recreational spaces healthier is by making them smokefree. We go to parks to play with our kids, to participate in sports, or to relax and enjoy the outdoors. Creating smokefree parks is a way for communities to make outdoor spaces even more conducive to healthy living. And, many communities in San Bernardino County are doing just that.

In September 2016, the Rialto City Council unanimously voted to approve a policy that prohibits smoking in all city parks, recreation facilities, and city buildings. In so doing, Rialto joined 8 other San Bernardino County communities that have adopted smokefree park ordinances.

Engaging stakeholders. To begin building the case for policy change, surveys were distributed at farmers markets, health fairs, local parks, and community meetings for 6 months prior to the vote. The survey responses showed 96% of residents favored making all city parks smokefree, and the results were shared with council.

In addition to the community surveys, several children associated with Community Coalitions for Change spent a few hours collecting cigarette butts from 3 city parks— Rialto, Fergusson, and Birdsall. After just 1 hour in each park, the children had filled 3 glass containers with some 3,000 cigarette butts.

Making changes. The children presented these jars to the city council prior to the vote.

San Bernardino County communities with smokefree park ordinances:

- Adelanto
- Apple Valley
- Colton
- Loma Linda
- Rancho Cucamonga
- Redlands
- Rialto
- Victorville
- Yucaipa

Source: American Lung Association of California

"This is disgusting," Mayor Deborah Robertson said of the remnants of cigarette smoking. Councilman Joe Baca Jr. said the jar contents from parks were "just wrong." He thanked the children volunteers for their "engagement and service to Rialto," for spending the time to show the city council the extent of the smoking problem in city parks.

The Rialto ordinance also bans smoking e-cigarettes from parks and other city-owned properties. However, some council members would like to see the policy go further. Robertson asked city staff to come up with another ordinance banning chewing tobacco from city parks. And Councilman Ed Scott said the staff should come up with an ordinance revision that would allow San Bernardino County health department inspectors to cite bar and restaurant owners for allowing smoking on their premises—a prohibition few other cities have passed. Find out more about the Rialto story here.

RESOURCES

Identifying potential policy solutions
- Chronic Disease State Policy Tracking System—Database of state policies related to chronic disease prevention and health promotion
- Healthy Retail: A Set of Tools for Policy and Partnership—Includes innovative strategies in tobacco control, nutrition, and excessive alcohol use prevention to create a retail environment where it is easier to make healthy choices than unhealthy ones
- Healthy Planning Policies: A Compendium from California General Plans—Includes a collection of excerpts from California general plans that have gone a step beyond the traditional to promote health

Assessing and prioritizing potential policy solutions
- Eight Essential Elements for Strong Public Health Policy—Guidance on how to create sustainable public health policy
- CDC's Policy Analytical Framework—Guidance on how to identify, analyze, and prioritize policies that can improve public health

Engaging stakeholders through workshops and participatory planning
- The Changemaker's Guide: A Community Planning Curriculum—Introductory curriculum for workshops including activities, icebreakers, and accompanying materials (offered in Spanish and English)

Learning from stakeholders through surveys and focus groups
- Community Description Worksheet—Sample worksheets for recording community information such as demographics and community issues and goals
- Guidelines for Individual Interviews—Tips for conducting individual interviews with stakeholders
- Community Needs Assessment Survey Guide with sample survey—Guide on developing and conducting a community needs assessment
- Comprehensive Needs Assessment with group worksheets—A workbook, complete with worksheets, that walks users through the basics and development of needs assessments

Step 4: Draft and Adopt the Policy

This step can be the most intimidating for public health practitioners and city staff members who are more comfortable creating and implementing health programs. However, the first 3 steps of the policy process set Healthy Communities partners up for a smooth transition into the drafting and adoption phases.

Draft the Policy

Include the Key Components

Existing conditions and findings: Many state or local government policies include statements of scientific evidence, facts, summaries of relevant trends and existing conditions, and local information to establish what the identified problem is and explain why the policy is important. Often, these statements start with the word "whereas" and are found at the beginning of the policy.

Intent and strategy: This section typically articulates the strategy for addressing the stated problem and the outcome envisioned upon successful implementation of the policy.

Applicability: This is the part of the policy that explains to whom the policy applies. For example, a healthy food retail licensing policy applies to food retailers, which must comply with the policy requirements.

Policy provisions, requirements, standards, and regulations: These are the rules or elements of the policy that must be followed. For example, a healthy food retail licensing policy may require food retailers to stock a minimum variety of fresh fruits and vegetables.

Implementation and enforcement: This section will list any programs, improvements, or other implementation actions that the city or partner agencies must undertake to achieve the vision, designate which government agency or agencies responsible for implementing and enforcing the policy, include information about the penalties for noncompliance with the policy such as fines, and define the timelines for when the policy goes into effect and when evaluation reports must be shared.

Ensure Sustainability

Included in your policy should be ways to help make it sustainable. Many cities experience high staff turnover and limited resources to continue working on a problem long term. One way to ensure sustainability of a policy is to secure and maximize a variety of funding sources. This includes setting aside funding in the city budget, allocating staff time, pursuing grants, leveraging finance mechanisms such as Community Development Financial Institutions (CDFI), and pursuing shared outcomes through existing policies or programs by articulating and funding cross-sector coordination.

THE KEY PLAYERS OF STEP 4

Healthy Communities partner city: Collaborate with and educate government partners, decisionmakers, and community stakeholders to finalize language

San Bernardino County Department of Public Health: Submit letters of support and present health data to assist decisionmakers during policy adoption hearings

Appropriate government partners based on problem, vision, and policy solution: Review and provide feedback on draft policy language; assist in identifying the person, agency, or organization responsible for implementing the policy

Community members, businesses, organizations: Review and provide feedback on draft policy language

Decisionmakers: Guide the drafting process; pass or adopt the policy

Adopt the Policy

How Will the Policy Be Adopted?

Typically, more significant draft policies will be introduced to the planning commission or city council and discussed through a series of public hearings. To streamline the process, begin with a reminder of the initial directive to pursue the policy, provide a summary of feedback received from stakeholders, and present an executive summary of key policy content. After discussion and public comment, a revised version of the policy which incorporates feedback from the planning commission or city council will be voted on for adoption. The mayor or city manager may be able to directly approve executive orders, administrative processes, and smaller policy decisions that are authorized by larger policies.

In all cases, it is important to get a sense of key decisionmakers' impressions of a policy prior to adoption. Prepare for adoption hearings by assembling background information that speaks to their priorities and responds to their anticipated concerns. It is also important to ensure that representatives of stakeholder groups who were involved in the process or support the policy attend public hearings and speak in support of the policy. Ultimately, elected officials are responsible for representing their constituents and are more likely to vote in favor of a policy if they hear significant positive support from affected stakeholders at adoption hearings.

Policy Adoption Takes Time

Taking the lead. Long Beach is the second-largest city in Los Angeles County and, according to a report in *USA Today*, the most ethnically diverse large city in the United States. Community leaders in Long Beach were working on a policy that would set healthier standards for snacks and drinks purchased by city agencies. But it quickly became clear that to get the buy-in they needed, they'd have to clear up some misconceptions about exactly what the proposed policy would do.

The city received funding from the Los Angeles County Department of Public Health's RENEW LA County initiative (Renew Environments for Nutrition, Exercise, and Wellness), a program funded by the U.S. Centers for Disease Control and Prevention. Setting healthier standards for snacks and drinks at city events was identified right from the get-go as a priority for Long Beach.

"Our goal was for the city to take the lead in setting an example," said Ron Arias, former director of the Long Beach Department of Health.

The proposed policy set nutrition standards for products sold in vending machines on city property, and for snacks and beverages purchased by the city for events and meetings. The standards essentially eliminated sugar-sweetened beverages; limited artificially sweetened beverages; and limited the amount of sugar, fat, sodium, and calories in snacks.

Confusion about the standards. The policy caused some concern, however, among city employees who imagined they'd have to perform complicated calculations to figure out whether certain snacks were allowed, or that they wouldn't be able to bring in a cake for a coworker's birthday. "People conjure up all kinds of draconian outcomes," said Arias. "We weren't talking about what coworkers can do on a day-to-day basis. If you want to bring in cookies or doughnuts—that wasn't restricted. We were focused on city-sponsored events, where they provide snacks as part of that class or session or activity. It took a little bit of effort in terms of educating everyone that we weren't going to become the policy that restricted candy at Halloween."

Health department officials organized trainings for kids and adults to help build community members' support and advocacy skills. Staff from ChangeLab Solutions helped lead the trainings, sharing strategies and stories from other communities that had successfully tackled similar policies.

"This is so Big Brother." When the policy was introduced before the city council, one councilmember, Rae Gabelich, stated that she was fine with setting standards for youth-oriented venues but couldn't get behind a policy that included city-sponsored meetings and events. "This is so Big Brother to me," she declared at the meeting. "It's overcontrol."

But, after hearing local kids and other community members testify in support of the policy, she confessed that she'd changed her mind—and the city council went on to pass the new standards.

"When we start to articulate policies that are restrictive, we have to make clear how this works and how it benefits the entire community," said Arias. "It's not always obvious. With tobacco, we had the negative impacts of secondhand smoke affecting other people's health. With the beverage and snack policies, we don't have the same smoking gun type of consequence—that consuming these products hurts other people. But in the end, it does."

RESOURCES

Developing policies: Guidance on how to draft policies
- Increasing access to healthy foods
  - Reach for More: Healthier Beverage Vending for Government Agencies in Rural Settings
- Increasing opportunities for physical activity
  - Complete Parks Playbook: The Seven Elements of a Safe, Connected, and Healthy Parks System
  - Benefits of Shared Use
  - Checklist for developing a shared use agreement

Using existing model policies for healthy communities: Model language designed to be tailored to the needs of an individual city or agency
- Increasing access to healthy foods
  - Model healthy beverage vending agreement
  - Water access in schools model policy
  - Establishing a Farm-to-School Program: A Model School Board Resolution
  - From the Ground Up: Land Use Policies to Protect and Promote Farmers' Markets
  - Licensing for Lettuce: Model Ordinance and Guide for Licensing Healthy Food Retailers
  - Model Healthy Checkout Aisle Ordinance
  - Model Healthy Children's Meals Ordinance
- Increasing opportunities for physical activity
  - California Complete Streets Policies
  - California Complete Streets Local Ordinance
  - California Complete Streets Local Resolution
  - Model agreements for various sectors in California
  - Model shared use agreements
  - Incorporating Shared Use into Local School Wellness Policies
  - Incorporating Safe Routes to School into Local School Wellness Policies

Funding your policy: Resources on funding opportunities for various policies
- Increasing access to healthy foods
  - Community Development Block Grants: Linking Health and Economic Development Through Food Retail
  - Fruitful Collaboration: Funding to Promote Fruits and Vegetables in Food Retail Stores
  - Green for Greens: Finding Public Funding for Healthy Food Retail
  - Understanding the Role of Community Development Finance in Improving Access to Healthy Food
- Increasing opportunities for physical activity
  - Funding Complete Parks white paper

Step 5: Implement and Evaluate the Policy

Adopting a policy is a big step toward creating healthy communities, but the work does not stop there. The fifth and final step of the policy process is to implement and evaluate the policy. Just as Healthy Communities partners have implemented and evaluated health programs and initiatives in the past, so too must you implement and evaluate policies.

Implement the Policy

Promote the Policy

Before community members will take advantage of the policy, they have to know about it. For example, if a shared use agreement is adopted between the city and the school district, community members need to be informed so they know it is okay to use the school playground after school hours.

Healthy Communities partners can promote the policy by posting signs, sharing information on their websites, and providing updates at community meetings, to name a few ways.

Connect Existing Programs to the Policy

As mentioned throughout this Playbook, Healthy Communities partners have experience

> **THE KEY PLAYERS OF STEP 5**
>
> **Healthy Communities Partner City:** Promote the policy and connect existing programs to the policy; lead the evaluation process; share evaluation results and recommendations with government partners, decisionmakers, and community stakeholders
>
> **San Bernardino County Department of Public Health:** Gather and maintain data to help cities measure policy success
>
> **Appropriate government partners based on the policy:** Assist in the promoting the policy and connecting existing programs to the policy; assist in evaluation
>
> **Community members, businesses, organizations:** Provide feedback on how the policy is working
>
> **Decisionmakers:** Oversee the implementation and evaluation of the policy

developing and implementing health programs and initiatives. Those existing activities can help promote the policy and lead to a culture of health. For example, bike-to-work and bike-to-school events are useful programs for promoting new Complete Streets policies, and healthy cooking demonstrations can help promote new healthy food and beverage choices at a corner store after the adoption of a healthy retail licensing policy. In addition, connect program providers with the resources that the policy provides such as funding, information, or technical assistance. For example, walking school buses or crossing guard programs can take advantage of safe routes to school funding or align with routes identified for Complete Streets improvements.

Evaluate the Policy

What Works and What Doesn't Work?

Evaluation can help partners and decisionmakers determine if the policy is addressing the problem and to determine whether the policy needs to be revised to make it more effective. For example, if the number of people participating in the recommended amount of daily physical activity was the main concern, evaluators may want to know if physical activity has increased since the policy was implemented.

To measure success, evaluators will often use the data collected during the initial needs assessment in step 1 and the vision and objectives set in step 2. Evaluate changes in community behaviors, health outcomes, or other indicators to confirm that the desired outcomes are being met. If a partner city is not meeting its goals,

it may revise the policy, alter how it is implementing the policy, or implement other programs and policies that will work in conjunction with the original policy to improve health outcomes.

Finally, it's important to share the evaluation results and recommendations for improvement with government partners, decisionmakers, and community stakeholders. It is also important to note that evaluation is an ongoing practice. Once the policy's desired outcomes are achieved, communities can go further with more ambitions outcomes and more comprehensive policies.

Strengthening Policy

The policy. In 2008, Minneapolis became the first locality to adopt a healthy food retailer licensing law. The Staple Foods Ordinance requires licensed grocery stores (including corner stores, gas stations, dollar stores, and pharmacies) to carry food in four staple food groups: vegetables and fruits; meat, poultry, fish, or vegetable proteins; bread or cereal; and dairy products and substitutes.

Evaluating and strengthening the policy. In 2014, the ordinance was significantly updated to require 6 additional categories of staple foods as well as to specify minimum varieties and amounts of required foods. The updated list was based on requirements from the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and feedback from store owners about culturally appropriate foods.

The City of Minneapolis continues to partner with the University of Minnesota School of Public Health to evaluate the impact of the staple foods ordinance. The goals of the evaluation are to assess changes in healthy food availability in stores before, during, and after policy implementation and to assess changes in the nutritional quality of consumer purchases at stores. Results will be compared with a sample of grocery stores in St. Paul, Minnesota, which does not have a staple foods ordinance in effect.

Learn more about the Minneapolis Healthy Corner Stores program here.

Learn more about the evaluation plan for the program here.

RESOURCES

Implementing and evaluating the policy
- Policy Evaluation: Using Evaluation to Inform CDC's Policy Process—Guidance on evaluating actions within the policy process

Engaging stakeholders through workshops and participatory planning
- The Changemaker's Guide: A Community Planning Curriculum—Introductory curriculum for workshops including activities, icebreakers, and accompanying materials (offered in Spanish and English)

Learning from stakeholders through surveys and focus groups
- Community Description Worksheet—Sample worksheets for recording community information such as demographics and community issues and goals
- Guidelines for Individual Interviews—Tips for conducting individual interviews with stakeholders.
- Community Needs Assessment Survey Guide with sample survey—Guide on developing and conducting a community needs assessment
- Comprehensive Needs Assessment with group worksheets—A workbook, complete with worksheets, that walks users through the basics and development of needs assessments

1. Robert Wood Johnson Foundation. San Bernardino County Overall Rank. *Cty Heal Rank Roadmaps*. www.countyhealthrankings.org/app/california/2017/rankings/san-bernardino/county/outcomes/overall/snapshot.

2. Centers for Disease Control and Prevention. *A Practitioner's Guide to Advancing Health Equity*. Atlanta, GA; 2013. www.cdc.gov/nccdphp/dch/pdfs/health-equity-guide/Health-Equity-Guide-intro.pdf.

3. Rudolph L, Caplan J, Ben-Moshe K, Dillon L. *Health in All Policies: A Guide for State and Local Governments*. Washington, DC, and Oakland, CA; 2013. www.phi.org/uploads/files/Health_in_All_Policies-A_Guide_for_State_and_Local_Governments.pdf.

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